

Transfer-In-Kind to American Century Investments®



Read these instructions to help make your transaction as smooth as possible. If you need help along the way, way, please call us at 1-888-345-9166.

Accounts are only available to U.S. citizens and U.S. resident aliens.

With this form you can:

Transfer a retirement or non-retirement account held with your current financial professional or firm to the **same fund** at American Century Investments (transfer-in-kind).

This form may not be used to:

- Request a direct transfer of your retirement assets held in non-American Century Investments funds with your current custodian, trustee or financial firm to us. Please download the *Request to Transfer/Roll Over* form from americancentury.com or call us.
- Roll over assets from an employer's retirement plan.

Before completing the form:

- Check with your current custodian, trustee or financial firm to determine their requirements—**do they require a signature guarantee**, or have other guidelines you need to know about?
- Make sure you have the correct mailing address and telephone number for your current custodian, trustee or financial firm.
- Include a copy of your most recent account statement from your current custodian, trustee or firm with the form.

Cost Basis Reporting Method for Taxable, Non-Money Market Accounts

We will use the default method of Average Cost in reporting cost basis for redemptions of your shares purchased after January 1, 2012. If you would like us to use a different method for these purchases or elect a method for future accounts, please complete and return a *Cost Basis Election Form* or you may change your method online after your account is established.

To transfer-in-kind a retirement or non-retirement account:

- Shares may only be transferred into the same fund.
- **This is not a taxable event for you.**

Complete all steps on the form.

Other forms you may need to complete:

- An application (if you're transferring to a new type of account with us)
- A *Designation of Beneficiary* form for retirement accounts

Transfer-In-Kind to American Century Investments



SSBT Please print clearly in CAPITAL letters, using black ink. Complete all required steps and sign in step 4. If you have questions, please call 1-888-345-9166.

1 Provide Information About Yourself

We will register joint accounts as joint tenants with rights of survivorship and use the first owner's name and U.S. Social Security number for IRS reporting purposes unless you advise otherwise.

Mr. / Mrs. / Ms. Owner or Trustee's first name Middle initial Owner or Trustee's last name

Owner or Trustee's U.S. Social Security number Owner or Trustee's date of birth (month-day-year)

U.S. citizen U.S. resident alien

Owner or Trustee's street address (No P.O. or Private Mail Boxes permitted.) Apartment/Unit

City State ZIP

Owner or Trustee's mailing address (If different than above; P.O. or Private Mail Boxes permitted.) Apartment/Unit

City State ZIP

Telephone number (daytime) Telephone number (evening)

Email address

Provide information about the joint owner or co-trustee, if applicable.

Mr. / Mrs. / Ms. Joint owner or Co-trustee's first name Middle initial Joint owner or Co-trustee's last name

Joint owner or Co-trustee's U.S. Social Security number Joint owner or Co-trustee's date of birth (month-day-year)

U.S. citizen U.S. resident alien

Check this box if both owners or trustees share the same street address. If not, provide the joint owner or co-trustee's street address below.

Joint owner or Co-trustee's street address (No P.O. or Private Mail Boxes permitted.) Apartment/Unit

City State ZIP

Step 1 continued on page 2

Provide Information About Yourself (continued)

Trust Information

Please provide a trust Tax ID number for IRS reporting purposes. **If a tax ID number is not provided, we will use the first U.S. Social Security number listed.** Please send us a copy of the title page and the signature page of your trust agreement along with the pages that identify the trustees of the trust.

Date of trust agreement (month-day-year)

Trust's Tax ID number

Name of trust

_____ Number of trustee signatures required by the trust instrument to redeem, exchange or transfer shares for the trust. **If left blank, we will require all trustees to sign.**

2

Provide Information For Your Current Custodian, Firm or Trustee

Name of current custodian, firm or trustee

Address

City

State

ZIP

Telephone number

Contact name

Account registration at current firm (how the account is registered/named)

Please include your most recent account statement from your current custodian, firm or trustee to help expedite your transfer.

Indicate account type (check only one). Please complete a separate form for each account type.

Non-Retirement Account

Individual

Joint

UGMA/UTMA

Corporation

Trust

CESA

Other _____

Retirement Account

Traditional IRA

Roth IRA

Rollover IRA

SEP, SARSEP, SIMPLE IRA

403(b)

457(b)

Retirement Plan [401(k), MPP, PSP]

3 Provide Your Transfer Instructions

Transfer-in-kind as listed below. (Shares may only be transferred in the same American Century Investments fund that you have with your current financial professional or firm.)

If transferring more than three accounts, please list additional instructions on a separate piece of paper.

Transfer from:

Account number _____

\$ _____

Amount

OR

No. of shares

Write "ALL" if all shares

Transfer to:

Existing American Century Investments account _____

OR _____

Fund name/CUSIP

ID or Ticker for new account

%

Percentage

Transfer from:

Account number _____

\$ _____

Amount

OR

No. of shares

Write "ALL" if all shares

Transfer to:

Existing American Century Investments account _____

OR _____

Fund name/CUSIP

ID or Ticker for new account

%

Percentage

Transfer from:

Account number _____

\$ _____

Amount

OR

No. of shares

Write "ALL" if all shares

Transfer to:

Existing American Century Investments account _____

OR _____

Fund name/CUSIP

ID or Ticker for new account

%

Percentage

Your authorization to the current custodian, trustee or financial firm:

- I understand that to the extent any assets in my account are not readily transferable, with or without penalties, such assets may not be transferred within the time frames required by NYSE Rule 412 or similar rule of FINRA or other regulatory authority.
- I authorize you to deduct any outstanding fees due you from the credit balance in my account.
- If my account does not contain a credit balance, or if the credit balance in the account is insufficient to satisfy any outstanding fees due you, I authorize you to liquidate the assets in my account to the extent necessary to satisfy that obligation.
- If certificates or other instructions in my account are in your physical possession, I instruct you to transfer them in good deliverable form, including affixing any necessary waivers to enable the successor fiduciary to transfer them in its name for the purpose of the sale, when and as directed by me. I understand that upon receiving a copy of this transfer information, you will cancel all open orders for my account on your books.
- I affirm that I have destroyed or returned to you credit/debit cards and/or unused checks issued to me in connection with my securities account.
- I understand that you will contact me with respect to the disposition of any assets in my securities account that are nontransferable.

4 Sign Your Name and Date (All account owners must sign.)

Your agreement with American Century Investments

- I have received and read the appropriate *Disclosure Statement and Custodial Agreement* for my account, if applicable.
- I am of legal age, or I accept the appointment as Responsible Individual for the plan established for a minor, if applicable.
- I have read the prospectus or summary prospectus for the fund(s) in which I'm investing.
- I acknowledge that State Street Bank and Trust Company and American Century Services, LLC shall not be liable for any tax or other consequences in connection with contributions to my IRA.
- I authorize my current custodian, trustee or firm to release account information to American Century Investments, LLC.
- **Important Information About New Accounts:** A federal law, established to help stop the funding of terrorism and money laundering activities, requires financial institutions to verify the identity of each person who opens an account. American Century Investments will verify your identity using the name, street address, date of birth and Social Security number that you provide in this form. In some instances, we may request additional documentation.

Certify Your Tax ID

If you'd like more information about certifying your taxpayer identification number, please review the General Instructions on IRS Form W-9, which can be found at www.irs.gov.

FATCA Reporting – **If you are submitting this form for an account you hold in the United States, you may leave the second field below blank.**

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting.

Exemptions Codes (Codes apply only to certain entities, not individuals that are exempt from reporting under FATCA)

Exemptions (see instructions in IRS Form W-9):

Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ *(Applies to accounts maintained outside the U.S.)*

Step 4 continued on page 5. You must sign on the next page.

Sign Your Name and Date Below (All account owners must sign.) (continued)

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number, and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person.
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

The IRS does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

If this account is for a minor, the Responsible Individual or Custodian must sign, date and print their name below.



Signature Printed name Date



Signature Printed name Date



Signature Printed name Date

For retirement accounts only:

Custodial Acceptance. If all required forms and information are properly submitted, State Street Bank and Trust Company will accept appointment as Custodian of the Custodial Account. However, this Agreement is not binding upon the Custodian until the Depositor has received a statement confirming the initial transaction for the Custodial Account. Receipt by the Depositor of a confirmation of the purchase of the Fund shares indicated in the Depositor's Application will serve as notification of State Street Bank and Trust Company's acceptance of appointment as Custodian of the Custodial Account.

5 Signature Guarantee (if required by your current custodian, trustee or firm)

Please call your current custodian, trustee or firm from which you are transferring to see if a signature guarantee is required. A signature guarantee is a warrant by the guarantor that the signature is genuine and that the person signing is competent to sign. Many domestic banks, trust companies, credit unions, brokers, dealers, national securities exchanges, registered securities associations, clearing agencies and savings associations can provide this for you. The signature must correspond in every way, without alteration, with the name printed on the current account registration. Each guarantee must be an original ink stamp that states "Signature Guaranteed/Medallion Guaranteed."

NOTE: Acknowledgement of a signature by a notary public is NOT acceptable.

Please affix signature guarantee ink stamp below with appropriate signature, title of officer and date.

American Century Investments

P.O. Box 419200
Kansas City, MO 64141-6200
1-888-345-9166

Investors Using Advisors

P.O. Box 419786
Kansas City, MO 64141-6786
1-800-378-4998

For Overnight Deliveries:

American Century Investments

430 W. 7th St.
Kansas City, MO 64105-1407

americancentury.com