

### **Bank Options Form**

PO Box 219109 • Kansas City, MO 64121-9109 • 800-525-3713

Use this form to add electronic purchase and redemption options to your account(s). This will give you the flexibility to purchase into or redeem from your account through our automated systems (janushenderson.com or Xpressline) or by telephone during normal business hours.

In a Hurry ? fax form to 877-319-3852

- An original voided item that is preprinted with the bank registration must be included. Starter checks will not be accepted.
- To add bank options to corporate accounts, please call for instructions.
- Upon receipt of new bank information, the ability to redeem shares will be delayed for a period of 15 days for security reasons, unless an original signature guarantee is received. A faxed copy of a signature guarantee will not be accepted.
- · Please print in capital letters using black ink.
- Questions? Call 800-525-3713.

### 1. What name is on your account?

**Primary Owner/Trustee** 

First Name	Middle Initial	Last Name
Social Security Number	Phone Number	
Joint Owner/Trustee/Custodia	an (if applicable)	
First Name	Middle Initial	Last Name
Social Security Number	Phone Number	
Trust Account information (if	applicable)	
Trust Name		Tax Identification Number
Please indicate which account(s	one immediately once the option is estab	otions be added to? (check one) hase and redemption options to. Keep in mind that holished; however, electronic redemption capability is
☐ All accounts under the prima	ary owner's Social Security Number or T	ax ID
☐ Only select accounts as indi	cated below:	
Account #	Account #	Account #

**Note:** If any of your Janus Henderson accounts are joint accounts, <u>all</u> owners/trustees must sign in Section 5. If the Janus Henderson account is an account for a minor, the custodian/responsible individual must sign in Section 5.

### 3. Provide your bank information.

Please check one of the following options:

- This bank should replace all existing banks.
- ☐ This bank should be added as an additional bank to the account(s) and be listed as the ☐ primary or ☐ secondary bank for purchase and redemption options.
- My bank information is already on file with Janus Henderson and I would like to add purchase and redemption options to the account.

**Note:** Unless otherwise indicated, this bank will be added as the primary bank for all electronic purchases and redemptions processed via the telephone, janushenderson.com and Xpressline. If you would like to delete any options, please contact a Janus Henderson representative.

Please attach a **preprinted** voided check (or preprinted deposit slip for a savings account) below to provide us with the relevant bank and account information to establish your electronic options.

This is a:  $\ \square$  Checking Account  $\ \square$  Savings Account



## Please attach a preprinted voided item.

Need an alternative to a voided item? Please contact a Janus Henderson representative at 800-525-3713.

Signature(s) of bank account owner(s), if different from all Janus Henderson account owner(s), are required to add Purchase options and signature guarantee of all Janus Henderson account owners is required to add Redemption options if all bank account owner(s) are different than the Janus Henderson account owner(s).

# 4. Do you want 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 Section 3. Your AIP may generally be modified or cancelled at any time by visiting janushenderson.com or by calling a Janus Henderson representative.

				Frequency*  Monthly Every Other Month Quarterly			
Fund Name	Investment Amount* (\$50 min.)	Starting Month	Investment Date*	•			
				Frequency*  Monthly Every Other Month Quarterly			
Fund Name	Investment Amount* (\$50 min.)	Starting Month	Investment Date*	- La Quartony			
*If investment amount, frequency or investment date are not specified, investments of \$50 will be made on the 20th of each month.  IRA contributions made through AIP will be credited as contributions for the year in which the shares are purchased. If you want to make prior year contributions, please indicate which month(s) should be coded as a prior year contribution(s):							
□ Jan □ Feb □ Mar □ Apr (must be on or before the 15th)							
For SEP-IRA accounts, ple	ease indicate type of contribution: $\Box$	nployer 🗆 Employ	ree				
☐ Please send me information about Janus Henderson's Payroll Deduction Program.							

### 5. Please read and sign below.

By signing below, I (we) 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 all accounts specified on this form. I (we) authorize credits/debits to/from the bank account referenced in conjunction with the account option(s) selected. I (we) agree that Janus Henderson shall be fully protected in honoring any such transaction. I (we) also agree that Janus Henderson may make additional attempts to credit/debit my account if the initial attempt fails and I (we) will be liable for any associated costs. All account options elected will become part of the account application and terms, representations, and conditions thereof.

A confirmation of these changes will be sent to you. Please review it carefully to ensure the options and bank information were added to your account(s) correctly.

X		X	
Signature of Owner, Trustee or Custodian	Date	Signature of Joint Owner or Co-Trustee (if applicable)	Date
Printed Name of Owner, Trustee or Custodian		Printed Name of Joint Owner or Co-Trustee (if applicable)	
6. Do you need a signature guara	antee?		
		diate distribution to a new bank, if the distribution wher(s) are different than the Janus Henderson according	
SIGNATURE GUARANTEE STAMP		SIGNATURE GUARANTEE STAMP	
(Including Medallion Guarantees)		(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.

