

Distribution Request for Excess Contributions From Traditional and Roth IRAs

Reporting your distribution on your tax return

Your distribution will be reported to the IRS on Form 1099-R for the year in which you take the distribution. When you receive your IRS Form 1099-R the following year, it will reflect the return of your excess contribution and the distribution type. The distribution will be reported depending on your selection in Section 2. The amount of any excess contributions to be distributed must be identified in Section 3.

1 Owner information								
First name of IRA owner	MI Last			Account nu	Account number			
Address			City			State	ZIP	
				()			
Email address*				Daytin	ne phone			
* Your privacy is important to us. For information	ation on our pr	ivacy policies, visit	www.capitalgroup.coi	m.				

Instructions for removing excess contributions

Please consult a tax advisor for information about taxable amounts and penalties.

I am delivering this request prior to my tax-filing deadline. I filed taxes or filed for an extension by the tax-filing deadline, and I am removing the excess by **October 15.*** I understand that I may need to amend my taxes if I have already filed my return. I also understand that if my request is not received in sufficient time to correct my excess contributions by my tax-filing deadline, including extensions, the correction will be reported as an excess removed after my tax-filing deadline, including extensions.

Note: A return of an excess contribution plus earnings or minus losses — If the distribution occurs prior to the tax-filing deadline, plus extensions, an excess IRA contribution is reported as a corrective distribution, regardless of your age. Earnings associated with the excess amount are also removed and reported as part of the corrective distribution. Earnings are includable in income and any earnings removed are taxable for the year in which the contribution was made.

OR

I am removing the excess after the tax-filing deadline, plus any applicable extensions.

- **Notes:** A normal distribution After the tax-filing deadline, excess contributions are reported as normal distributions if you have attained age 59½. Earnings remain in the account.
 - An early distribution After the tax-filing deadline, excess contributions are reported as early distributions if you are under age 591/2, and the distribution may be subject to early distribution penalties. Earnings remain in the account.

*American Funds must receive your distribution request prior to 4 p.m. Eastern time on October 15 in order to meet the tax-filing deadline.

Tax year and method of removal

If instructions are not provided below, any amount removed will be removed in the same percentage as originally invested.

Complete the following information:

A. Total amount of excess contributions to be distributed \$

B. Tax year to which the excess contribution was applied _____

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C. Capital Bank and Trust Company (CB&T) will calculate the gains or losses attributable to the excess contribution being removed in accordance with IRS guidelines. The amount removed from your account will be adjusted to reflect gains or losses. Provide instructions below for how you would like the adjusted amount to be removed.

Fund name or number	Percentage	Fund name or number	Percentage
	%		%
	%		%



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How do you want the excess contribution being removed to be distributed?

Before making your selection and providing instructions below, be sure to consult a tax advisor about the implications of your choice.

IMPORTANT INFORMATION:

- Movement of assets from a Traditional IRA to a Roth IRA or from a Roth IRA to a Traditional IRA for the same tax year is a recharacterization, not an excess. If your request is for a recharacterization, obtain a recharacterization form.
- If instructions are not provided below, we will issue a check. If you select a reinvest option and do not provide allocation instructions, the amount removed will be reinvested in the same fund(s), percentage(s) and share class.

Select one option below.

A. Reinvest as a current-year contribution \$ ______ at net asset value, if applicable, in my new or existing Traditional or Roth IRA. The contribution must not exceed the current-year contribution limit. Any amounts in excess of the current-year contribution limit will be returned to you by check unless you specify a different distribution method.

Example: If your excess contribution is \$500 and your current-year contribution will only allow for an additional \$400, the remaining \$100 will be returned to you unless you specify a different distribution method for the remaining \$100. If opening a new account, attach the appropriate application.

	Fund name or number	Percentage
		%
Existing Traditional or Roth IRA account number		%
		%
		%
		%

Note: Any earnings removed will be reinvested as indicated above, not to exceed the current-year contribution limit.

B. Reinvest at net asset value, if applicable, the excess amount, plus any earnings, in my new or existing non-retirement account. If opening a new account, attach the appropriate application.

	Fund name or number	Percentage
Existing non-retirement account number		%
		%
_		%
_		%
_		%

C. Issue a check. (Electronic deposit to bank accounts via Automated Clearing House (ACH) is not available.)



Distribution Request for Excess Contributions From Traditional and Roth IRAs

Authorization and signature guarantee

I direct CB&T to distribute the excess contributions from my account in the manner I have indicated in Section 4. I certify that the above information and attached documentation (if applicable) are accurate and that I am entitled to receive the payments for which I have applied.

In consideration of CB&T acting on such instructions and processing such transactions, or should I not be entitled to all or any part of the payments for which I have applied, I agree to hold harmless and indemnify CB&T; any of its affiliates or mutual funds managed by such affiliates; and each of their respective directors; trustees; officers; employees; and agents from any losses, expenses, costs or liability (including attorney fees) that may be incurred as a result of CB&T acting on such instructions.

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Name of IRA owner (print)	Signature of IRA owner		Date	(mm/dd/y	уууу)
This document may not be signed using Adok	pe Acrobat Reader's "fill ar	nd sign" feature.			
A signature guarantee is required if the distri	bution request is:	Stamp signature or meda	Illion g	uarantee ł	nere.
• greater than \$125,000					
OR					
• being mailed to the address of record and the a in the last 10 calendar days.	address has changed				
If required, signatures must be guaranteed by a association, credit union, member firm of a dome or the Financial Industry Regulatory Authority tha guarantor institution. A notary public is NOT an guarantor. The guarantee must be in the form of a typewritten or handwritten guarantee that is accept by a raised corporate seal.	stic stock exchange it is an eligible acceptable a stamp or				
If a signature	quarantee is required	d, this form must be maile	d		

If mailing, choose the service center for your state. Mail the form to the Indiana Service Center if you live outside the U.S.



American Funds Service Company P.O. Box 6164 Indianapolis, IN 46206-6164

Overnight mail address 12711 N. Meridian St. Carmel, IN 46032-9181



American Funds Service Company P.O. Box 2560 Norfolk, VA 23501-2560

Overnight mail address 5300 Robin Hood Rd. Norfolk, VA 23513-2430

Investor upload www.capitalgroup.com/submit

Financial professional upload www.capitalgroup.com/upload

Fax (888) 421-4371

For more information, contact your financial professional, visit www.capitalgroup.com or call us at (800) 421-4225.