

# Permanent Resolution



**✓ Use this form to:**

- Certify the authority of an individual(s) to act on an account with corporate or other entity ownership.
- Authorize and empower corporate officers to open and maintain cash, margin, and option Brokerage accounts.

SSN = Social Security Number TIN = Tax ID Number

This hand indicates where to sign.

**Mail to:**

T. Rowe Price  
P.O. Box 17302  
Baltimore, MD 21297-1302

**Express delivery only:**

T. Rowe Price Mail Code 17302  
4515 Painters Mill Road  
Owings Mills, MD 21117-4903

This paper clip indicates you may need to attach documentation.

## 1 Account Information

**Check Type(s) of Account:**  Mutual Fund  Brokerage

|                      |     |
|----------------------|-----|
| Name of Organization |     |
| Account Number       | TIN |
| Type of Organization |     |

Provide the names of the individuals authorized to act on behalf of the organization. The individuals will not be able to act on the account until we receive this information.

|                      |                             |  |                   |
|----------------------|-----------------------------|--|-------------------|
| Name                 |                             | Citizenship:* <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> U.S. Resident Alien |                   |
| Title                |                             | Phone  |                   |
| SSN*                 | Date of Birth (mm/dd/yyyy)* |  |                   |
| Residential Address* |                             |  |                   |
| City*                | State*                      | ZIP Code*  |                   |
| Signature            |                             |  | Date (mm/dd/yyyy) |
| X                    |                             |  |                   |

|                      |                             |  |                   |
|----------------------|-----------------------------|--|-------------------|
| Name                 |                             | Citizenship:* <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> U.S. Resident Alien |                   |
| Title                |                             | Phone  |                   |
| SSN*                 | Date of Birth (mm/dd/yyyy)* |  |                   |
| Residential Address* |                             |  |                   |
| City*                | State*                      | ZIP Code*  |                   |
| Signature            |                             |  | Date (mm/dd/yyyy) |
| X                    |                             |  |                   |

T. Rowe Price Brokerage is a division of T. Rowe Price Investment Services, Inc., member FINRA/SIPC. Accounts are carried by Pershing LLC, a BNY Mellon company, member NYSE/FINRA/SIPC.

|                      |                             |  |                   |
|----------------------|-----------------------------|--|-------------------|
| Name                 |                             | Citizenship:* <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> U.S. Resident Alien |                   |
| Title                |                             | Phone  |                   |
| SSN*                 | Date of Birth (mm/dd/yyyy)* |  |                   |
| Residential Address* |                             |  |                   |
| City*                | State*                      | ZIP Code*  |                   |
| Signature            |                             |  | Date (mm/dd/yyyy) |
| X                    |                             |  |                   |

|                      |                             |  |                   |
|----------------------|-----------------------------|--|-------------------|
| Name                 |                             | Citizenship:* <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> U.S. Resident Alien |                   |
| Title                |                             | Phone  |                   |
| SSN*                 | Date of Birth (mm/dd/yyyy)* |  |                   |
| Residential Address* |                             |  |                   |
| City*                | State*                      | ZIP Code*  |                   |
| Signature            |                             |  | Date (mm/dd/yyyy) |
| X                    |                             |  |                   |

|                      |                             |  |                   |
|----------------------|-----------------------------|--|-------------------|
| Name                 |                             | Citizenship:* <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> U.S. Resident Alien |                   |
| Title                |                             | Phone  |                   |
| SSN*                 | Date of Birth (mm/dd/yyyy)* |  |                   |
| Residential Address* |                             |  |                   |
| City*                | State*                      | ZIP Code*  |                   |
| Signature            |                             |  | Date (mm/dd/yyyy) |
| X                    |                             |  |                   |

**\*NOTE:** We are required to have this information in order to open your account and verify your identity pursuant to the USA PATRIOT Act.

For more individuals, check this box and attach a [separate page](#).



## 2 Resolution Certification

By signing this form, the organization identified in Section 1 specifically authorizes T. Rowe Price Services, Inc.; T. Rowe Price Investment Services, Inc.; and their affiliates and agents (collectively, "T. Rowe Price") and the T. Rowe Price Funds to act on any instructions of the designated individuals listed in Section 1, reasonably believed to be genuine, in connection with any one or all of the following transactions:

- Any purchase, redemption, exchange, or transfer, including any necessary identification of the shares treated as sold for tax reporting;
- Opening cash, margin, and/or option accounts and maintaining one or more accounts with T. Rowe Price Brokerage for the purpose of purchasing, investing in, or otherwise dealing with all forms of securities, including any necessary identification of the shares treated as sold for tax reporting and selling securities short;
- Endorsing any securities, endorsing any securities in order to pass title, or directing the sale or exercise of any rights with respect to any securities;
- The execution of any documents required to consummate an authorized transaction; and
- Any lawful transaction, consistent with the terms of the T. Rowe Price mutual fund prospectus, for and on behalf of the organization.

The organization agrees to indemnify and hold harmless T. Rowe Price and the T. Rowe Price Funds from any losses or expenses resulting from having acted upon any instruction, signed by the officers/individuals designated in Section 1, believed to be genuine.

This certification will remain in full force and effect until such time that T. Rowe Price receives a written revocation and has had sufficient time to act upon it. Such notice of revocation will not affect any transaction made prior to the date of receipt of such notice by the T. Rowe Price Funds. Furthermore, the failure to supply a specimen signature shall not invalidate any transaction if the transaction is in accordance with authority actually granted.

By signing the certification, the organization hereby agrees to be bound by the terms of this resolution and indemnification agreement.

I, ,

the  of the organization, do hereby

certify that at a meeting held on

the governing body of the organization adopted a resolution authorizing the foregoing, in accordance with the charter and bylaws of the organization;

there are  signatures required to act; and the resolution

and this certification are true and correct and remain in full force and effect as of the date below.

A notary is required if the individual certifying this form in Section 2 is the only individual authorized to act on behalf of the organization for this account.

### Signature and Date Required

|   |                          |
|---|--------------------------|
| <b>Officer's Signature</b>  | <b>Date (mm/dd/yyyy)</b> |
|  |                          |
| <b>Print Name</b>   |                          |
| <b>Title of Officer</b>   |                          |

Corporate Seal  
(optional)

Sworn to and subscribed before me, this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_. In witness hereof, I hereunto set my hand and official seal.

|                              |  |
|------------------------------|--|
| <b>Notary Public</b>         | <b>Notary Stamp—Applies to the Officer's Signature Immediately Above</b> |
| <b>My Commission Expires</b> |  |

