

Putnam 529 for AmericaSM employer information form



Return by mail:
Putnam Investments
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430 W 7th Street Suite 219697
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For more information:
Putnam Investments
1-877-PUTNAM529
1-877-788-6265
www.putnam.com



Use this form to establish a new corporate Putnam 529 for America plan. Upon establishment, Putnam will assign your company a group number, under which all participants will be linked.

Section 1 Employer information

Name of company

Taxpayer Identification number

Number of employees

Mailing address

City

State

ZIP code

Name of contact

First

MI

Last

Suffix

Contact phone number

Section 2 Employee contribution method

Indicate the contribution method(s) you wish to utilize:

Putnam Systematic Investment Program – Participant contributions are automatically drafted from employee bank accounts in amounts and on dates/frequencies employees elect.

Payroll Deduction – Employer facilitates transfer of participant salary deferral contributions to Putnam.

Section 3 Payroll deduction transmittal method

There are several methods by which payroll deduction contributions may be transferred to Putnam. Each option varies in terms of automation. Please note: If no method is selected, Check & Roster will be the default. Please contact a Putnam corporate 529 Implementation Specialist at 800-634-1591 to discuss which method is right for your plan.

ACH Direct Deposit – Employer establishes a direct deposit record upon employee enrollment, whereby 529 contributions are automatically sent to Putnam at each payroll cycle.

Check & Roster – At each payroll cycle, the employer transfers employee contributions via check and confirms investment allocations with the use of a Putnam-generated participant roster. This option is available to plans with fewer than 100 participating employees and does not qualify the plan for an automatic annual fee waiver.

Web ACH Transfers – At each payroll cycle, the employer logs onto Putnam's 529 Plan Sponsor Web site to confirm employee contributions, make updates if necessary, and authorize Putnam to initiate an ACH draft from a corporate bank account provided upon plan setup. Once you receive your welcome letter with your group number, please contact Putnam at 1-800-634-1591 to obtain your PIN.

For web ACH transfers, you must provide the ABA and account number of the checking account to be debited for contribution funding.

Bank ABA routing number

Bank account number

Name of company bank account owner

You must attach a preprinted voided check from the above account; no starter checks.

Section 4 Employer authorization

I authorize Putnam Investments to accept information included in this form to establish a group plan and store information relevant to key company contacts, applicable employee contribution methods and the plan's financial representative.

I understand that, facilitating payroll deduction contributions to the Putnam 529 for America program as described herein should not constitute an employee benefit plan subject to the Employee Retirement Income Security Act of 1974, as amended (ERISA). Neither Putnam nor the State of Nevada, the Nevada College Savings Trust Fund and the Board of Trustees of the College Savings Plans of Nevada intends for such an arrangement to constitute an ERISA plan and does not accept any responsibility or liability as a fiduciary under ERISA with respect to such arrangement. Please consult your legal or benefits counsel to ensure that your payroll deduction arrangement complies with these objectives.

If I have selected web ACH transfers, by signing below, the company authorizes the above bank/credit union to accept debit entries initiated by Putnam Investor Services, Inc. to the account and to debit, as requested, the same to the above account, without responsibility for correctness thereof or for the existence of any further authorization relating thereto. The company hereby acknowledges that the initiation of an ACH transaction through Putnam is to purchase securities, and accordingly any transaction requested by the company through the ACH system is irrevocable. The company authorizes Putnam Investor Services, Inc. to potentially make follow-up attempts to retrieve those monies which are denied due to insufficient funds. The company agrees to indemnify and hold harmless the above 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. This authorization may be terminated by the company at any time by written notification to Putnam Investor Services, Inc., with reasonable time given to implement the company's request. Amendment: Putnam may amend this Agreement at any time. Putnam will notify the company of any changes before such changes go into effect by alerting the company in their statement or confirmation.

Signature of authorized representative of the company

Current date (mm/dd/yyyy)

Print name of signer

Section 5 Financial intermediary information

The financial intermediary for the employer listed in Section 1 above may grant net asset value privileges to all participants in the plan (see the Offering statement for details). To grant net asset value privileges for this plan, someone authorized by the broker-dealer or financial institution must (1) check the box, (2) provide the necessary information to identify a valid firm and financial representative, and (3) sign below.

Establish this plan at net asset value.

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

By signing below, I certify that I am authorized on behalf of the broker-dealer or financial institution to offer net asset value to all Putnam 529 for America College Savings Plan accounts established through the employer listed in Section 1 above.

Signature of authorized representative of the firm

Current date (mm/dd/yyyy)

Print name of signer