



## IRA Divorce Transfer Request

Use this form to request a transfer of assets to an awarded spouse's IRA as a result of a divorce decree or decree of separate maintenance. References to IRA include traditional, Roth, SEP/SARSEP, SIMPLE and SIMPLE Plus accounts. For any other type of distribution, call us at (800) 421-4225 for the correct form.

**Note:** This form should not be used by an awarded spouse.

**The request must be accompanied by the following:**

- A copy of the certified divorce decree **or** decree of separate maintenance

**Note:** A Qualified Domestic Relations Order (QDRO) is not acceptable as a divorce decree or decree of separate maintenance.

- A guaranteed signature of the account owner (See Section 5.)
- A completed *Traditional/Roth IRA Application* or *SIMPLE IRA Application* from the awarded spouse (if applicable)

### 1 Account owner information

Account number<sup>1</sup> or plan ID<sup>2</sup>

Name of account owner

MI

Last

Address

City

State

ZIP

( )

Email address<sup>3</sup>

Daytime phone

<sup>1</sup> **SIMPLE IRA participants with pre-tax and Roth assets:** Review your account statement. If separate account numbers are assigned for pre-tax and Roth assets, ensure the correct account is listed. If applicable, a separate request must be submitted for each account.

<sup>2</sup> Account statement includes a plan ID that begins with 754 (SIMPLE IRA Plus) or 2: If you have both pre-tax and Roth assets, this request will apply to both contribution types unless otherwise indicated.

<sup>3</sup> Your privacy is important to us. For information on our privacy policies, visit [www.capitalgroup.com](http://www.capitalgroup.com).

### 2 Court-ordered divorce payments — Non-reportable transfer to awarded spouse

**A.** What percentage, dollar amount or number of shares of this account should be transferred to the awarded spouse's IRA as a result of divorce or legal separation?

Transfer \_\_\_\_\_% **OR** \$ \_\_\_\_\_ **OR** \_\_\_\_\_ shares

**B.** If applicable, the valuation date to be used is \_\_\_\_\_. If no date is provided, the date of transfer will be used.  
(mm/dd/yyyy)

From the date of valuation, are earnings and losses to be included in the transfer? ☐ Yes ☐ No

**C.** Transfer method — Select one of the following options:

1. ☐ Transfer shares in kind\* to the **existing** American Funds IRA of the awarded spouse, \_\_\_\_\_  
Account number or plan ID
2. ☐ Transfer shares in kind\* to a **new** American Funds IRA of the awarded spouse. (Attach a *Traditional/Roth IRA Application* or *SIMPLE IRA Application*.)
3. ☐ Issue a check to the IRA of the awarded spouse. (See Section 4.)

**Note:** If not requesting a TOTAL transfer, you must provide instructions in Section 3 for the percentage or amount to be removed.

\* Assets moving from a SIMPLE IRA Plus plan will be invested in Class A shares at Net Asset Value (no sales charge) in the same fund(s) and percentage(s) as currently invested.



### 3 One-time transfer instructions

Complete this section ONLY if the request is for less than 100% of the account.

Complete **A** or **B**.

**A. Account statement includes account number** (If the account statement includes a plan ID, proceed to **B**.)

**Note:** For fund names and numbers, review your statement or access your account at [www.capitalgroup.com](http://www.capitalgroup.com).

Fund name or number	Percentage	Amount	Number of shares
_____	_____ % <b>OR</b> \$ _____	<b>OR</b> _____	_____
_____	_____ % <b>OR</b> \$ _____	<b>OR</b> _____	_____
_____	_____ % <b>OR</b> \$ _____	<b>OR</b> _____	_____
_____	_____ % <b>OR</b> \$ _____	<b>OR</b> _____	_____
_____	_____ % <b>OR</b> \$ _____	<b>OR</b> _____	_____
_____	_____ % <b>OR</b> \$ _____	<b>OR</b> _____	_____

**B. Account statement includes a plan ID that begins with 754 (SIMPLE IRA Plus) or 2** \$ \_\_\_\_\_  
Amount

**Note:** The transfer will be processed proportionally from all funds in applicable contribution types.

### 4 Special pay order

Complete this section if a check is to be issued.

The check must be made payable to the trustee or custodian of the awarded spouse's account.

\_\_\_\_\_  
Name of trustee or custodian/financial institution

\_\_\_\_\_  
Address City State ZIP

\_\_\_\_\_  
Account number (if applicable)\* FBO (if applicable)

**\* Account statement includes a plan ID that begins with 754 (SIMPLE IRA Plus) or 2:** Pre-tax assets may only be transferred to a traditional IRA or SIMPLE IRA. Roth assets may only be transferred to a Roth IRA or Roth SIMPLE IRA. If applicable, list both accounts and indicate the account types.



## 5 Authorization and signature guarantee — required

I direct Capital Bank and Trust Company (CB&T) to make the transfer from my account in the manner I have indicated. I certify that the above information and attached documentation are accurate.

In consideration of CB&T acting on such instructions and processing such transactions, or should I not be entitled to make this transfer request, 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.

_____	<b>X</b>	_____ / ____ / ____
Name of account owner (print)	Signature	Date (mm/dd/yyyy)

**This document may not be signed using Adobe Acrobat Reader's "fill and sign" feature.**

**A signature guarantee is required**, and it must be performed by a bank, savings association, credit union, member firm of a domestic stock exchange or the Financial Industry Regulatory Authority that is an eligible guarantor institution. **A notary public is NOT an acceptable guarantor.** The guarantee must be in the form of a stamp or a typewritten or handwritten guarantee that is accompanied by a raised corporate seal.

Stamp signature or medallion guarantee here.

**This form must be mailed.**

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

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