

Indirect Rollover Request

- If you received a distribution from an IRA or qualified plan, you may roll the money back into an IRA or qualified plan within **60 days** of receiving the assets. This is considered an indirect rollover. You are only allowed one indirect rollover from an IRA to another (or same) IRA in a 12-month period, regardless of the number of IRAs owned.
- Use this form for indirect rollovers only. You must include a personal check for the rollover amount made payable to Capital Bank and Trust Company.SM
- If you wish to move assets currently held at another financial institution to American Funds, use the *Request for Transfer of Assets or Direct Rollover* form.

Information abo	ut you					
Please type or print clearly	<i>(.</i>					
First name	MI Last		Receivi	ng American Fi	unds account	number or plan ID
Address		City			State	ZIP
			()		
Email address				ytime phone		
Your privacy is important to us. I	For information on our privacy policies,	visit www.capitaigroup.co	om.			
Source of distrib	outed assets					
_						
Rollover guidelines:						
Required Minimum Distribut	ions (RMDs) are not eligible for rollo	over.				
 Payments over life expectar 	ncy or a period of 10 years or more a	are not eligible for rollove	r.			
A SIMPLE IRA can only rec	eive assets from another account a	fter two years have pass	ed since the dat	e of the first	SIMPLE IR	RA contribution.
 If you are rolling assets into 	an American Funds qualified plan, v	verify that the plan accep	ots rollovers.			
A. The attached check repre	esents assets originally invested	d in the following accor	unt type:			
Qualified retirement pla	an* SIMPLE IRA Tra	ditional, SEP or SARSEI	PIRA R	oth IRA		
*Any Roth assets must be rolled of	over to a Roth IRA.					
B. The assets were held at:						
American Funds. Provi	de the American Funds sending ac	count number				
Note: Redemption proceed	ds reinvested into the same Americ	an Funds account within	90 days are no	t assessed	a sales cha	arge.
OR						
Another financial institu	ution.					
C. Qualified plan loan offse	t — if applicable					
employment or plan termin	ou participated in a qualified plan ar ation. A qualified plan loan offset is adline (plus extensions) for the year	the amount the account	balance is redu	ced, or offse	et, to repay	the loan. You
Check this box if rolling	g over qualified plan loan offset pro	ceeds.				
Loan offset amount \$						

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CAPITAL AMERICAN GROUP® FUNDS®	Indirect Rollover Reques
Investment instructions For a quick guide to fund names, numbers,	ninimums and share class restrictions, go to www.capitalgroup.com/fundguide . Rollovers into SIMPLE IRA
Plus accounts will be invested according to	e instructions on file for future allocations unless otherwise indicated below.
A. Select a share class: Class A	Class C Class F-2*
*Class F-2 shares are available only for accounts s	d through participating Investment Advisor Representatives or intermediaries.

Plus accounts will be inve	sted according to	the instructions on	file for future allo
A. Select a share class:	Class A	Class C	Class F-2*

B. Provide investment selections below:

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

- C. 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 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 only to those assets that were invested in American Funds within the retirement plan at the time of the distribution and deposited into an American Funds IRA.

Rollover certification and signature — required

Direct any questions regarding rollover eligibility to your financial professional or tax advisor.

I hereby certify that the information provided within this form is accurate. I certify that the requested rollover 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 certify that the distribution is being rolled over within 60 days of receipt or as otherwise permitted under applicable law. If after the permitted time frame, I have completed the appropriate self-certification (pursuant to IRS Revenue Procedure 2016-47) and have included a copy with this form. I understand that I may only request one indirect rollover from an IRA to another or the same IRA within a 12-month period.

If I am requesting a rollover of qualified plan loan offset proceeds, I certify that the distribution is being rolled over by my tax return filing due date (including extensions) for the year in which the qualified plan loan offset occurred.

Signature of account owner (mm/dd/yyyy) This document may not be signed using Adobe Acrobat Reader's "fill and sign" feature.

> Include a personal check for the rollover amount made payable to Capital Bank and Trust Company.

Please mail this form to the appropriate service center.

(If you live outside the U.S., mail the form to the Indiana Service Center.)



Indiana Service Center

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

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

Fax (888) 421-4371



Virginia Service Center

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

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

Fax (888) 421-4371

If you have questions or require more information, contact your financial professional or call American Funds Service Company at (800) 421-4225.