Standardized 401(k), profit sharing, or money purchase plan application



Return by mail: Putnam Investments PO Box 219697 Kansas City, MO 64121-9697 Return by express delivery: Putnam Investments 430 W 7th Street Suite 219697 Kansas City, MO 64105-1407 For more information: Putnam Investments 1-800-662-0019 www.putnam.com



Use this form to establish a new Simplified Profit Sharing Plan, Money Purchase Pension Plan or Standardized 401(k) Plan. **Please note:** Your employer must already have a Simplified Profit Sharing Plan, Money Purchase Pension Plan or Standardized 401(k) Plan established.

Section 1 Plan type	
Select the account type you want to establish. Please complete a separate Statestablish additional plan types.	andardized 401(k), profit sharing, or money purchase pension plan application to
☐ 401(k) plan ☐ Profit sharing plan ☐ Money purchase plan	
Section 2 Provide employee information	
Name of employee First MI Last Suffix	Social security number (required) Date of birth (mm/dd/yyyy; required)
Contact phone number E-mail address	
Note: Providing an e-mail address and/or phone number above will replace be made for fields that are left blank. If you are enrolled in electronic delive	the current contact information on file with Putnam (if applicable). No changes will ry, all notifications will be sent to the e-mail address listed above.
will allow you to choose your eDelivery options. Documents available for eD annual/semiannual fund reports, proxy statements, and tax forms. When a r Putnam Investor Services will send you an e-mail notification that the document will be provided to you prior to confirmation of your electionss, prospectuses.	il address provided above with a link to Putnam's secure Investor Website, which belivery include transaction confirmations, quarterly statements, prospectuses, new document is available, instead of sending the document to you by U.S. mail, ment is available via Putnam's Website. Terms and Conditions related to eDelivery es, annual/semiannual fund reports, proxy statements, and tax forms. When a new , Putnam Investor Services will send you an e-mail notification that the document is
City	State ZIP code
Residential address (Required if different than mailing address. No P.O. Box of Street	or c/o addresses)
City	State ZIP code
Section 3 Provide employer information	1
Name of company	Company number
Street address	
City	State ZIP code

Section 4 Provide information about your financial advisor Dealer number Branch office number Financial advisor number CRD number Financial advisor name(s) exactly as it appears on firm's registration Financial advisor's firm Financial advisor's contact phone number Branch office street address City State ZIP code Note: If you do not designate a financial advisor, or if the broker-dealer firm you designate does not have a selling agreement with the distributor, Putnam Retail Management Limited Partnership ("PRM"), PRM will be designated as the default broker-dealer firm of record on your account and PRM will retain all applicable sales charges. You may designate another broker-dealer firm at any time by returning a signed Change of financial advisor form to Putnam Investor Services. Section 5 Select your funds Please use the Putnam Fund Guide (https://www.putnam.com/literature/pdf/FM103.pdf) to select your investment. You must enter the fund name and number for the corresponding share class you wish to establish. For additional fund elections, please attach a separate sheet of paper with fund number, fund name and percentage. For new investments made to Putnam: If no class of shares is indicated, class A shares will be purchased and any unallocated assets will be invested into Money Market A. Investments made through payroll deduction contributions will be applied for the year received. Fund number Fund name Percentage (percent assigned should be in whole numbers) 100% (percentage allocations for all funds must total 100%) Section 6 Authorization I certify under the penalties of perjury that the Employee Social Security number in Section 2 is true, correct and complete. I have received a current prospectus(es) of the Putnam fund(s) selected. For Profit Sharing Plans and Money Purchase Plans, I agree that an annual maintenance fee of \$20.00 will be deducted from the account(s). For 401(k) Plans, I agree that an annual maintenance fee of \$35.00 will be deducted from the account(s). Important notice regarding Putnam's privacy policy: By signing this application, I acknowledge that Putnam's privacy policy is available for viewing and printing via Putnam's website at https://www.putnam.com/policies/ Signature of employee Date (mm/dd/yyyy) Print name of signature above