

Putnam 529 for AmericaSM
new account application



Return by standard delivery:
Putnam Investments
PO Box 219697
Kansas City, MO 64121-9697

Return by overnight delivery:
Putnam Investments
801 Pennsylvania Ave
Suite 219697
Kansas City, MO 64105-1307

For more information:
Putnam Investments
1-877-PUTNAM529
1-877-788-6265
www.putnam.com

Please make checks payable to:
Putnam Investments



Use this form to open a new Putnam 529 for America account.

Please return all pages. **The full legal name, Social Security number, date of birth, and residential address are required for the account owner and the beneficiary.**

You must provide a phone number or e-mail address if you wish to access your account on-line.

All references herein to the singular (i.e., “I” or “my”) include the plural as applicable. The account owner and **all owners of the bank account** provided in Section 8 (if applicable), must provide their authorization in Section 9.

Section 1 **Select your account owner/beneficiary**

Please complete only one subsection below (1A or 1B). **All information within that subsection is required.** The account owner opens the account, directs all beneficiary designations and withdrawals, and receives statements for the account. The beneficiary is the person whose qualified education expenses may be paid from the account.

Section 1A: Individual as account owner

Name of account owner/custodian

First MI Last Suffix Social Security number Date of birth (mm/dd/yyyy)

Name of beneficiary

First MI Last Suffix Social Security number Date of birth (mm/dd/yyyy)

Section 1B: Trust as account owner

You must provide an excerpt of the trust, including the first page, all signed pages, and the designation of trustees.

Name of trust Tax identification number Date of trust (mm/dd/yyyy)

Name of trustee

First MI Last Suffix Social Security number Date of birth (mm/dd/yyyy)

Name of beneficiary

First MI Last Suffix Social Security number Date of birth (mm/dd/yyyy)

Section 2 **Source of investment**

A 529 UGMA/UTMA account can only be opened with assets from an existing UGMA/UTMA account of the same beneficiary. Money placed in an UGMA/UTMA registration represents an irrevocable gift to the minor and cannot be combined with other 529 plan types. Indicate the source of the investment below:

The investment to this account is **not** from an existing UGMA/UTMA account (default option).

The investment to this account is from an existing UGMA/UTMA account from the donor state of (required).

Section 3 Provide your address and contact information

Provide the address and contact information for the individuals/entities listed in Section 1.

Account owner residential street address (cannot be a P.O. Box or c/o address)	City	State	ZIP code
Mailing address for account (if different from residential address)	City	State	ZIP code
Beneficiary residential street address (if different from account owner)	City	State	ZIP code
Contact phone number	E-mail address		

Note: Providing a phone number or e-mail address above will replace the current contact information on file with Putnam (if applicable). If you are enrolled in electronic delivery, all notifications will be sent to the e-mail address listed above.

Section 4 Designate a successor owner/custodian (if applicable)

The successor owner/custodian will become the owner/custodian of the account in the event of the account owner’s/custodian’s death. The successor owner/custodian cannot be the same person as the account owner/custodian. **All information is required.**

Name of successor owner/custodian (First, MI, Last, Suffix/Full name of trust)		
Social Security/Tax ID number (required)	Date of birth (mm/dd/yyyy; required for an individual)	Date of trust (mm/dd/yyyy; required for a trust)

Section 5 Financial intermediary information

Please use this section to designate financial intermediary and financial representative information on your Putnam account. A financial intermediary is the broker-dealer, bank, or other financial institution through which you purchase shares of the Putnam Funds. The financial representative is the person associated with the financial intermediary who is assisting you with your investments. You may designate a financial intermediary at any time by returning a signed Financial intermediary change request to Putnam Investor Services. Franklin Distributors, LLC (“FD”) will be designated as the default broker-dealer of record on your account(s) and will retain all applicable sales charges if any of the following apply:

- You do not designate a financial intermediary below.
 - The financial intermediary you designate does not have a selling agreement with FD.
- Please note that FD is not a full service broker-dealer and does not provide investment advice. As default broker-dealer, FD cannot assist you with financial planning or provide recommendations, services that are provided by a financial intermediary. If you wish to receive such services, you must designate a financial intermediary.

Note: Please refer to <https://www.finra.org> for assistance in locating the Central Registration Depository (CRD) number for the financial intermediary.

Financial institution ID	Branch office ID	Financial representative ID	CRD number
Financial intermediary			
Financial representative name(s) exactly as it appears on firm’s registration		Financial representative’s phone number	
Branch office address	City	State	ZIP code

Section 6 Investment Instructions

Please indicate how you wish to fund your Putnam 529 for America account. Select all that apply.

- A check is enclosed / A check is en route (make checks payable to Putnam Investments)
- Invest as a contribution into a Putnam 529 for America account
- Invest as a rollover from an account that was held at another financial institution (you must indicate the type of plan held with your previous custodian):
Source of the rollover: All rollover investments from a 529 or US Savings Bond will be coded as earnings unless **documentation*** showing the breakdown of principal and earnings is attached. All rollover investments from a Coverdell ESA will be coded as contributions.
- Another 529 program Coverdell ESA US Savings Bond(s)

Alternative investment instructions

- Solicit my current trustee via rollover (please attach the enclosed Putnam 529 for America direct rollover request form)
- Fund my 529 with a purchase from an existing non-retirement account registered solely in my name. Investments will be made into the same share class as previously held. Some restrictions may apply.

Fund number Account number Dollar amount

— \$

Draft a one-time debit from my checking or savings account for (limit of \$200,000 per fund-account):

\$ (indicate investment elections in Section 7 and bank account information in Section 8)

Note: The one-time debit will be initiated on the date the account is established.

Draft systematic investments from my checking or savings account (indicate bank account information in Section 8)

*Documentation requirements:

- Another 529 program – a statement issued by the distributing 529 program which shows the earnings portion of the distribution.
- Qualified US Savings Bond(s) (under Section 135(c)(2)(C) of the Internal Revenue Code) – an account statement or Form 1099-INT issued by the financial institution that redeemed the bond(s) showing interest from the redemption of the bond(s). If no documentation is attached, the IRS requires Putnam to treat the entire amount of the rollover contribution as earnings.

Section 7 Select your investment options

Please use the Putnam Fund Guide (<https://www.franklintempleton.com/forms-literature/download/PFGUD-FORM>) to select your investment. For additional investment options, please attach a separate sheet of paper with the applicable fund number, investment option name, and dollar amount.

- For new investments made to Putnam: If no class of shares is indicated, class A shares will be purchased.
- If you are transferring shares held in The Putnam funds to a new ownership registration with Putnam, you must select the same share class as the original account. Some restrictions may apply.

Section 7A - Age-based investment option

Age-based Investment options are determined by the beneficiary’s year of birth. Beneficiaries of age 21 and older requesting the Age-based Option will be invested into Putnam’s Graduate fund.

Age-based fee structure: A or C

Dollar amount

\$

Section 7B - Goal based/individual investment options

You must enter the investment option name and fund number for the corresponding share class you wish to establish.

Fund number	Fund name	Dollar amount	Percentage
		\$	or %
		\$	or %
		\$	or %
		\$	or %
		\$	or %
			<div>100%</div>

Section 8 **Select your account features (if applicable)**

Section 8A - Bank account information (You must provide a voided check or deposit slip; please do not staple)

Note: Starter checks, brokerage checks and checkwriting checks will not be accepted.

Please provide your bank information below to purchase shares by phone, web, or systematic investment plan. All individuals named on the bank account registration must authorize the use of the bank account to purchase shares by signing in Section 9. If you wish to add telephone redemption options via Federal bank wire and/or ACH to a bank within the United States, please complete Putnam’s Add or change bank account information form with the applicable signature authentication stamp.

Attach a preprinted or web-generated voided check/deposit slip or a signed letter from the bank on bank letterhead below. Each of these documents must include: bank name, name(s) as registered on the bank account, routing number and account number.

Indicate the type of bank account you would like to use: ☐ Checking account ☐ Savings account

Please use my enclosed investment check to establish bank account options on my account in lieu of other acceptable documents named above.

Tape voided check/deposit slip here

Bank ABA routing number Bank account number

Section 8B - Systematic investment plan

Complete this section to establish a new systematic investment plan using the bank account information provided above. Investments will be made into the same fee structure selected in Section 7 unless otherwise indicated. Putnam requests the draft from your bank account on the business day prior to the investment date.

Step 1: Investment frequency

Please indicate a start month, start year, frequency, and investment date for your systematic investment plan. If the investment date falls on a date which does not occur within a particular month (29th-31st), the investment will be made on the prior day, unless the day falls on a weekend or a holiday, then the investment will be made on the next business day.

- If no start month is indicated, distributions will begin on the next available month.
- If no start year is indicated, investments will begin in the current year. If there are no investment dates remaining for the current year, then the program will begin the following year.
- If no frequency is selected investments will take place monthly.
- If no investment date is selected, investments will take place on the 15th.
- Any investments designated for a date which has already occurred will not be processed until the next investment date indicated.

Start month	Start year	Frequency (check one)		Investment date		
		Monthly	Semiannually	1st	10th	20th
		Quarterly	Annually	5th	15th	25th

Step 2: Investment allocation(s)

Please indicate the fund number, fund name, and dollar amount for each investment.

Fund number	Fund name	Dollar amount
		\$
		\$
		\$

Section 8 Select your account features (if applicable)(continued)

Section 8C - Reduced sales charge

If you already own shares of another Putnam fund, or if you agree to invest a certain amount, you may be able to reduce the sales charge you pay. Shares that have not been assessed a sales charge will not count towards your Cumulative Discount or Letter of Intent. This includes commissionable shares of the Putnam Money Market Fund, the Putnam Government Money Market Fund, and the Ultra Short Duration Income Fund, as well as closed end funds and Putnam class Y shares.

Cumulative discount

To qualify for sales charge discounts on class A shares, list the account number(s) of other Putnam fund(s) that you or your family (spouse and/or children under age 21) own. Please contact Putnam for requirements related to linking external accounts invested in Putnam funds.

Fund number	Account number	Fund number	Account number
—		—	

Letter of intent

A letter of intent allows you to receive a reduced sales charge by committing to invest a minimum of \$50,000 with Putnam over a 13-month time frame as disclosed in the Statement of additional information.

- To receive a reduced sales charge through a new letter of intent, complete Putnam’s Letter of intent to purchase form. The form must be included with this application or on file with Putnam prior to the investment to qualify for a reduced sales charge.
- To receive a reduced sales charge through an active letter of intent in your name, provide your existing fund and account number below:

Fund number	Account number
—	

Notes:

- The 13-month time frame will continue to elapse based on the original request for the letter of intent.
- If you do not have an active letter of intent, your investments will incur the applicable sales charge.

Section 9 Authorize Putnam to open your account

I do not authorize telephone redemptions. Accept only written instructions signed by me.

Unless I have checked the box above, Putnam Investor Services, Inc. is authorized to act upon redemption instructions received by telephone from me, my legal representative, or any other person authorized by me who can confirm pertinent information identifying me and my account as it appears on Putnam’s records. Redemption proceeds of up to \$250,000 may be sent (1) by check payable as the account is registered and mailed to the address of record on file with Putnam for at least 15 days, or (2) by check to an educational institution for the benefit of the beneficiary of the account. Putnam will not be liable for unauthorized transactions if it employs reasonable procedures to confirm that instructions received by telephone are genuine. I agree to indemnify and hold harmless Putnam Investor Services, Inc., the State of Nevada, the Nevada College Savings Trust Fund, the Board of Trustees of the College Savings Plans of Nevada and the Putnam Investment Options against any claim or loss in connection with any telephone transaction effected on my account.

I do not authorize the mailing of only one annual report, one offering statement, or one set of other investor documents for all accounts in a Putnam investment option at my address. Send a separate copy for every account.

Unless I have checked the box above, Putnam Investor Services, Inc. is authorized to send only one annual report, one offering statement, or one set of other investor documents for **all** accounts in any Putnam investment option at my address. I may call Putnam at 1-877-788-6265 if I decide to receive my own copy of these documents in the future, and Putnam will begin sending individual copies within 30 days.

I acknowledge that Putnam’s privacy policy is available for viewing and printing at <https://www.franklintempleton.com/help/privacy-policy>.

If I have completed the bank account information section, I authorize my/our bank/credit union to accept credit entries initiated by Putnam Investor Services, Inc., to my account and to credit, as requested, the same to my account, without responsibility for correctness thereof or for the existence of any further authorization relating thereto. I also authorize my bank/credit union to accept debit entries initiated by Putnam Investor Services, Inc., to reverse or otherwise correct any erroneous credit to my bank/credit union account. I agree to indemnify and hold harmless my bank/credit union, Putnam Investment Options, Putnam Investor Services, Inc., the State of Nevada, the Nevada College Savings Trust Fund and the Board of Trustees of the College Savings Plans of Nevada for any loss, liability, or expense incurred from acting on these instructions. I/we also agree to waive any right under the NACHA Rules to rescind any instruction for ACH transactions that have already occurred at the time of the attempt to rescind. This waiver of the rescission right applies to both ACH investments in and ACH redemptions from the Putnam funds. This authorization may be terminated by me at any time by written notification to Putnam Investor Services, Inc., with reasonable time given to implement my/our request. Putnam Investor Services, Inc. may amend or terminate this agreement at any time. You will be notified before any such changes go into effect. For bank account information, Putnam does not assess a fee for federal bank wire and/or ACH transactions on your account(s). Some banks/credit unions may not offer ACH transactions or may charge a fee to conduct such transactions. Please check with your financial institution for information regarding eligibility, fees and applicable routing number(s) for federal bank wire and/or ACH transactions.

Section 9 **Authorize Putnam to open your account (continued)**

I acknowledge that investments in the Putnam 529 for America program are not mutual funds; are not deposits or obligations of, or guaranteed or endorsed by, the State of Nevada, the Nevada College Savings Trust Fund, the Board of Trustees of the College Savings Plans of Nevada, Putnam Investments, or any financial institution; are not insured by the Federal Deposit Insurance Corporation (FDIC), the Federal Reserve Board, or any other agency; and involve risk, including the possible loss of principal.

I understand and acknowledge that any systematic purchases or other contributions are not deductible from federal income tax.

Federal law requires the Putnam funds to obtain the name, residential or business address, Social Security or tax identification number, and date of birth for each registered owner, including trustees, opening a new account in order to verify their identities. For certain entities such as trusts, estates, or other non-corporate organizations, additional documentation may be required (see the following terms and conditions or call Putnam at 1-800-225-1581). The funds are unable to accept new accounts if any required information is not provided. If the funds are unable to verify your identity, your account will be closed at the then-current NAV, which may be more or less than your original investment, and the proceeds will be sent to you, net of any applicable sales charges. The information you provide may be shared with third parties for the purpose of verification subject to the terms of Putnam's privacy policy.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ AND AM AGREEING TO THE TERMS OF THE OFFERING STATEMENT, ITS ATTACHED PARTICIPATION AGREEMENT FOR THE PUTNAM 529 FOR AMERICA PROGRAM, AND THIS APPLICATION. I UNDERSTAND THAT I SHOULD CONSULT A FINANCIAL OR LEGAL ADVISOR IF I HAVE ANY QUESTIONS ABOUT THE TERMS AND CONDITIONS OF THIS AGREEMENT. THIS APPLICATION TOGETHER WITH THE PARTICIPATION AGREEMENT INCORPORATED HEREIN, CONSTITUTES MY CONTRACT WITH THE STATE OF NEVADA, THE NEVADA COLLEGE SAVINGS TRUST FUND, AND THE BOARD OF TRUSTEES OF THE COLLEGE SAVINGS PLANS OF NEVADA WITH RESPECT TO AMOUNTS INVESTED PURSUANT TO THIS APPLICATION.

Signature of Putnam account owner (required)

Signature of owner/custodian/trustee/authorized signer

Current date (mm/dd/yyyy)

Print name of signer

All individuals named on the bank account registration in Section 8 who did not already sign above as a Putnam account owner must sign below to authorize the use of the bank account to purchase shares. By signing below, each bank account owner authorizes purchases to be made from their bank account.

Signature of bank account owner(s) (required if different from the Putnam account owner)

Signature of bank account owner

Current date (mm/dd/yyyy)

Print name of signer

Signature of bank account owner

Current date (mm/dd/yyyy)

Print name of signer

Putnam 529 for AmericaSM
direct rollover request form



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Use this form to request a direct rollover from your current 529 program manager or Coverdell Education Savings account trustee to fund your Putnam 529 for America account. Complete Sections 1, 2 and 3 with your current account information as it appears on your most recent 529 program or Coverdell Education Savings Account statement from your current program manager or trustee. Upon receipt, Putnam will use this form as authorization to solicit assets from your current program manager or trustee.

Important:

- Consult your present trustee/custodian to determine if there are any fees associated with this request and to ensure that all requirements to release the funds are satisfied. Some firms may require the completion of their own form, may reject paperwork which is not original, or may require an authentication stamp to verify the signature(s) in the authorization section.
- Please Include a statement from your current trustee/custodian.
- You must include a new account application with this form to establish a new Putnam 529 for America account.
- To update your financial advisor designation you must complete the Financial intermediary change request form.
- To receive a reduced sales charge through a letter of intent as disclosed in the statement of additional information, complete Putnam’s Letter of intent to purchase form. The form must be included with this request or on file with Putnam prior to the investment to qualify for a reduced sales charge.

Section 1 Account owner information

Name of current individual/organization/trust/entity Tax identification number

Authorized representative of organization or trustee

First MI Last Suffix Contact phone number

Note: Providing a phone number above will replace the current contact information on file with Putnam (if applicable).

Section 2 Current beneficiary information

Name of beneficiary First MI Last Suffix Social Security number

Existing account type: 529 Savings Plan Coverdell Education Savings Account

Section 3 Instructions for direct rollover

Please roll over the following for the owner and beneficiary listed above. For 529 plans, please fill out Sections 3 and 4. For Coverdell Education Savings accounts, only complete Section 3. If you currently hold 529 UGMA/UTMA or Coverdell Education Savings assets apart from contributory assets, please provide separate checks. Provide the appropriate contributions and earnings breakdown separately.

Section 3A - Present 529/Coverdell account information

Please solicit for **100%** of the assets from the following account:

Present trustee/custodian account number(s)

Please solicit for **a portion** of the assets from the following account:

Present trustee/custodian account number(s)

Dollar amount Percentage
\$ or %

Section 3B - Present 529 program manager/Coverdell trustee information

Name of present program manager/custodian/trustee Contact phone number

Program manager/custodian/trustee mailing address City State ZIP code

Section 4 Rollover instructions

I am requesting a direct rollover from my existing 529 plan into an account for the same beneficiary as referenced in Section 2, unless a new beneficiary is noted below.

Name of beneficiary

First

MI

Last

Suffix

Social Security number

Note: If the receiving beneficiary is not a “member of the family” of the current beneficiary, the rollover to the account of the receiving beneficiary will be treated as a distribution with earnings subject to tax and penalty. See Section 6 for definition of “member of the family.” You are not eligible to roll over this account if you have performed a rollover from one Program Manager to another Program Manager for the current beneficiary within the last 12 months. If you currently act as custodian of an account for a beneficiary under an account subject to the Uniform Gifts to Minors Act (UGMA) or Uniform Transfers to Minors Act (UTMA), the beneficiary cannot be changed.

Section 5 Select your investment options

Please use the Putnam Fund Guide (<https://www.franklintempleton.com/forms-literature/download/PFGUD-FORM>) to select your investment. For additional investment options, please attach a separate sheet of paper with the applicable fund number, investment option name, and dollar amount.

- For new investments made to Putnam: If no class of shares is indicated, class A shares will be purchased.
- If you are transferring shares held in The Putnam funds to a new ownership registration with Putnam, you must select the same share class as the original account. Some restrictions may apply.

Fund number	Fund name	Dollar amount	Percentage
		\$	or %
		\$	or %
		\$	or %
			100%

Section 6 Authorization

I authorize Putnam 529 for America to process this direct rollover on my behalf, and/or to certify the above information regarding the attached check(s) to be complete and correct. My current 529 program manager/Coverdell Education Savings account trustee is entitled to rely on this request and is released from any and all claims I may have or hereafter claim to have with respect to the withdrawal. I certify that both my Social Security number and that of the beneficiary, set forth in Sections 1, 2 and 4 (if any) are true, correct and complete and that the numbers are our Taxpayer Identification Numbers (TIN).

I understand that if I am designating a new beneficiary for the Putnam 529 account, as defined by IRC 529, the new beneficiary must be a member of the current beneficiary’s family and either a U.S. citizen or resident alien. If the new beneficiary is not a member of the family, the transfer will be treated as a withdrawal, and the transaction will be subject to federal income tax and a 10% federal penalty tax on earnings. For purposes of Internal Revenue Code Section 529, a member of the beneficiary’s family is: 1) a son or daughter or a descendant of either; (2) a stepson or stepdaughter; (3) a brother, sister, stepbrother or stepsister; (4) a father or mother or an ancestor of either; (5) a stepfather or stepmother; (6) a brother or sister of the father or mother; (7) a son or daughter of a brother or sister; (8) a son-in-law, daughter-in-law, father-in-law, mother-in-law, brother-in-law or sister-in-law; (9) the spouse of the beneficiary or the spouse of any individuals described above; or (10) a first cousin of the beneficiary.

I also understand that I may transfer funds from another qualified tuition program for the benefit of the same beneficiary without tax or penalty, so long as the transfer does not occur within 12 months from the date of a similar transfer for the same beneficiary.

I understand that if my current 529 program manager or Coverdell Education Savings account trustee does not provide required documentation, Putnam will treat my entire rollover contribution as consisting of earnings.

A signature/medallion guarantee may be required by your current custodian in order to complete your rollover request. A signature/medallion guarantee is a stamped assurance by a financial institution that indicates a signature is valid and has the financial backing of the institution. The guaranteed stamp should not be dated. If a signature/medallion guarantee is dated, it is only valid for that date. **Please contact your current custodian to inquire whether or not a signature/medallion guarantee is required.**

The owner/authorized party named in Section 1 must sign below.

Signature of owner/authorized party

Print name of signer

Current date (mm/dd/yyyy)

PLACE SIGNATURE/MEDALLION GUARANTEE STAMP BELOW
THE GUARANTEE SHOULD NOT BE DATED