# **One-Time and Automatic Transactions**



- Use this form for a one-time transaction or automatic exchange, investment or redemption. For IRA required minimum distributions, 403(b) or 457(b) or employer-sponsored retirement plans, download the appropriate form(s) at americancentury.com.
- Complete a separate form for accounts under different Tax Identification numbers.
- Cancelled or changed automatic transactions are effective five days after we receive your notice.
- If your fund has a redemption fee and you are redeeming or exchanging the shares before the required holding period outlined in the prospectus, the fee will be deducted from the proceeds of the transaction.
- 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.

Please print clearly in CAPITAL letters using black ink and sign in step 7.

<b>Provide Informa</b>	tion About Yourself			
For UGMA/UTMA ac	counts, please provide the minor'	s name and U.S. Socia	al Security number.	
		OR		
U.S. Social Security	number	Tax Identifi	cation number	
Owner's first name		Middle initial	Last name	
Joint owner or UGN	MA/UTMA custodian's first name	Middle initial	Last name	
Business or retireme	ent plan trust's name (if applicab	le)		
Mailing address				Apartment/Unit
City			State	ZIP
Telephone number (	daytime)	Telephone	number (evening)	
Select Your Tran	saction Type and Frequenc	СУ		
Select only one optic	on.			
Transaction mini	mum: \$50 for automatic tran	sactions and a one	e-time investmer	nt, \$100 for a
one-time exchang	_			
□ Investment (pr	oceed to step 3A)   Excha	ange (proceed to st	ep 3B) □ Rede	mption (proceed to step 3C)
Select only one option	on. (If no option is selected, we w	vill use this form for a	one-time transact	ion.)
One-time	☐ Monthly	☐ Bimonthly (e	very other mont	h)
Quarterly	Semiannually	$\square$ Annually		

# **Provide Instructions for Your Transaction Type**

#### Please complete the appropriate section for your transaction request.

- You may only exchange between accounts that have identical registrations. To transfer between accounts registered to different owners, complete a *Transfer of Ownership Form*.
- To exchange to or invest in a new fund, you must meet the initial investment minimum. Please refer to the prospectus for initial investment requirements.
- Automatic exchanges and redemptions can begin after you have owned your shares for seven days.
- An automatic redemption could cause your balance to fall below your fund's required minimum. We will notify you and explain your options if this happens.
- For automatic investments/redemptions to/from your bank: Please provide the information requested below and enclose a voided preprinted check. Your bank account registration must be identical to your American Century Investments® account registration. Please see step 5 for additional information about a redemption to your bank.

#### A. INVEST

		\$	
Fund name (new account)	Account number (existing account)	Amount (\$50 min.)	
		\$	
Fund name (new account)	Account number (existing account)	Amount (\$50 min.)	

### **B. EXCHANGE**

**Exchange of all shares:** If you are exchanging all shares and have established an automatic investment, we will move your automatic investments to the new account(s) unless you check the box below.

 $\square$  Stop automatic investments.

#### Note:

- Exchanges out of a non-IRA, non-money market fund will result in a taxable event.
- Your CheckWriting service will transfer if it is available for the new fund and new CheckWriting checks will be sent.
- If you would like a cost basis method different than the one you have previously elected for purchases made after January 1, 2012, please attach instructions indicating the method.
- If you have previously chosen Average Cost as your cost basis method, you do not have the option to change your method.
- To exchange or redeem specific shares, attach instructions with the purchase dates.

#### From:

Fund name	Account num	nber	
\$	OR	OR	%
Amount (\$50 min./mo.; \$100 one-time)	Shares (number or "al	1")	Percentage of account
To:			
			%
Fund (new accounts)	Account number (existing account)	)	Percentage of total exchanged
			%
Fund (new accounts)	Account number (existing account)	)	Percentage of total exchanged
C. REDEEM			
Fund name	Account number		
\$	OR	OR	%
Amount (\$50 min./mo.)	Shares (number or "al	l")	Percentage of account

1	Choose a Start Date (Automatic Transactions Only)		
	We will process your automatic transaction on the 15th of the month, unless you specify another date below. If the date you select falls on a weekend or a holiday, we will make the investment on the next business day.		
	Start date does not apply to one-time transactions. One-time transactions will be processed as of the date this form is received and accepted by us.		
	Start date (month-day-year)		
5	Select Payment Method (Redemptions Only)		
	Check one option below. If no option is chosen, the proceeds will be sent by check to the address of record.		
	Electronic Payment to Your Bank by Electronic Funds Transfer		
	This service is only available if you have previously authorized us to send your redemption proceeds electronically to your bank. A hold time may apply before you can use it for redemptions. Please review your fund's prospectus for details. Your bank usually receives wired funds on the next business day after transmission; you can expect funds sent by ACH in two to five business days.		
	☐ By automated clearinghouse (ACH)		
	$\square$ By wire: only available for one-time redemptions (\$10 fee per wire deducted from proceeds)		
	Check		
	☐ Send the check to my address of record.		
	☐ Send the check to an alternate address and/or payee as indicated below.		

American Century Investments requires a signature guarantee to make a check payable to someone other than a registered owner. Please be sure to provide a signature guarantee in step 7.				
Mr./Mrs./Ms.	First name	Middle initial Last name		
Institution name	(if applicable)	C/O, attention or institution account number		
Mailing address		Apartment/Unit		
City		State ZIP		

# 6

# Complete for IRA (Exchanges and Redemptions Only)

Exchanges from an IRA to a non-IRA and redemptions from an IRA may result in a taxable event.

#### **Reason for Withdrawal**

	IRA, it will be reported to the IRS as normal or premature based 1, unless you check one of the exceptions below.
☐ Premature distribution, exception apprexception list as described in the IRS Ir	<b>plies:</b> Any payment before 59½ that falls under the IRS approved astructions for Forms 1099-R and 5498
$\square$ Distribution due to disability: Any pa	yment made due to permanent and total disability before age 59½
☐ <b>Distribution due to death of original</b> spouse who elects to treat the IRA as h	<b>IRA owner:</b> Benefit payment to beneficiary (excludes a surviving is or her own)
retirement plan with your employer (Y such as a completed copy of the plan e requesting a direct rollover to a quality	ent Plan <sup>2</sup> : The distribution is being directly rolled into a qualified ou must provide proof that your plan accepts rollover monies enrollment form or letter of acceptance from the plan. If you are fied retirement plan, please note that the signature guarantee not apply. However, a completed copy of the plan enrollment plan is required.)
	\$
	T
Year the contribution was made	Dollar amount of excess

### Notice of Withholding for IRAs only

If you have not been issued a U.S. Tax Identification number, or you have been issued a U.S. Tax Identification number but the address on your account is outside the United States, please call American Century Investments before completing this form.

**Federal Tax Withholding:** Withdrawals from an IRA are generally subject to tax withholding. Please review the enclosed <u>IRS Form W-4R</u> and then complete the section below. You may keep the W-4R form for your records. Please consult a tax advisor if you need assistance determining the federal withholding rate that is appropriate for your situation.

Your withholding rate is determined by the type of payment you will receive. For nonperiodic payments, **the default withholding rate is 10%.** (For American Century Investments IRAs, nonperiodic payments include both one-time and automatic withdrawals.)

You can choose to have a different rate from 0% to 100%. Generally, you can't choose less than 10% for payments to be delivered outside the United States and its possessions. If you would like a rate of withholding that is different from the default withholding rate, complete the line below. See the instructions and the <a href="Marginal Rate Tables">Marginal Rate Tables</a> on the enclosed IRS Form W-4R for additional information.

**Enter the rate as a whole number (no decimals)** \_\_\_\_\_\_\_% (If left blank, 10% will be withheld.)

**State Tax Withholding:** State tax will be withheld according to state regulations if, at the time of your withdrawal, your tax residency is within one of the mandatory withholding states.

<sup>&</sup>lt;sup>1</sup> Distributions from Beneficiary IRAs will be reported as Death distributions, regardless of age; distributions from Coverdell ESAs will be reported as standard distributions.

<sup>&</sup>lt;sup>2</sup> Not available for automatic redemptions.

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# **Sign Your Name and Date Below**

- I/we authorize American Century Services, LLC ("American Century") to act upon my/our instructions provided on this form.
- If signing for a trust, this form must be accompanied by a copy of the portion of the trust document that names the trustees if a copy hasn't already been submitted to American Century.
- If signing for any type of business entity, each signer must state his or her title, and each signer's name must be recorded in the account records as authorized to act on behalf of the entity.
- If the account listed is registered to a minor, the Custodian/Guardian/Responsible Individual for the minor must sign below.
- If I have requested an IRA withdrawal, I attest that I have read and understand the IRS Form W-4R that was provided to me with this form, and my withholding election is based on the W-4R form's instructions and Marginal Rate Tables. I have independently verified that the W-4R form I received is the most current IRS version available. My signature and date on this form also serves as my W-4R form withholding election signature.

Please sign exactly as your name(s) appear(s) on the account records. Unless your requested transaction requires a Signature Guarantee as described below, only one owner or authorized signer must sign.

If an Agent under Power of Attorney is signing this form on behalf of an account owner, please submit a copy of the Power of Attorney document (subject to review and approval by American Century) along with this form unless it is already on file.



Printed name	Date
Printed name	Date
Agent's printed name	Date
	Printed name

### Signature Guarantee

If redeeming payable to an alternate payee, a signature guarantee is required, and all owners/authorized signers must sign and have their signature guaranteed. For personal accounts, all account owners must sign. For entity accounts, the number of signatures specified by your entity's governing documents is required.

A signature guarantee is a warranty by the guarantor that the signature is genuine and that the person signing is competent and authorized to sign.

Many domestic banks, trust companies, credit unions, brokers, dealers, national securities exchanges, registered securities associations, clearing agencies and savings associations can provide a signature guarantee 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 signature by a notary public is NOT acceptable.

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

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Business, Not-For-Profit and Employer-Sponsored Retirement Plans P.O. Box 419385 Kansas City, MO 64141-6385 1-800-345-3533 Personal Accounts P.O. Box 419200 Kansas City, MO 64141-6200 1-800-345-2021

Investors Using Advisors P.O. Box 419786 Kansas City, MO 64141-6786 1-800-378-9878