



DO NOT use this form for Capital Bank and Trust Company retirement accounts.

Important information:

- To gift shares to a new owner, an UGMA/UTMA account, or a trust account that does not utilize your SSN for tax reporting purposes, use the *Gift of Shares Request* form.
- To gift shares to a charitable organization, use the *Gift of Shares to a Charitable Organization* form.
- If withdrawing from the account at the time of transfer, you must also submit a *Request to Sell Shares*, available at www.capitalgroup.com.
- If you are holding stock certificates for shares involved in this request, return them by registered or certified mail, along with this form. Without them, we will not be able to honor your request. **DO NOT** sign the certificates.
- Any tax questions resulting from this request should be directed to your tax advisor.

1 Current account registration

Enter the information exactly as it appears on your existing American Funds account statement.

Account registration

Account number

Address

City

State

ZIP

Email address*

()
Daytime phone

☐ Check here to update the mailing address on your account(s).

*Your privacy is important to us. For information on our privacy policies, visit www.capitalgroup.com.

2 Reason for request

Complete A or B.

A. Registration change or transfer other than death. Select one.

☐ Adding or removing a joint owner for a reason other than death or divorce

Relationship of joint owner: ☐ Spouse ☐ Non-spouse

☐ Divorce/separation

☐ UGMA/UTMA minor has reached the age of majority

Note: Submit a photocopy of the beneficial owner's birth certificate or a valid government-issued photo ID that verifies the date of birth.

☐ Changing trustee of trust for reason other than death of a grantor

☐ Transferring shares to a trust account utilizing your SSN for tax reporting purposes

☐ Other

• Proceed to Section 4.

B. ☐ Death of owner, joint owner or grantor of a trust.

• Proceed to Section 3.



3 Registration change due to death of owner, joint owner or grantor of a trust — if applicable

A. Date of death (required) _____
(mm/dd/yyyy)

B. Alternate valuation date or amount (optional): Date _____ OR \$ _____
(mm/dd/yyyy)

Note: If providing an alternate valuation amount, an individual amount must be provided for each fund when transferring multiple funds. Provide dollar amounts in Section 5.

C. Beneficiary/claimant share

My share of the account is _____%

Notes: • A separate *Transfer/Registration Change Request* must be submitted for each beneficiary/claimant.

- If the account owner died without designating beneficiaries by name, you may also be required to complete a *Transfer on Death (TOD) Beneficiary Declaration and Indemnification* form.

D. Cost basis — only required for joint accounts and trust accounts with more than one grantor. Select one.

1. ☐ **Account held solely by spouses at time of death.** We will treat the account as equally owned and step-up 50% of the assets, unless you check the box below.

☐ Check here if you live in a community property state and are eligible to step-up cost basis 100%. Provide the state below.

State

2. ☐ **Account NOT held solely by spouses at time of death or Tenants in Common account.** (To properly adjust the cost basis, indicate the percentage of ownership of each owner below. If no percentage is indicated, the shares will be transferred as 100% noncovered and cost basis will not be available.)

☐ The co-owners' percentage of ownership is equal.

☐ The co-owners' percentage of ownership for each is different. (Complete the information below.)

Name of deceased owner

Percentage invested %

Name of surviving co-owner

Percentage invested %

Name of surviving co-owner*

Percentage invested %

*If there are additional surviving co-owners, attach a separate page with the appropriate information.



4 Account registration

Provide recipient information and select **A** or **B**.

Account registration/name of recipient(s) _____ ()
Daytime phone _____

A. ☐ Establish new account and/or change the current registration type.

The new account owner(s) will need to complete and attach one of the applications listed below. Shares will be reinvested in the same manner as removed. Leave the investment instructions section of the application blank or write "in kind."

- For individual, joint, UGMA/UTMA or conservatorship/guardianship accounts, submit the [Application for Individual or Joint Accounts](#) (or [F-2 Share Account Application for Financial Professionals](#) and [Individual or Joint Account F-2 Share Class Supplement](#)).
- For entity accounts, including trust, estate, business and nonprofit accounts, submit the [Application for Entities](#) (or [F-2 Share Account Application for Financial Professionals](#) and [Trust, Estate, Business and Nonprofit Accounts F-2 Share Class Supplement](#)).

Note: Provide a new application to certify the tax ID number, verify the current investor profile(s), and include current financial professional information. If a new application is not received, the financial professional information will not be retained.

OR

B. ☐ Transfer shares to another existing American Funds account.*

Account number _____

* If shares are transferred to an existing account, the shares will be subject to the cost basis method currently on the account. To change the cost basis method, obtain and complete a *Cost Basis Update Request*, or access the account at www.capitalgroup.com prior to submitting this request.

5 Instructions

Any assets not transferred will remain in the current owner's account. Select **A** or **B**.

Additional documentation may be required for a transfer of shares held in corporate, partnership or fiduciary accounts. Contact us at **(800) 421-4225** for requirements.

A. ☐ Total transfer — Proceed to Section 6.

B. ☐ Partial transfer — You must indicate the dollar amount, number of shares or percentage to be transferred below. For fund names and numbers, review your statement or access your account at www.capitalgroup.com.

Note: If Specific Lot Identification is your cost basis method, you must provide the exact number of shares and corresponding investment date(s) on a separate page.

To avoid delays, ensure that the requested transaction will not reduce each fund balance below the established fund minimums that must be met and maintained. **The fund minimums are \$1,000 each for money market and state-specific tax-exempt bond funds or \$250 each for all other funds.**

Fund name or number	Amount	Number of shares	Percentage
_____	\$ _____	OR _____	OR _____%
_____	\$ _____	OR _____	OR _____%
_____	\$ _____	OR _____	OR _____%
_____	\$ _____	OR _____	OR _____%
Total \$ _____		OR _____	

Exchanges between funds can be requested after the transfer is complete.



6 Signature(s) of current owner(s) — required

IMPORTANT: If you are the current owner/co-owner, trustee, custodian, beneficiary/claimant or the person authorized to act on behalf of the deceased owner, your signature is required below. Generally, all current owners must have their signatures guaranteed. To determine if an exception applies for your request, call us at (800) 421-4225.

I/We authorize the transfer of shares as indicated in Section 5.

If this document is signed electronically, I consent to be legally bound by this document and subsequent terms governing it. The electronic copy of this document should be considered equivalent to a printed form in that it is the true, complete, valid, authentic and enforceable record of the document, admissible in judicial or administrative proceedings. I agree not to contest the admissibility or enforceability of the electronically stored copy of this document. A copy of this document will be made available to me as required.

X

Signature of current owner, trustee, custodian, beneficiary/claimant or person authorized to act on behalf of the deceased owner

Date / /
(mm/dd/yyyy)

X

Signature of current co-owner (if applicable)

Date / /
(mm/dd/yyyy)

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

If required, signatures must be guaranteed 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.

Note: A medallion guarantee is acceptable in place of a signature guarantee.

Stamp signature or medallion guarantee here.

Stamp signature or medallion guarantee here.

If a signature guarantee is required, this form must be mailed.

DID YOU?

1. Attach a completed application signed by the new owners, if establishing a new account or changing the current registration type?
2. Sign in Section 6 and obtain a signature guarantee, if required?

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 6007
Indianapolis, IN 46206-6007

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



American Funds Service Company
P.O. Box 2280
Norfolk, VA 23501-2280

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) 421-4351

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