

## **Entity Beneficial Owners**

Investors opening an account for a legal entity — such as a corporation, organization, partnership, limited liability company or nonprofit — should complete and sign this form to provide or update beneficial owner information. Federal regulations require American Funds to obtain and verify this information. For the purposes of this form, the beneficial owners are 1) each individual, if any, who owns, directly or indirectly, 25% or more of the equity interests of the entity, and 2) a single individual with significant responsibility for controlling, managing or directing the legal entity.

Information provided on this document will be used to verify the beneficial owners' identities. For example, identities may be verified through the use of a database maintained by a third party. If American Funds is unable to verify the individuals' identities, American Funds may need to take action, possibly including closing the account and redeeming the shares at the current market price, and such action may have tax consequences, including a tax penalty.

If you are updating information on an existing account, you must provide all the information requested in Sections 2 and 3, even if you are only updating the information for one individual.

1 Entity information		
Full legal name of entity	Account number (if applicable)	
Physical address of entity ( <b>no P.O. boxes</b> )  City	State ZII	P
Owner information  If any owner is not a U.S. citizen or has not been issued an SSN, contact us at (800) 427.  Provide information for each individual, if any, who, directly or indirectly, through any of		shin or
otherwise, owns 25% or more of the equity interests of the entity.  Check this box if no individual owns 25% or more of the equity interests of the entity.		-
1. SSN Date of birth (mm/dd/yyyy)	( ) Ext.	
Name of owner Co	ountry of citizenship %	ownershi
Residence or business address (physical address required — no P.O. boxes)	State ZI	P
2. SSN Date of birth (mm/dd/yyyy)	( ) Ext.  Daytime phone	
Name of owner Co	ountry of citizenship %	ownersh
Residence or business address (physical address required — no P.O. boxes)  City	State ZI	P
3. SSN Date of birth (mm/dd/yyyy)	( ) Ext.	
Name of owner Co	ountry of citizenship %	ownershi
Residence or business address (physical address required — no P.O. boxes)  City	State ZI	P

Owner information (continued)				
SSN Date of birth (mm/dd/yyyy)	( Dayt	) time phone	E	ext.
Name of owner Country of citize	enship			% ownership
Residence or business address (physical address required — no P.O. boxes)  City			State	ZIP
Control person/authorized person  This section must be completed, even if the control person/authorized person was previously identification person is not a U.S. citizen or if an SSN has not been issued, contact us at (800) 421-4225, ext. 71 to rovide information for one individual with significant responsibility for managing the entity, such fficer, managing member, general partner, president, vice president or treasurer.	for addition	nal informatio	on.	
Date of birth	( Dayt	) time phone	E	ext.
ame of control person/authorized person  Title of control person/authorized person		Country of ci	itizenship	
esidence or business address (physical address required — no P.O. boxes)  City			State	ZIP
Signature of control person/authorized person  hereby certify, to the best of my knowledge, that the information provided on this form is complete.	ete and co	orrect.		
ame of control person/authorized person (print)	Title			
ignature of control person/authorized person			/ (mm/dd/y	/ vvv)
his document may not be signed using Adobe Acrobat Reader's "fill and sign" feature.		_ 20	,,	

If mailing, choose the service center for your state. Mail the form to the Indiana Service Center if you live outside the U.S.



American Funds Service Company P.O. Box 6007 Indianapolis, IN 46206-6007

**Overnight mail address** 12711 N. Meridian St. Carmel, IN 46032-9181



American Funds Service Company P.O. Box 2280 Norfolk, VA 23501-2280

**Overnight mail address** 5300 Robin Hood Rd. Norfolk, VA 23513-2430

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