

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000003935

Entity Name: T. ROWE PRICE TRUST COMPANY**Current Principal Place of Business:**100 EAST PRATT STREET
BALTIMORE, MD 21202-1009**Current Mailing Address:**100 EAST PRATT STREET
ATTN: CFA, OM-1400
BALTIMORE, MD 21202-1009 US**FEI Number:** 52-1309931**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	S, D, VP
Name	OESTREICHER, DAVID
Address	100 EAST PRATT STREET
City-State-Zip:	BALTIMORE MD 21202
Title	TREASURER
Name	DIGNAN, TIMOTHY S
Address	100 EAST PRATT STREET
City-State-Zip:	BALTIMORE MD 21202
Title	DIRECTOR, VP
Name	WATSON, THOMAS H.
Address	100 EAST PRATT STREET
City-State-Zip:	BALTIMORE MD 21202-1009
Title	DIRECTOR
Name	ANDERSON, DONNA F
Address	100 EAST PRATT STREET
City-State-Zip:	BALTIMORE MD 21202-1009

Title	ASST. SECRETARY
Name	CONNOLLY, VIRGINIA G
Address	100 EAST PRATT STREET
City-State-Zip:	BALTIMORE MD 21202
Title	DIRECTOR, VP
Name	MICKEL, CHERYL A.
Address	100 EAST PRATT STREET
City-State-Zip:	BALTIMORE MD 21202
Title	ASSISTANT SECRETARY
Name	REILLY, KATHRYN L
Address	100 EAST PRATT STREET
City-State-Zip:	BALTIMORE MD 21204
Title	DIRECTOR
Name	DAVIS, MICHAEL
Address	100 EAST PRATT STREET
City-State-Zip:	BALTIMORE MD 21202-1009

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KATHRYN L REILLY**ASSISTANT SECRETARY** 04/10/2019_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	HANES, LISA
Address	100 EAST PRATT STREET
City-State-Zip:	BALTIMORE MD 21202-1009