

1.) CORPORATION NAME:

DUE DATE: **10/31/2013**

**Capital Research and Management Company**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1232034**

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	2,500,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  
**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:  
**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 333 SOUTH HOPE STREET 55TH FLOOR  
CITY/ST/ZIP: LOS ANGELES, CA 90071

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

<p>NAME: TIMOTHY D ARMOUR TITLE: PRES/PEO ADDRESS: 333 S HOPE ST 55TH FL CITY/ST/ZIP/CO: LOS ANGELES, CA 90071</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: MICHAEL J DOWNER TITLE: SVP/SEC ADDRESS: 333 S HOPE ST, 33RD FL CITY/ST/ZIP/CO: LOS ANGELES, CA 90071</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: CARMELO SPINELLA TITLE: TREAS/PFO ADDRESS: 333 S HOPE ST, 55TH FL CITY/ST/ZIP/CO: LOS ANGELES, CA 90071</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: JAMES F ROTHENBERG TITLE: VC/CHRM EXEC CO ADDRESS: 333 S HOPE ST, 55TH FL CITY/ST/ZIP/CO: LOS ANGELES, CA 90071</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: James B. Lovelace TITLE: DIRECTOR ADDRESS: 333 South Hope St. CITY/ST/ZIP/CO: Los Angeles, CA 90071</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: James P. Ryan TITLE: DIRECTOR ADDRESS: 333 South Hope St. CITY/ST/ZIP/CO: Los Angeles, CA 90071</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	David C. Barclay DIRECTOR 333 South Hope St. Los Angeles, CA 90071	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	John H. Phelan, Jr. EXC VP 333 South Hope St. Los Angeles, CA 90071	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Robert W. Lovelace EXC VP 333 South Hope St. Los Angeles, CA 90071	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Mark E. Denning DIRECTOR 333 South Hope St. Los Angeles, CA 90071	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Claudia P. Huntington DIRECTOR 333 South Hope St. Los Angeles, CA 90071	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Donald B. O'Neal DIRECTOR 333 South Hope St. Los Angeles, CA 90071	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Kevin G. Clifford DIRECTOR 333 South Hope St. Los Angeles, CA 90071	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Joanna F. Jonsson DIRECTOR 333 South Hope St. Los Angeles, CA 90071	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Jonathan Knowles DIRECTOR 333 South Hope St. Los Angeles, CA 90071	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Dina N. Perry DIRECTOR 333 South Hope St. Los Angeles, CA 90071	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Martin Romo DIRECTOR 333 South Hope St. Los Angeles, CA 90071	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: Eugene P. Stein TITLE: DIRECTOR ADDRESS: 333 South Hope St. CITY/ST/ZIP/CO: Los Angeles, CA 90071	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: Bradley J. Vogt TITLE: DIRECTOR ADDRESS: 333 South Hope St. CITY/ST/ZIP/CO: Los Angeles, CA 90071	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ MICHAEL J DOWNER	MICHAEL J DOWNER, SVP/SEC	9/6/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.