

LEGG MASON FAMILY OF FUNDS

Limited Power of Attorney

This form should be used to give financial power of attorney to someone to manage your Legg Mason funds account should you become incapacitated. For assistance in completing this form, please call Shareholder Services, at 1-800-822-5544, Monday through Friday, 8:00 am – 5:30 pm (ET).

1 ACCOUNT INFORMATION

Fund Account Registration [Account Owner Name(s)]		Account Number(s)	
Street Address	City	State	Zip Code
Daytime Phone Number			

2 LIMITED POWER OF ATTORNEY AGREEMENT

Unless otherwise specified, in this Agreement:

- The term "Agent" refers to the individual identified in paragraph 2, below.
- The term "Agreement" refers to this Limited Power of Attorney and any subsequent amendments.
- The terms "I," "me," and "my" refer to the Account Owner (whether the owner is an individual or individuals, a partnership, association, or corporation), and those with authority to act on the account owner's behalf.
- The terms "you" and "your" refer to Legg Mason and its affiliated entities.

ACCOUNT OWNER'S OBLIGATIONS

If more than one person or entity has an ownership interest in the account, then each person or entity agrees to be jointly and individually liable for all obligations under this agreement.

APPOINTMENT OF AGENT

I appoint the following individual as my true, sufficient and lawful agent and attorney-in-fact on my behalf and my name:

Name of Agent (first)	(middle initial)	(last)
Agent's Social Security Number	Agent's Date of Birth	Agent's Phone Number
Agent's Complete Address		

LIMITED SCOPE OF AUTHORITY

My Agent is authorized to buy, redeem or exchange shares in Legg Mason funds, for my fund account and at my risk to the same extent in every respect as I might or could do on my own behalf. My Agent is not authorized to transfer any mutual fund shares from my account; however, you may accept instructions from my Agent to send a check payable to me and mailed to my address of record.

INDEMNIFICATION AND HOLD HARMLESS

I agree to indemnify Legg Mason, their affiliates, and BNY Mellon to hold harmless from any liability or expense that you may incur for accepting instructions from my Agent, or for effecting transactions authorized by my Agent. This indemnification and agreement to hold you harmless shall survive the termination of this Agreement and is binding on my successors and assigns. Nothing in this Agreement shall be construed as a waiver of, or limitation on, any rights that I may have under applicable federal and state securities laws.

RESERVATION OF AUTHORITY

I reserve the authority to direct and to determine at any and all times the selection of any Legg Mason fund for purchase and sale in my account; however, the exercise of such authority shall not be construed as a revocation of the authority granted to my Agent in this Agreement.

TERMINATING THIS AGREEMENT

I may terminate this Agreement and revoke the authority granted to my Agent at any time, for any reason, by delivering to you a written notice of termination. This Agreement will be considered terminated when you actually receive my written notice of termination. My termination of this Agreement shall not affect in any way transactions initiated prior to such termination.

GOVERNING LAW

This Agreement shall be deemed to have been made in the state of Maryland, and our rights and liabilities shall be determined according to the laws of the state of Maryland.

If any part of this Agreement shall be held invalid or unenforceable, that part shall be deemed modified as necessary to make it effective, and the remaining provisions of this Agreement shall remain in effect.

COMMUNICATIONS FROM AND TO LEGG MASON FUNDS

You should send all confirmations, statements, and other communications relating to my Fund account as checked below:

Choose one: Send to me only Send to me and my Agent

3 SCOPE OF AND CHANGES TO THIS AGREEMENT

This Agreement covers only the Fund account specifically identified at the top of this Agreement.

This Agreement will terminate automatically on my death, but will not be affected by my disability, incompetence or incapacity and is binding me, my estate, and those with authority to act on my behalf. It is also binding any organization that may succeed your interest in my account. You may unilaterally amend this Agreement at any time after giving me reasonable notice.

Signature of Account Owner Account Owner is incapacitated and unable to sign. Date

Signature of Joint Account Owner, if applicable Date

Signature of My Agent Date

4 MEDALLION SIGNATURE GUARANTEE (REQUIRED)

This Power of Attorney is true and complete, in full force and effect and the maker is still alive.

Place Medallion Signature Guarantee Stamp Here.

CONTACT INFORMATION (INCLUDING CUSTOMER COMPLAINTS)

Mail:	Postal address Legg Mason Funds P.O. Box 9699 Providence, RI 02940-9699	Overnight carrier address Legg Mason Funds 4400 Computer Drive Westborough, MA 01581
Phone:	To speak with an investment professional regarding any of our funds, please call toll-free: 1-800-822-5544, Monday through Friday, 8:00 am – 5:30 pm (ET)	
Fax:	1-508-599-4186	
TeleFund:	To access our telephone account management service, please call toll-free: 1-877-6LMFUNDS (1-877-656-3863)	
Internet:	www.leggmasonfunds.com	

An investor should consider a Fund's investment objectives, risks, charges and expenses carefully before investing. For a free prospectus, which contains this and other information on any Legg Mason Fund, visit www.leggmasonfunds.com. An investor should read the prospectus carefully before investing.