# Certification regarding beneficial owners of legal entity customers



#### **GENERAL INSTRUCTIONS**

Use this form to add or update information related to the beneficial owner(s) of an existing legal entity (corporation, partnership, limited liability company, or non-profit foundation)

#### What is this form?

To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity helps law enforcement investigate and prosecute these crimes.

## Who has to complete this form?

This form must be completed by the person opening a new account on behalf of a legal entity with any of the following U.S. financial institutions: (i) a bank or credit union; (ii) a broker or dealer in securities; (iii) a mutual fund; (iv) a futures commission merchant; or (v) an introducing broker in commodities.

For the purposes of this form, a legal entity includes a corporation, limited liability company, or other entity that is created by a filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States or a foreign country. Legal entity does not include sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf.

### What information do I have to provide?

This form requires you to provide the name, address, date of birth and Social Security number (or passport number or other similar information, in the case of foreign persons) for the following individuals:

- (i) Each individual ("Beneficial Owner"), if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 percent or more of the shares of a corporation); and
- (ii) An individual with significant responsibility (a "Control Person") for managing the legal entity customer (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer).

The number of individuals that satisfy this definition of "Beneficial Owner" may vary. Under section (i), depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under section (i), you must provide the identifying information of one individual under section (ii). It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of Acme, Inc. who also holds a 30 percent equity interest). Thus, a completed form will contain the identifying information of at least one individual (under section (ii)), and up to five individuals (i.e., one individual under section (ii) and four 25 percent equity holders under section (i)). The financial institution may also ask to see a copy of a driver's license or other identifying document for each beneficial owner listed on this form.

**Important:** You must provide all information for each Beneficial Owner listed in Section 3 and a Control Person listed in Section 4 in order for the form to be accepted. You must list all Beneficial Owners who currently own, directly or indirectly, 25% or more of the legal entity, and the current Control Person, even if you are only adding or updating information for one or more such persons.

# **Certification of beneficial owners**



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 Please make checks payable to The Putnam Funds



# Section 1 Name and title of natural person completing this form

The person signing this	form must provic	le the following inform	ation.			
Name of natural person First	acting on the acc	ount Last	\$	Suffix	Title of natural person acting or	n the account
Section 2 Nan	ne and add	ress of legal e	ntitv			
Name of legal entity			<b>y</b>		Tax identification numb	per
Address of legal entity (s	street, city, state, Z	IP code)				
Section 3 Ben	eficial Owi	ner informatio	on			
owns 25 percent or mo • For all U.S. per • For all foreign number, foreign evidencing nati issued identific	re of the equity in: rsons: The full na: persons: The full n persons may als ionality or resider ation document r	terests of the legal enti me, Social Security nur name, passport numb so provide an alien ider nce and bearing a phot must be enclosed with	ty listed above. mber, date of birth, an per, country of passpor ntification card numbe ograph or similar safe this form.	d residen t issuanc er, or nun guard. A	tial address are required. e, date of birth, and residential a nber and country of issuance of a copy of the passport, alien identi	erstanding, relationship or otherwise, ddress are required. In lieu of a passport ny other government-issued document fication card, or other government-
Important: If no individ		-				
• •					terests of the legal entity)	
First	MI	Last	Suffi	x Soc	ial Security / Passport number	Date of birth (mm/dd/yyyy)
Residential or business st	reet address (stree	t, city, state, ZIP code)				Passport country of issuance
First	MI	Last	Suffi	x Soc	ial Security / Passport number	Date of birth (mm/dd/yyyy)
Residential or business st	reet address (stree	t, city, state, ZIP code)				Passport country of issuance
First	MI	Last	Suffi	x Soc	ial Security / Passport number	Date of birth (mm/dd/yyyy)
Residential or business st	reet address (stree	 t. citv. state. ZIP code)				Passport country of issuance
First	MI	Last	Suffi	x Soc	ial Security / Passport number	Date of birth (mm/dd/yyyy)
Residential or business st	reet address (stree	t, city, state, ZIP code)				Passport country of issuance

#### Section 4 Control Person

Provide the following information for one individual with significant responsibility for managing the legal entity listed above, such as:

- An executive officer or senior manager (e.g., Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer); or
- Any other individual who regularly performs similar functions.(If appropriate, an individual listed in Section 3 above may also be listed in this section).

First	MI Last	Suffix	Social Security / Passport number	Date of birth (mm/dd/yyyy)	
Residential or busin	ess street address (street, city, state		Passport country of issuance		
Section 5 <b>C</b>	Certification				
I hereby certify, to	the best of my knowledge, that t	ne information provided above is c	complete and correct.		
Signature of nature	al person acting on the account		Date	Date (mm/dd/yyyy)	
Print name of signo	ature above				
Legal Entity Identif	fier	(Optional)			

**Important:** You must provide either an original or certified copy of one of the following documents appropriate to the legal entity in Section 2 to verify your capacity to act on behalf of the entity (see certification requirements below):

- Certificate of Incumbency
- Corporate Resolution
- Resolution of governing body
- Othe

Certification may be obtained via a Medallion guarantee stamp or by an attorney or the attorney's letterhead, by the clerk of the court if filed in court, or the appropriate state agency if filed with that agency, **dated within 120 days of receipt.**