

Change of Registration - Joint Account Checklist

PO Box 219109 • Kansas City, MO 64121-9109 • 800-240-4313

Janus Henderson
— INVESTORS —

Use these forms to add or remove an owner(s) on a joint account or transfer a joint account to a new owner(s).

Questions?

call us at 800-240-4313

Re-registration Requirements

☐ **Janus Henderson Transfer of Ownership Form**

Complete this form to instruct Janus Henderson on how you would like to transfer assets from your account. This form must include a signature guarantee.

☐ **Signature Guarantee**

A signature guarantee assures a signature is genuine and protects you from unauthorized requests on your account. Financial institutions that may guarantee signatures include banks, savings and loans, trust companies, credit unions, broker/dealers and member firms of a national securities exchange. Contact the financial institution where you intend to obtain a signature guarantee for further information. **A notary public cannot provide a signature guarantee.**

☐ **Non-Retirement Account—Update of Ownership Form**

This form should be completed and signed by each person who will be an owner on the account.

After reviewing the above information, if you have additional questions or need help completing the Janus Henderson forms, please contact a Janus Henderson representative at 800-240-4313.

Transfer of Ownership Form

PO Box 219109 • Kansas City, MO 64121-9109 • 800-240-4313

Please complete this form and a Janus Henderson Account Application (if necessary) to change the ownership of an existing account or to transfer ownership of shares to another account. **DO NOT USE THIS FORM FOR RETIREMENT ACCOUNTS.**

Questions?

call us at 800-240-4313

- Please contact Janus Henderson if you are transferring shares from a corporation, trust, partnership, as a result of the death of an account owner or if the assets are held in a retirement account. Additional documentation may be required.
- If you are transferring shares represented by a physical certificate, please call for additional instructions.
- Shares will be transferred to the identical fund(s) and will be depleted using the existing cost basis method on the account.
- It is recommended that you seek professional tax advice when transferring ownership of shares.
- Please print or type using black ink.

Step 1 - List the name(s) on your current account

Please indicate information for the account from which you are transferring shares. Complete this section with your information as it currently appears on your account statement.

Primary Owner/Trustee

First Name	Middle Initial	Last Name
Social Security Number	Date of Birth	Phone Number

Joint Owner/Trustee/Custodian (if applicable)

First Name	Middle Initial	Last Name
Social Security Number	Date of Birth	Phone Number

Trust/Other Entity Account information (if applicable)

Trust/Other Entity Name	Tax Identification Number
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Remember to sign on the last page

Step 2 - List the assets that will be transferred

☐ All assets should be transferred from account: _____

☐ Partial transfer from the funds/accounts as indicated below (indicate %, shares or \$ amount):

Fund Name or Number	Account Number	%, # of Shares or \$ Amount
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Fund Name or Number	Account Number	%, # of Shares or \$ Amount
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Fund Name or Number	Account Number	%, # of Shares or \$ Amount
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Step 3 - Let us know how these shares will be transferred (complete option A, B or C)

Option A

- ☐ **Re-registration of shares** - Used when at least one owner will remain on the new account. My existing shares will be transferred as directed in Step 4. The cost basis for covered shares (purchased after 01/01/12) will transfer to the new account.
- ☐ Adding or removing a joint owner
 - ☐ Individual/Joint account to a trust
 - ☐ Adding or removing a trustee
 - ☐ Trust account to an individual or joint account
 - ☐ Inherited account - Call 800-240-4313 for instructions
 - ☐ Divorce
 - ☐ Other: _____

Option B

- ☐ **Gift of shares** - Used when all or part of an account is transferred to new owners as a gift. My existing shares will be transferred to the account referenced below. The cost basis for covered shares (purchased after 01/01/12) will transfer to the new account unless the transfer results in a loss.* Any realized gains/losses related to this sale will be reportable to the new owner.

*Signature of New Owner (acceptance of Fair Market Value)

*Fair Market Value (FMV) acceptance: If shares are gifted at a loss and the receiving account will use Average Cost as the cost basis method, the new account owner must sign in this section. Otherwise, Janus Henderson will use First-In First-Out (FIFO) to calculate cost basis.

Janus Henderson will use the date of transfer to determine FMV unless otherwise instructed in writing.

Remember to sign on the last page

Step 3 - (continued)

Option C

- ☐ **Sale of shares** - My existing shares will be sold. The proceeds from the sale will be deposited into the account referenced below and new shares will be purchased. Any realized gains/losses related to this sale will be reportable to me.

Notes:

- If no box is checked and Janus Henderson cannot determine the reason for transfer, the transaction will be reported as a gift of shares.
- Please consult a tax advisor to determine the appropriate handling for your specific situation. While our processes generally apply the IRS rules regarding the basis of gifted, re-registered or inherited securities, they do not account for all possible situations that may affect your cost basis. Therefore, it is important to work closely with a tax advisor when transferring and/or selling assets obtained by gift or inheritance in order to have the most accurate basis information and to communicate that information to Janus Henderson so our reporting is accurate.

Step 4 - List where these assets will be transferred to (complete option A or B)

Please indicate the existing account number you wish to transfer to, or include the appropriate Janus Henderson Account Application. *Additional space is available on the last page if needed.*

To account information:

Option A

- ☐ New Account (application attached)

New Account Owner's Name	Middle Initial	Last Name
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Joint Account Owner's Name (if applicable)	Middle Initial	Last Name
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Option B

- ☐ Existing Account Number: _____

New Account Owner's First Name	Middle Initial	Last Name
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Joint Account Owner's Name (if applicable)	Middle Initial	Last Name
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Remember to sign on the last page

Step 5 - Please review and sign below to authorize this request

All owners must sign. (Signature guarantee is required in most cases.)



X

Signature of Owner, Trustee or Custodian

Date

Printed Name of Owner, Trustee or Custodian

SIGNATURE GUARANTEE STAMP
(Including Medallion Guarantees)



X

Signature of Joint Owner or Co-Trustee (if applicable)

Date

Printed Name of Joint Owner or Co-Trustee (if applicable)

SIGNATURE GUARANTEE STAMP
(Including Medallion Guarantees)

PLACE GUARANTEE STAMP AND AUTHORIZED SIGNATURE INSIDE OF THE SPACE PROVIDED ABOVE. DO NOT OVERLAP ANY PART OF THE STAMP AND/OR SIGNATURE WITH OTHER TEXT IN THE APPLICATION.

A signature guarantee assures a signature is genuine and protects you from unauthorized requests on your account. Financial institutions that may guarantee signatures include banks, savings and loans, trust companies, credit unions, broker/dealers and member firms of a national securities exchange. Contact the financial institution you intend to obtain a signature guarantee from for further information. **A notary public cannot provide a signature guarantee.**

Non-Retirement Account - Update of Ownership Form

Janus Henderson
INVESTORS

PO Box 219109 • Kansas City, MO 64121-9109 • 800-240-4313

Use this form to establish a new Non-Retirement account at Janus Henderson when receiving ownership of an existing Janus Henderson account.

Questions?

Call us at **800-240-4313**

- **Please do not use this form to establish any type of Janus Henderson IRA, or to receive ownership due to the death of the original owner.**
- You must be a US Citizen or a US Resident Alien residing in the United States or a US Territory to open a Janus Henderson account.
- Please read important disclosures in Step 10.
- If no signature guarantee is needed in Step 11 you may fax the form to **877-319-3852**.
- Assets will be transferred to the same fund(s) as the original account. If you would like to exchange to a different fund(s) at a later date, please contact a Janus Henderson representative or visit janushenderson.com.
- **Important Note:** To help the government deter money laundering and terrorism funding activities, all financial institutions are required to obtain, verify and record information that identifies each person who opens an account.
- Print in capital letters using black ink.

Step 1 - Original Account Information

Account Number(s)

Primary Owner/Former Minor:

First Name

Middle Initial

Last Name

Social Security Number

Date of Birth

Custodian, Joint Owner or Trust Information (if applicable):

Trust Name (if applicable)

First Name

Middle Initial

Last Name

Social Security Number

Date of Birth

Remember to sign on the last page

Step 2 - Provide the information for the new account

Primary Owner (All information is required).

_____	_____	_____
First Name	Middle Initial	Last Name
_____	_____	
Social Security Number	Date of Birth	

☐ Please send me information about adding an authorized person to act on my account.

Mailing Address (If you provide a PO Box, you must also fill out **Physical Address** below.)

Address		
_____	_____	_____
City	State	Zip Code
_____	_____	
Phone Number	E-mail Address (optional)	

Physical Address (Required if different from above. No PO Box addresses.)

Address		
_____	_____	_____
City	State	Zip Code

Step 3 - Would you like to add a joint owner to this account?

- ☐ Yes (Proceed to Step 4 and a **signature guarantee** will also be required in Step 11)
- ☐ No (Proceed to Step 5)

Remember to sign on the last page

Step 4 - Joint Owner's Information (If applicable; and all information is required)

_____	_____	_____
First Name	Middle Initial	Last Name
_____	_____	
Social Security Number	Date of Birth	

☐ Check here if Joint Owner's mailing address is the same as the primary owner.

Joint Owner's Mailing Address if different from Primary Owner (If you provide a PO Box, you must also fill out **Physical Address** below.)

Address		
_____	_____	_____
City	State	Zip Code
_____	_____	
Phone Number	E-mail Address (optional)	

Physical Address (Required if different from above. No PO Box addresses.)

Address		
_____	_____	_____
City	State	Zip Code

Remember to sign on the last page

Step 5 - Provide your bank information

Please provide your bank information if you are enrolling in **Janus Henderson's Automatic Investment Program** and/or would like to make future **electronic purchases and redemptions**.

This is a:

☐ Checking Account

☐ Savings Account

9-Digit Bank Routing/ABA Number

Checking or Savings Account Number

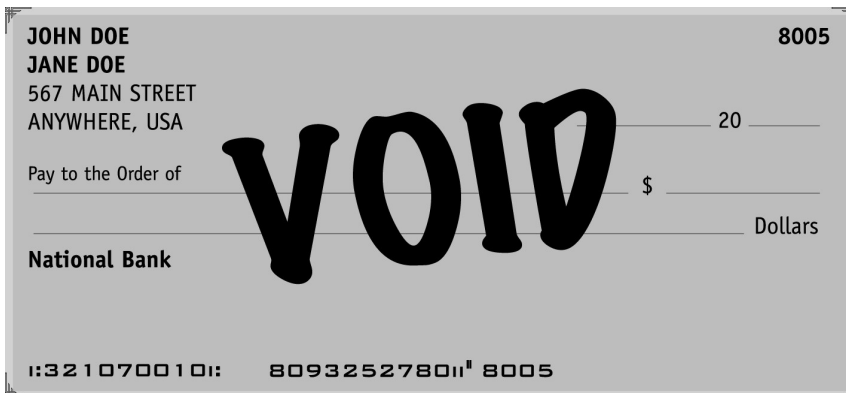
Bank Name

Owner's Name Exactly as on Bank Account

Joint Owner's Name Exactly as on Bank Account

If the owner(s) of the bank account is anyone other than the owner(s) of the Janus Henderson account, please complete a Bank Options Form or call a Janus Henderson Representative for more information at 800-240-4313

Please attach a *preprinted* voided check.



Don't have a preprinted voided check? Please contact a Janus Henderson representative at: **800-240-4313**.

Remember to sign on the last page

Step 6 - Would you like to invest on a regular basis through Janus Henderson’s Automatic Investment Program?

Enroll in our Automatic Investment Program (AIP) and we will automatically transfer a set amount (minimum \$50) from your bank account directly into the Janus Henderson fund(s) of your choice. If you would like to enroll, please provide your bank information in Step 5. Your AIP may generally be modified or cancelled at any time by visiting janushenderson.com or by calling a Janus Henderson Representative.

<div><div></div><div>Fund Name</div></div>	<div><div></div><div>Investment Amount* (\$50 min.)</div></div>	Frequency*
		<input type="checkbox"/> Monthly
		<input type="checkbox"/> Every Other Month
<div><div></div><div>Starting Month</div></div>	<div><div></div><div>Investment Date*</div></div>	<input type="checkbox"/> Quarterly

<div><div></div><div>Fund Name</div></div>	<div><div></div><div>Investment Amount* (\$50 min.)</div></div>	Frequency*
		<input type="checkbox"/> Monthly
		<input type="checkbox"/> Every Other Month
<div><div></div><div>Starting Month</div></div>	<div><div></div><div>Investment Date*</div></div>	<input type="checkbox"/> Quarterly

<div><div></div><div>Fund Name</div></div>	<div><div></div><div>Investment Amount* (\$50 min.)</div></div>	Frequency*
		<input type="checkbox"/> Monthly
		<input type="checkbox"/> Every Other Month
<div><div></div><div>Starting Month</div></div>	<div><div></div><div>Investment Date*</div></div>	<input type="checkbox"/> Quarterly

<div><div></div><div>Fund Name</div></div>	<div><div></div><div>Investment Amount* (\$50 min.)</div></div>	Frequency*
		<input type="checkbox"/> Monthly
		<input type="checkbox"/> Every Other Month
<div><div></div><div>Starting Month</div></div>	<div><div></div><div>Investment Date*</div></div>	<input type="checkbox"/> Quarterly

*If investment amount, frequency or investment date are not specified, investments of \$50 will be made on the 20th of each month.

☐ Please send me information about Janus Henderson’s Payroll Deduction Program.

Remember to sign on the last page

Step 7 - Would you like to add a Transfer on Death (TOD) beneficiary(ies) to your account?

Please see *Guidelines for Transfer on Death (TOD) Registration* in Step 10.

If applicable, any beneficiary who passes away before the account owner will have their share divided proportionally among the surviving beneficiaries. If you have more than four primary beneficiaries please attach a separate sheet.

The sum of all primary beneficiary designations must equal 100%.

Primary Beneficiary #1	Name	% of Account
<input type="checkbox"/> Spouse		
<input type="checkbox"/> Non-Spouse	Date of Birth or U/A Date of Trust	Social Security or Taxpayer ID Number
<input type="checkbox"/> Trust		
<input type="checkbox"/> Other Entity		
<input type="checkbox"/> Minor*	*Custodian's full name if beneficiary is a minor . Appoint one person as a custodian. You cannot name yourself as custodian.	

Primary Beneficiary #2	Name	% of Account
<input type="checkbox"/> Non-Spouse		
<input type="checkbox"/> Trust	Date of Birth or U/A Date of Trust	Social Security or Taxpayer ID Number
<input type="checkbox"/> Other Entity		
<input type="checkbox"/> Minor*	*Custodian's full name if beneficiary is a minor . Appoint one person as a custodian. You cannot name yourself as custodian.	

Primary Beneficiary #3	Name	% of Account
<input type="checkbox"/> Non-Spouse		
<input type="checkbox"/> Trust	Date of Birth or U/A Date of Trust	Social Security or Taxpayer ID Number
<input type="checkbox"/> Other Entity		
<input type="checkbox"/> Minor*	*Custodian's full name if beneficiary is a minor . Appoint one person as a custodian. You cannot name yourself as custodian.	

Primary Beneficiary #4	Name	% of Account
<input type="checkbox"/> Non-Spouse		
<input type="checkbox"/> Trust	Date of Birth or U/A Date of Trust	Social Security or Taxpayer ID Number
<input type="checkbox"/> Other Entity		
<input type="checkbox"/> Minor*	*Custodian's full name if beneficiary is a minor . Appoint one person as a custodian. You cannot name yourself as custodian.	

Total (must equal 100%): _____

Remember to sign on the last page

Step 8 - Would you like to add a Secondary (Contingent) Transfer on Death (TOD) beneficiary(ies) to your account?

Secondary (Contingent) beneficiaries receive assets **ONLY** if no primary beneficiary survives you. Do **NOT** list any primary beneficiaries here. If you have more than four secondary beneficiaries please attach a separate sheet. **The sum of all secondary beneficiary designations must equal 100%.**

Secondary Beneficiary #1	Name	% of Account
<input type="checkbox"/> Spouse		
<input type="checkbox"/> Non-Spouse	Date of Birth or U/A Date of Trust	Social Security or Taxpayer ID Number
<input type="checkbox"/> Trust		
<input type="checkbox"/> Other Entity		
<input type="checkbox"/> Minor*	*Custodian's full name if beneficiary is a minor . Appoint one person as a custodian. You cannot name yourself as custodian.	

Secondary Beneficiary #2	Name	% of Account
<input type="checkbox"/> Non-Spouse		
<input type="checkbox"/> Trust	Date of Birth or U/A Date of Trust	Social Security or Taxpayer ID Number
<input type="checkbox"/> Other Entity		
<input type="checkbox"/> Minor*	*Custodian's full name if beneficiary is a minor . Appoint one person as a custodian. You cannot name yourself as custodian.	

Secondary Beneficiary #3	Name	% of Account
<input type="checkbox"/> Non-Spouse		
<input type="checkbox"/> Trust	Date of Birth or U/A Date of Trust	Social Security or Taxpayer ID Number
<input type="checkbox"/> Other Entity		
<input type="checkbox"/> Minor*	*Custodian's full name if beneficiary is a minor . Appoint one person as a custodian. You cannot name yourself as custodian.	

Secondary Beneficiary #4	Name	% of Account
<input type="checkbox"/> Non-Spouse		
<input type="checkbox"/> Trust	Date of Birth or U/A Date of Trust	Social Security or Taxpayer ID Number
<input type="checkbox"/> Other Entity		
<input type="checkbox"/> Minor*	*Custodian's full name if beneficiary is a minor . Appoint one person as a custodian. You cannot name yourself as custodian.	

Total (must equal 100%): _____

Remember to sign on the last page

Step 9 - Add a Trusted Contact to Your Account

- A Trusted Contact is a designated individual that Janus Henderson may contact for additional information if there is a concern about your account activity and we are unable to reach you.
- Your Trusted Contact must be at least 18 years old.
- One Trusted Contact will be added to all accounts under the primary owner’s Social Security Number.
- On accounts with multiple owners, the Trusted Contact information applies only to the first owner listed.
- Your Trusted Contact is not authorized to transact on your Janus Henderson account(s).
- This can be changed at any time. To remove a Trusted Contact, please contact Janus Henderson by telephone or submit written instructions. To replace an existing Trusted Contact, please submit a new Trusted Contact Form.

Trusted Contact Information

_____	_____	_____
First Name	Middle Initial	Last Name

Date of Birth		

_____	_____	
Preferred Phone Number	E-mail Address	

Mailing Address

Address		

_____	_____	_____
City	State	Zip Code

By providing a Trusted Contact, I authorize Janus Henderson to contact the Trusted Contact Person and disclose information in the following circumstances:

- To prevent the presumption of abandonment.
- To address possible financial exploitation.
- To confirm my current contact information.
- To confirm my health status.
- To obtain the identity of any legal guardian(s), executor(s), trustee(s), or holder(s) of a power of attorney.
- To obtain information as otherwise permitted by federal or state law.

Remember to sign on the last page

Step 10 - Please read and sign

By signing, I:

- Certify that I have received and read the current prospectus of the Fund(s) in which I am investing. I certify that I have the authority and legal capacity to make this purchase and that I am of legal age in my state of residence.
- Agree to read the prospectus for any Janus Henderson fund(s) into which I may request an exchange in the future. I understand that the terms, representations and conditions in this application and the prospectus, as amended from time to time, will apply to this account and any account established at a later date.
- Agree that if we opened a joint account that we will be joint tenants with rights of survivorship (unless otherwise indicated, or if we are residents of Louisiana).
- Understand that Florida law voids, with certain limited exceptions, an ex-spouse's designation as beneficiary if designated prior to the time the decedent's marriage was judicially dissolved or declared invalid by court order. As a result of this law, I may be required to provide additional documentation before Janus Henderson is able to process my request.
- Authorize the Fund and its agents to act upon instructions (by phone, in writing, online or by other means) believed to be genuine and in accordance with procedures described in the prospectus for this account or any account into which exchanges are made. I agree that neither the Funds nor the transfer agent will be liable for any loss, cost or expense for acting on such instructions, provided the Fund employs reasonable procedures to confirm that instructions communicated are genuine. I understand it is my responsibility to review account statements and inform Janus Henderson of errors posted to my account. I understand Janus Henderson reserves the right not to correct errors not brought to the company's attention within a reasonable time period. I understand that anyone who can properly identify my account(s) may be able to make telephone transactions on my behalf.
- Authorize the Fund and its agents to issue credits to and make debits from the bank account information set forth on this application. I agree that Janus Henderson shall be fully protected in honoring any such transaction. I also agree that Janus Henderson may make additional attempts to debit/credit my account if the initial attempt fails and that I will be liable for any associated costs. I agree that if I submit bank information for a bank that does not participate in the Automated Clearing House (ACH) or provide information for a nonbank account, Janus Henderson will price my purchase at the net asset value next determined after Janus Henderson receives good funds. All account options selected and this authorization will remain in effect and become part of the account application and terms, representations and conditions thereof until I notify Janus Henderson in writing or by phone that I wish to revoke this authorization. I understand that my termination request will be processed within a reasonable time frame upon receipt.
- Authorize the Fund and its agents to establish telephone and online redemption and purchase privileges on my account. I also authorize the Fund and its agents to reinvest all income dividends and capital gains distributions in the distributing fund. I authorize the Fund and its agents to establish redemption privileges by electronic transfer to the bank account set forth on this application.
- Consent to the 'household' delivery of any fund prospectuses, shareholder reports or other documents (except transaction confirmations and account statements) that I am required, by law, to receive. This means Janus Henderson will generally deliver a single copy of the most recent annual and semi-annual reports, prospectuses, and newsletters to investors who share an address, even if the accounts are registered under different names. My participation in this program will continue indefinitely unless I contact Janus Henderson.

Remember to sign on the last page

Step 10 - Continued

- Acknowledge pursuant to the Emergency Economic Stabilization Act of 2008, Janus Henderson is required to track and report cost basis information on the sale (redemption or exchange) of Covered Shares (shares purchased on or after 1/1/2012) to the Internal Revenue Service (IRS). Reporting is not required for Uncovered Shares (shares purchased before 1/1/2012). Janus Henderson utilizes Average Cost as the default method for tracking and reporting cost basis. If you wish to elect a different method for your account, please cross out this statement and include signed written instructions indicating your desired cost basis method. Alternate elections will apply only to Covered Share purchases.
- Understand that while Janus Henderson's processes generally apply the IRS rules regarding the basis of gifted or inherited securities, they do not account for all possible situations that may affect my cost basis. Therefore, it is important to work closely with a tax advisor when transferring and/or selling assets obtained by gift or inheritance in order to have the most accurate basis information and to communicate that information to Janus Henderson so our reporting is accurate.

Important Note: To help the government deter terrorism funding and money laundering activities, all financial institutions are required to obtain, verify and record information that identifies each person who opens an account. So that we may comply with these requirements, we ask you to please complete Step 2 and if applicable Step 4 in its entirety when opening an account with Janus Henderson. The omission of this information will result in the return of your application and investment. Please note that your ability to perform transactions in your account may also be affected or otherwise delayed if Janus Henderson cannot easily verify the accuracy of the required information in Step 2 and if applicable Step 4. If, after 30 days, Janus Henderson is still unable to verify the required information, your account may be closed and your shares redeemed at the next available NAV.

Guidelines for Transfer on Death (TOD) Registration:

- Transfer on Death ("TOD") is a form of ownership that enables the owner of an account to transfer ownership directly to a designated beneficiary upon the death of the owner(s). The ownership of the account generally passes to the beneficiary(ies) outside of probate. The beneficiary has no rights with respect to the account until the owner (or, in the case of joint owners, the last surviving owner) dies, and no instructions can be accepted from, or information provided to, such beneficiary. Since TOD directions affect the disposition of your property at your death, you should consult with an attorney or estate planning professional to ensure that your directions are consistent with your estate and tax planning objectives.
- TOD registration is only available for accounts registered in the name of an individual, or in the name of two or more individuals holding the account as joint owners with rights of survivorship ("JTWROS") or tenants by the entirety ("TEN ENT").
- The beneficiary may be one or more individuals, a trust, a corporation, a partnership or other legal entity. Designations such as Lineal Descendants or Lineal Descendants Per Stirpes ("LDPS") are not permitted. Complex beneficiary requests should be accomplished through a Will or Trust.
- If the account owner designated his or her spouse as the TOD beneficiary, and subsequently the account owner and beneficiary divorce, the divorce does not automatically revoke the beneficiary designation. The account owner must change the beneficiary designation in clear written instructions to be effective.
- The account owner(s) may change or revoke a TOD registration by sending clear written instructions to Janus Henderson, signed by the account owner(s).
- If the beneficiary(ies) fails to survive the account owner(s), the account will be treated as belonging to the estate of the last surviving owner. If a beneficiary survives the account owner(s), but dies prior to receiving his or her portion of the account, the assets will belong to the estate of the beneficiary. If multiple beneficiaries are named and one or more predeceases the owner, their share of the account will be divided proportionally among the surviving beneficiaries.

Remember to sign on the last page

Step 10 - Continued

- Janus Henderson Services US LLC does not have a duty to locate beneficiaries, to determine the marital status of the account owner(s), or to determine any other fact which may affect a transfer pursuant to a TOD registration of any account.
- These guidelines are subject to change at any time without prior notice.

The undersigned has read and understands the Transfer on Death Guidelines. Each of the undersigned, on behalf of myself/ourselves and my/our successors, heirs and beneficiaries, agree to indemnify and hold harmless Janus Henderson Services US LLC, Janus Henderson Distributors, Janus Investment Fund and each series thereunder, Janus Henderson Investors US LLC, Janus Henderson Group plc, their affiliates and subsidiaries, and all of their officers, trustees/directors, employees, agents and representatives against any loss, claim or expense (including reasonable attorney's fees) to the extent that any transfer on death effected pursuant to these instructions is alleged or found for any reason to have been invalid or ineffective for any reason, conflicts with any other designation of beneficiary, or creates any unfavorable or adverse tax or legal consequences to the undersigned or his or her heirs or beneficiaries.


Under penalty of perjury, I certify that:

1. The Social Security Number(s) shown on this application is correct.
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. Cross out item 2 if you have been notified by the IRS that you are currently subject to backup withholding.
3. I am a US Citizen or a US Resident Alien residing in the United States or a US Territory.
4. I am exempt from reporting per the Foreign Account Tax Compliance Act (FATCA).

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Remember to sign on the last page

Step 10 - Continued




X

Signature of Owner

Date

Printed Name of Owner



X

Signature of Joint Owner (if applicable)

Date

Printed Name of Joint Owner

Step 11 - Do you need a signature guarantee?

A signature guarantee is required from the new account owner(s) if:

- The account will be registered to anyone other than the primary owner.
- All owner(s) of the bank account are different than the Janus Henderson account owner(s).

Primary Owner
SIGNATURE GUARANTEE STAMP
(Including Medallion Guarantees)

Joint Owner
SIGNATURE GUARANTEE STAMP
(Including Medallion Guarantees)

PLACE GUARANTEE STAMP AND AUTHORIZED SIGNATURE INSIDE OF THE SPACE PROVIDED ABOVE. DO NOT OVERLAP ANY PART OF THE STAMP AND/OR SIGNATURE WITH OTHER TEXT IN THE APPLICATION.

This form must be signed in the presence of the individual guaranteeing your signature. A signature guarantee assures a signature is genuine and protects you from unauthorized requests on your account. Financial institutions that may guarantee signatures include banks, savings and loans, trust companies, credit unions, broker/dealers and member firms of a national securities exchange. Contact the financial institution you intend to obtain a signature guarantee from for further information. **A notary public cannot provide a signature guarantee.**