



- Use this form to request a transfer or rollover from an external IRA or employer-sponsored retirement plan into an American Funds IRA (traditional, Roth, SIMPLE or SEP/SARSEP). To move money from a 529 college savings account to a Roth IRA, use the *Rollover from an External 529 Plan to an American Funds Roth IRA* form. To move money to a SIMPLE IRA Plus account, use the *SIMPLE IRA Plus Request for Transfer of Assets or Direct Rollover* form. To move money to a 403(b) account, use the *403(b)/Texas ORP Request for Exchange or Rollover* form.
- If you received a distribution from an IRA or qualified retirement plan, and you are rolling the money back into an IRA or qualified retirement plan, use the *Indirect Rollover Request*.
- **Before completing this form, contact the financial institution holding the assets and/or your previous employer (if requesting a direct rollover) to determine what additional paperwork and actions may be required to move your assets to American Funds.**

Send this completed form to American Funds using the maps on the last page.

## 1 Information about you

**Note:** If establishing a new American Funds IRA account, attach the appropriate account application.

First name \_\_\_\_\_ MI \_\_\_\_\_ Last \_\_\_\_\_ American Funds account number\* or plan ID (if applicable) \_\_\_\_\_

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

Email address† \_\_\_\_\_ ( ) \_\_\_\_\_  
Daytime phone \_\_\_\_\_

\* **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 receiving account(s) is/are listed. If applicable, list both accounts.

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

## 2 Contact information for current financial institution

**Notes:**

- A mailing address for the current financial institution holding the assets is required to process your request. Please verify the address before submitting this form.
- This request will be forwarded to the current financial institution as instruction to transfer/roll over retirement assets. You may wish to check with your financial professional for options to expedite your request or to preserve your account value, particularly during times of market volatility.

Name of financial institution \_\_\_\_\_ Attn: \_\_\_\_\_

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

☐ Check here if you would like us to fax this request, and you have confirmed that the current financial institution will accept a fax.

( ) \_\_\_\_\_  
Current financial institution fax



### 3 Sending account information

Complete A and B.

**Important:** Include a copy of your account statement from the current financial institution.

#### A. Identify the sending account:

1. ☐ Traditional IRA<sup>1</sup>
2. ☐ Roth IRA<sup>2</sup>
3. ☐ SIMPLE IRA<sup>3</sup>

a. \_\_\_\_\_  
Name of employer/company on sending SIMPLE IRA  
Date of first contribution in sending SIMPLE account (mm/dd/yyyy)

b. Indicate the sending account contribution type(s):

☐ Pre-tax assets<sup>1</sup> **AND/OR** ☐ Roth assets<sup>2, 4</sup>

4. ☐ SEP/SARSEP IRA

Indicate the sending account contribution type(s):

☐ Pre-tax assets<sup>1</sup> **AND/OR** ☐ Roth assets<sup>2, 4</sup>

5. ☐ Qualified retirement plan

Indicate the sending account contribution type(s):

☐ Pre-tax assets<sup>1</sup> **AND/OR** ☐ Roth assets<sup>2, 4</sup>

#### B. Does the sending account contain mutual funds?

☐ Yes ☐ No

<sup>1</sup> Pre-tax assets can only be transferred or rolled over to a traditional IRA, pre-tax SIMPLE IRA or SEP/SARSEP IRA. To request a Roth conversion, complete the *Roth IRA Request for Conversion* form after the transfer or rollover is complete.

<sup>2</sup> Roth assets can only be transferred or rolled over to a Roth IRA or Roth SIMPLE IRA. If you are transferring or rolling Roth assets to a SIMPLE IRA plan, check with your employer to confirm your plan offers Roth contributions. If your plan doesn't offer Roth contributions, the transfer or rollover cannot be accepted.

<sup>3</sup> You may not request a transfer or rollover into another plan type until at least two years after the date of the first SIMPLE IRA contribution. Before two years, you may only transfer to another SIMPLE IRA. If you take a distribution during the first two years of participation in a SIMPLE IRA plan, the early distribution penalty is 25%. (Exceptions may apply.) Your two-year period begins the first day a contribution is deposited into your SIMPLE IRA. If you are transferring assets from a SIMPLE IRA plan with a previous employer to a new SIMPLE IRA plan, the newest plan's start date will be used.

<sup>4</sup> If you are transferring or rolling assets to a SIMPLE IRA plan and the sending account contains both pre-tax and Roth contributions, the current financial institution must indicate the amount attributable to each contribution type on the check(s) or via a separate statement. If this information is not received in a timely manner, the check(s) will be returned to the current financial institution.



## 4 Liquidation/Transfer in kind instructions

If a dollar amount or percentage is not provided, "Full" will be the default response.

**Note:** Any applicable transfer/termination fees must be paid to the current financial institution prior to completing this request. In addition, you may be required to liquidate assets to cash. Contact the current financial institution for details.

**Liquidate** — Select this option for non-American Funds assets and American Funds Class R shares. Capital Bank and Trust Company (CB&T) cannot accept certificates or any other form of investment registered in the name of CB&T (for example, employer stock, limited partnerships, etc.).

**Transfer in kind** — Select this option for existing American Funds Class A, C or F shares. Assets will move to CB&T in the same funds and percentages.

Liquidate	Transfer in kind	Sending account/ contract number	Investment and share class	Ticker symbol	Full	Partial \$ <input type="checkbox"/> OR % <input type="checkbox"/>
<input type="checkbox"/>	OR <input type="checkbox"/>	_____	_____	_____	<input type="checkbox"/> OR	_____
<input type="checkbox"/>	OR <input type="checkbox"/>	_____	_____	_____	<input type="checkbox"/> OR	_____
<input type="checkbox"/>	OR <input type="checkbox"/>	_____	_____	_____	<input type="checkbox"/> OR	_____
<input type="checkbox"/>	OR <input type="checkbox"/>	_____	_____	_____	<input type="checkbox"/> OR	_____
<input type="checkbox"/>	OR <input type="checkbox"/>	_____	_____	_____	<input type="checkbox"/> OR	_____
<input type="checkbox"/>	OR <input type="checkbox"/>	_____	_____	_____	<input type="checkbox"/> OR	_____
<input type="checkbox"/>	OR <input type="checkbox"/>	_____	_____	_____	<input type="checkbox"/> OR	_____
<input type="checkbox"/>	OR <input type="checkbox"/>	_____	_____	_____	<input type="checkbox"/> OR	_____
<input type="checkbox"/>	OR <input type="checkbox"/>	_____	_____	_____	<input type="checkbox"/> OR	_____

CDs (if applicable): ☐ Liquidate immediately\* **OR** ☐ Liquidate at maturity† — Maturity date \_\_\_\_\_  
(mm/dd/yyyy)

\*Liquidations prior to maturity may result in an early withdrawal fee.

†To allow sufficient time for processing, submit this form at least **four weeks** before the CD matures.



## 5 Investment instructions

Complete **A**, **B** and **C**. Select **D** if applicable. For a quick guide to fund names, numbers, minimums and share class restrictions, go to [www.capitalgroup.com/fundguide](http://www.capitalgroup.com/fundguide).

### A. Select the receiving American Funds account type

☐ Traditional IRA    ☐ Roth IRA    ☐ SIMPLE IRA\* (including Roth SIMPLE IRA)    ☐ SEP/SARSEP IRA

\* A SIMPLE IRA can only receive transfer or rollover assets from another plan type if at least two years have passed since the date of the first SIMPLE IRA contribution. Before two years, a SIMPLE IRA can only receive assets from another SIMPLE IRA.

**Note:** If assets are transferring in kind, proceed to **Section 6**.

### B. Select a share class    ☐ Class A    ☐ Class C    ☐ Class F-2<sup>†</sup>

<sup>†</sup>Class F-2 shares are available only for accounts sold through participating investment advisor representatives or intermediaries.

### C. Provide investment instructions

☐ New account. Invest according to the instructions on the attached application.

**OR**

☐ Existing account number \_\_\_\_\_

Provide investment selections below.

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

### D. ☐ NAV (no sales charge) for IRA rollovers — if applicable

- Attach a copy of your most recent retirement account statement. Future contributions will be assessed the appropriate sales charge.
- Class A share NAV pricing will apply to all assets being rolled over to an American Funds IRA from a PlanPremier® or RecordkeeperDirect® retirement plan.
- For a rollover from any other retirement plan, Class A share NAV pricing will apply to certain assets. Refer to the fund's prospectus for additional information or qualifications.



## 6 Authorization

**To the sending financial institution:** I have established a retirement account with Capital Bank and Trust Company. Please accept this as your authorization to liquidate or transfer shares in kind as instructed in Section 4. For liquidations, make checks payable to **"Capital Bank and Trust Company."** Include the name of the owner identified in Section 1 on the check.

I hereby certify that the information provided within this form is accurate. If I am requesting a rollover, I certify that the requested contribution is an eligible rollover distribution and does not contain any amounts from a required minimum distribution (RMD). I understand that only certain types of distributions are eligible for rollover treatment and that it is solely my responsibility to ensure such eligibility. I further understand that the current plan and/or sending institution of the rollover assets may have additional requirements to initiate the rollover to American Funds, and I am responsible for meeting these requirements.

	<b>X</b>	
Name (print)	Signature	Date (mm/dd/yyyy)

**If required** by the current financial institution, your signature must be guaranteed by a bank, savings association, credit union or 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.

### DID YOU?


1. Contact the current financial institution and/or your previous employer (if applicable) regarding their requirements (e.g., additional forms or signature guarantees)?
2. Pay any applicable transfer/termination fees and liquidate assets to cash, if required by the current financial institution?
3. Attach your most recent account statement for the account being moved?

### CUSTODIAL ACCEPTANCE

**To the current financial institution:** Capital Bank and Trust Company has agreed to serve as Trustee/Custodian for the above person's retirement plan and will accept the transfer or rollover. American Funds shares requested in kind in Section 4 are to be transferred to the name of **"Capital Bank and Trust Company."** For all other assets, liquidate and disburse as instructed in Section 4. **Send the check payable to "Capital Bank and Trust Company" to the appropriate address listed below.** Include the name of the owner identified in Section 1 on the check.

Authorized signer of  
Capital Bank and Trust  
Company

Kevin Saks, President  
Name

  
Signature (accepting signer)

Date (mm/dd/yyyy)

If the current financial institution requires an original copy, mail this form to 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

Financial professional upload [www.capitalgroup.com/upload](http://www.capitalgroup.com/upload)

Fax (888) 421-4371

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