

Standardized 401(k), profit sharing, or money purchase plan 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
1-800-662-0019
www.putnam.com



Use this form to establish a new Simplified Profit Sharing Plan, Money Purchase Pension Plan or Standardized 401(k) Plan.
Please return all pages. **The full legal name, Social Security number, date of birth, and residential address are required for the employee.**
You must provide Putnam with a phone number or e-mail address if you wish to access your account on-line.
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 Standardized 401(k), profit sharing, or money purchase pension plan application to establish additional plan types.

401(k) plan Profit sharing plan Money purchase plan

Section 2 Provide employee information

Name of employee									
First	MI	Last	Suffix	Social security number		Date of birth (mm/dd/yyyy)			
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.

Residential street address of account owner (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

Section 3 Provide employer information

Name of company	Company number
Company mailing address	City State ZIP code

Section 4 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 street address			
City	State	ZIP code	

Section 5 Select your funds

Please use the Putnam Fund Guide (<https://www.franklintempleton.com/forms-literature/download/PFGUD-FORM>) 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
		%
		%
		%
		%
		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). I acknowledge that Putnam's privacy policy is available for viewing and printing at <https://www.franklintempleton.com/help/privacy-policy>.

Signature of employee	Current date (mm/dd/yyyy)
<div></div>	
Print name of signer	