Request for redemption from a nonretirement account



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 1-800-225-1581 www.putnam.com



Use this form to request a complete, partial or systematic redemption from your nonretirement account. Redemptions from these accounts may have tax implications and result in additional fees. Consult your financial advisor or tax advisor if you have any questions. For corporations, partnerships, trusts, or other entities where the current authorized signer(s) is/are not named in the account registration, additional documentation may be required.

Note: This form cannot be used to redeem closed-end funds. Please contact your financial advisor for assistance.

Name of owner/custodian/trustee/entity								Social Security/Tax ID number (required)			Date of birth (mm/dd/yyyy)							
Name of joint owner/minor/co-trustee/authorized party									Social Security number (required)			Date of birth (mm/dd/yyyy)						
Contact phone num	ber																	
Note: Providing a p made.	hone	number a	above	will r	epla	ce th	e cur	rent	t contac	ct in	ormation on file with F	Putnam (if	applicable). If	this field	is left bl	ank, no	chan	ges wil
Section 2	Req	uest	for	a	one	e-t	im	e r	ede	m	ption							
	that ar	e to be re	edeem	ned o	r whe						redeem from each app ot Identification accoun							
Fund number	A	Account n	ιumbε	<u>e</u> r						_	Dollar amount	Share amou		ınt .		Percentage		
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Section 3	Sys	tema	ıtic	re	de	m	oti	on	op	tic	ns							
default to once per date falls on a date t	year. hat do	If the syst	temati ccur w	ic red ithin	lemp a pai	tion (date ar mo	falls onth	on a w (29th-	eeke 31st	is selected, Putnam wind or a holiday, the red nd or a holiday, the red , the redemption will be tions can only be sent	lemption v e made the	vill be made the prior day, un	e next bus ess this da	siness da	ay. If the	e rede	mptior
Note: An attorney-in- certification.	-fact ca	n only est	ablish.	a sys	tema	itic re	dem	otior	n via che	eck.	This form must be accor	mpanied by	the appropria	te certified	legal do	cument	(s) wit	h origir
Step 1: Redemption	alloca	tion(s)														Annu	alized	
Fund number	A	Account n	ıumb∈	er.						φ	Dollar amount		Share amou	ınt		perce	entage	9
	— L									P		or			or]%
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Step 2: Redemption Choose a frequency	•	•	will d	efaul'	t to c	nce p	oer y	ear i	if no op	tion	is selected:							
Frequency: 🗆 Re	deem	every mo	onth (e	enter	rede	mpti	on da	ate(s	s) belov	v) o	☐ Redeem only in the	e month(s)	chosen belov	v:				
□ Jan □ Feb	□ Ma	ar 🗆 /	Apr		May		Jun	е	☐ July		□ Aug □ Sept □	Oct [] Nov □ D	ec				
Indicate redemption Redemption date: (MM/DD)	Add		demp [,]	tion c	date:	(Use	if yo	u wi	ish to re	edee	m multiple times within	a month)						

Section 4 Payment instructions

Alternate mailing address (street, city, state, ZIP code)

Select your payment instructions below; if no selection/instructions are provided, payment will be made to the account owner as registered to the address of record via the U.S. Postal Service (standard delivery). **See Section 6 for signature guarantee/medallion guarantee stamp requirements.**

Reinvest

Proceeds must be reinvested into the same share class as previously held; some restrictions may apply. For IRA and Coverdell accounts, proceeds will be reinvested into the same fund(s) unless otherwise indicated on this form, a separate letter of instruction or a new account application. Only prior year and current year contributions are permitted. If no contribution year is indicated, your investment will be coded for the current year in which your paperwork is received at Putnam per IRS regulations. For prior year contributions, the envelope must be postmarked on or before the tax filing deadline.

For proceeds reinvested into a 529 for America account, Investment options must be provided and the contribution year will always be coded for the current year in which your paperwork is received at Putnam. Please provide 529 for America investment options on a separate letter of instruction or a new account application.

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	Into a new/exaccount.	kisting Putnam IRA, Coverde	ell, or 529 for America accou	nt. Please attach the ap	plicable compl	eted account appli	cation when establishing a new	
	Account num	nber (if applicable)	Name(s) of the new/re	egistered owner/director	r (required) and	d Coverdell/529 bei	neficiary (if applicable)	
Fام	ctronically dep	osit						
	Into the bank letterhead mu number. Broke	account indicated on the at st be attached. Each of the erage checks and investmen	se documents must include:	bank name, name(s) as ne used for bank instruc	registered on tions as these o	the bank account, i checks do not cont	ned letter from the bank on bar routing number and account ain the correct wiring informati d. Please do not staple.	
	Check the bar	nk account you would like	to use: Checking accoun	t 🗆 Savings account				
	assess a fee fo	or electronic transactions; ho		utions may assess a fee	upon receipt. F	Please check with y	ouse (ACH). Putnam does not our financial institution for info	r-
	9 9	Name						
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	n d check p 1: Select a de	alivery method						
	•	via U.S. Postal Service (sta	indard delivery)					
	. ,	,	ivery (not available for syster	matic redemptions)				
			, otherwise Putnam will defa	•	or Ac	count number		
			it involved in the transaction.		ei Aci	count number		
		en from the balance of the a						
Ste	p 2: Provide pa	yee/address instructions						
	To the accou	nt owner as registered to th	e address of record.					
	To the alterna	ate payee/alternate address	s listed below:					
	Alternate pay	ree						

Section 5 Verification of new taxable party

unless you provide an alternate valuation date below.

Alternate date (mm/dd/yyyy; optional)

UTMA registrations, any new contact information provided in this section will be applied to the existing UGMA/UTMA registration as there is no change to the taxable party. When completing this section for a new taxable party, the amount indicated in Section 2 of this form will be transferred to a new account prior the redemption. See Section 6 for signature guarantee/medallion guarantee stamp requirements. Important: The authorized signer for the new taxable party must also complete Section 6. Information provided in this section will only be applied to the new taxable party. Please contact Putnam to update information for the primary account owner named in Section 1. Name of new taxable party (Individual, Trust, or Entity; required) Social Security / Tax ID number (required) Date of birth/trust (mm/dd/yyyy; required) Name of Trustee / Executor (if applicable) Name of Trustee / Executor (if applicable) Mailing address of new taxable owner (street, city, state, ZIP code; required) Residential address of new taxable owner (street, city, state, ZIP code; required if mailing address is a P.O. Box or c/o address) Contact phone number of new taxable party F-Mail address of new taxable party Note: Providing an e-mail address and/or phone number above will replace the current contact information on file with Putnam (if applicable). No changes will be made for fields that are left blank. If you are enrolled in electronic delivery, all notifications will be sent to the e-mail address listed above. Electronic delivery of account documents ☐ I want to "Go Green" and reduce paper, printing and mailing by receiving documents electronically. By checking the "Go Green" box above, an e-mail will be sent to the e-mail address provided above with a link to Putnam's secure Investor Website, which will allow you to choose your eDelivery options. Documents available for eDelivery include transaction confirmations, quarterly statements, prospectuses, annual/semiannual fund reports, proxy statements, and tax forms. When a new document is available, instead of sending the document to you by U.S. mail, Putnam Investor Services will send you an e-mail notification that the document is available via Putnam's website. Terms and Conditions related to eDelivery will be provided to you prior to confirmation of your elections. Select the appropriate coding reason to transfer the shares from the primary account owner named in Section 1 into the name of the new taxable party named above to ensure accurate cost basis reporting. Re-registration: Cost basis will not be adjusted. Re-registration transactions include removal of a deceased joint owner or a spousal transfer. ☐ Inheritance: Select this option if you have inherited shares from the primary account owner named in Section 1. You must provide the date of death below. If no date of death is provided, your cost basis may not be accurately tracked. Date of death (mm/dd/yyyy; required) For trusts and joint accounts, Putnam will default to coding transfers due to death as a re-registration unless directed to adjust the cost basis using an inheritance coding for a specific percentage of the transferred shares below (1%-100%). Please consult your tax advisor to determine if you qualify for this option. • Adjust my cost basis using an inheritance coding for 1 % of the assets transferred from the joint or trust account(s) indicated in Section 2. I have verified with a tax advisor that I am eligible to adjust my cost basis. For all other non-retirement registrations, Putnam will use a transfer coding of inheritance and adjust your cost basis to the fair market value on the date of death

Alternate valuation date: This option is only available for estate assets. Federal estate tax law allows estate assets to be valued on an alternate date rather

than the date of death. Please consult your tax advisor to determine the appropriate date to provide if you qualify for this option.

Complete this section when the redemption will be reported under a different social security or taxpayer identification number than that of the primary account owner (if this section is left blank, then the redemption will be reported under the primary tax identification number on the account being redeemed). For UGMA/

Section 6 Authorization

In accordance with federal law, the Putnam funds are required to obtain the name, residential or business address, social security or tax identification number, and date of birth for each registered owner in order to verify their identities. For certain entities such as trusts, estates, corporations, partnerships, or other organizations, additional documentation may be required (contact Putnam at 1-800-225-1581 for additional information).

Under penalties of perjury, I certify with my signature below that: (1) The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me) and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and (3) I am a U.S. citizen, a U.S. resident alien, or other U.S. person as defined in the instructions issued by the IRS. You must cross out item (2) above if you have been notified by the IRS that you are currently subject to backup withholding because of underreporting interest or dividends on your tax return.

Putnam requires the signature guarantee/medallion guarantee for any of the scenarios listed below. A signature guarantee/medallion guarantee is a stamped assurance by a financial institution that indicates a signature is valid and has the financial backing of the institution.

- 1) redemption is sent electronically to a bank account
- 2) check is not payable solely to the registered account owner(s)
- 3) redemption amount is more than \$100,000
- 4) request is signed by anyone other than the registered account owner(s)
 (must be signed in capacity and accompanied by the appropriate certified legal document(s) with original certification)
- 5) redemption is being mailed to an alternate address and the amount is more than \$25,000
- 6) redemption is being mailed to an address that has changed in the past 15 days and the amount is more than \$25,000
 - redemption is reinvested in an account that is not registered solely in the owner's name or into a 529 for America account with a different owner

With this application, I authorize the bank/credit union to accept credit entries initiated by Putnam Investor Services, Inc. to the account designated in Section 4, and to credit the same account, without responsibility for correctness thereof or for the existence of any further authorization relating thereto. I agree to indemnify and hold harmless my bank/credit union, the Putnam funds, and Putnam Investor Services, Inc. for any loss, liability or expense incurred from acting on these instructions. I also agree to waive any right under the NACHA rules to rescind any instruction for ACH transactions which 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.

I/We request the redemption indicated above. Putnam Investor Services, Inc. is entitled to rely on this form and is released from any and all claims I/we may have or hereafter claim to have with respect to the redemption.

My signature below also indicates that if I am designating an investment in a fund that I do not already own I have read the fund prospectus(es) and agree to the terms therein.

Signature of owner/custodian/trustee/authoriz	ed party	Signature of joint owner/co-trustee/authorized party (if applicable)				
Print name of signature above		Print name of signature above				
Date (mm/dd/yyyy)		Date (mm/dd/yyyy)				
PLACE SIGNATURE/MEDALLION GUARANT THE GUARANTEE SHO NOT BE DATED	• • • •	PLACE SIGNATURE/MEDALLION THE GUARAN NOT BE	TEE SHOULD •			
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For additional signatures, please attach a separate sheet.