

**Return by mail:**  
Putnam 529 for America  
Putnam Investor Services, Inc.  
P.O. Box 8383  
Boston, MA 02266-8383

**Return by express delivery:**  
Putnam Investor Services, Inc.  
30 Dan Road  
Canton, MA 02021-2809

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



Use this form to change the account owner or successor owner of your Putnam 529 for America account.

## Section 1 Current account owner information

Name of owner

Individual/organization/trust

Taxpayer Identification number (required)

Authorized representative of organization or trustee

## Section 2 Beneficiary information

Name of beneficiary

First

MI

Last

Social Security number (required)

Date of birth (required; mm/dd/yyyy)

## Section 3 New account owner information

Complete this section if you are changing the account owner of your Putnam 529 for America account. Additional documentation may be required. See Section 7 of this form.

Name of owner

Individual/organization/trust

Taxpayer Identification number (required)

Date of birth (required; mm/dd/yyyy)

Authorized representative of organization or trustee

### Mailing address (required)

Street

City

State

Zip code

Day phone

Evening phone

E-mail address

**Residential address (required; P.O. boxes and c/o addresses will not be accepted.)**  Check here if same as mailing address

Street

City

State

Zip code

**Note:** existing service options will not carry over. To establish systematic investments or automatic reallocations on your new Putnam 529 for America account, please complete the Automated investment and reallocation application. For questions please contact Putnam at 1-877-788-6265.

## Section 4 New successor owner information

Complete this section to assign or change the successor owner of your Putnam 529 for America account. **(Please note that any pre-existing successor owner information will not be carried over to the new account).**

Name of new successor

First	MI	Last	Social Security number (required)	Date of birth (required; mm/dd/yyyy)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## Section 5 Registered Owner Authorization

I hereby transfer ownership of the account to the owner named in Section 3 and/or designate a new successor owner of the account as indicated above. I certify that the information contained herein is true and correct. The new account owner and new successor owner (as applicable) and I are U.S. Citizens or resident aliens. I certify that the taxpayer identification numbers in Section 1 and 2 are true, correct and complete. I acknowledge and agree that this transfer and/or designation is irrevocable and that, if I am transferring the account to a new account owner, I will cease to have any right, title, claim or interest in the account upon acceptance of this form by Putnam. I understand that if I have any questions as to the tax, legal or other consequences of submitting this form, I should consult my own tax, legal or other competent counsel prior to submitting this form.

**Putnam requires a signature/medallion guarantee on this form for the existing account owner's signature.**

Signature of existing owner

Date (mm/dd/yyyy)

<input type="text"/>	<input type="text"/>
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PLACE SIGNATURE/MEDALLION GUARANTEE STAMP BELOW

**A signature/medallion guarantee is a stamped or typed assurance by a financial institution that indicates a signature is valid and has the financial backing of the institution.**

REQUIRED

## Section 6 Provide information about your financial advisor

Check here to carry over the existing financial advisor information (Please skip to section 7)

Dealer number	Branch office number	Financial advisor number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Name of financial advisor

First	MI	Last
<input type="text"/>	<input type="text"/>	<input type="text"/>

Financial advisor's firm

Phone

<input type="text"/>	<input type="text"/>
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Branch office street address

City State Zip code

<input type="text"/>	<input type="text"/>	<input type="text"/>
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## Section 7 New Owner Authorization

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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 instructions received by telephone from me or any other person claiming to act as my representative who can provide Putnam with my account registration and address as it appears on Putnam's records. Redemption proceeds of up to \$100,000 will be sent to me at an address on record with Putnam for at least 15 days. 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 certify that the taxpayer identification number in Section 3 is true, correct and complete.

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.

In accordance with federal law, Putnam is required to obtain my name, residential or business address, Social Security or tax identification number, and date of birth (if applicable) in order to verify my identity. In addition, trusts and non-profit organizations are required to provide documentation in order for the funds to verify their identities. Please contact Putnam at 1-877-788-6265 for more information. The information I provide may be shared with third parties for the purpose of verification subject to the terms of Putnam's privacy policy. Putnam is unable to accept this new account if any required information is not provided. If Putnam is unable to verify the account owner's identity, this account will be distributed at the then-current unit value. I understand that federal income taxes may be due on the taxable part of any such distribution. I further understand that under federal tax law any rollover of such distribution to another qualified tuition program that will accept it must occur within 60 days. I will consult my professional tax advisor if I have any questions about the tax consequences of any such distribution.

By signing below, I am agreeing to the terms of the Offering Statement, Participation Agreement attached to the Offering Statement, and the terms of the Account Application, a copy of which I have received. I understand that I should consult a financial or legal advisor if I have any questions about the terms and conditions of this agreement.

My signature below indicates I have read the Offering Statement and Participation Agreement for the Putnam 529 for America program and agree to the terms therein and herein. The Account 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 the application.

**\*If you are taking ownership of this account because the existing account owner is deceased, Putnam requires a signature/medallion guarantee on this form for the new account owner's signature.**

Signature of new account owner (if applicable)

Date (mm/dd/yyyy)

\*PLACE SIGNATURE/MEDALLION GUARANTEE STAMP BELOW

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### Additional documentation for trusts, estates and other entities

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**Trusts** Provide an excerpt of the trust, including the first page, all signed pages, and the designation of trustees, certified within 120 days

**Corporations, partnerships, organizations, and other entities** (provide one of the following)

• A certificate of good standing issued by the state in which the entity is incorporated or organized

• Articles of incorporation or organization certified by the appropriate state agency

• A copy of IRS Employee Identification Number (EIN) assignment letter and one of the following: corporate resolution or equivalent, copy of by-laws, partnership agreement, or other organizing document

**Note:** If you are only adding or changing successor custodian information, additional documentation is **not** required.