

MFS® 529 SAVINGS PLAN CHANGE FORM



- To Change:
- Designated Beneficiary Complete Sections 1, 2 and 5.
 - Account Owner Complete Sections 1, 3 and 5. A Medallion Signature Guarantee is required.
 - Successor Account Owner Complete Sections 1, 4 and 5.

1. Account Information (For the account being changed or transferred.)

CURRENT ACCOUNT OWNER'S NAME

CURRENT DESIGNATED BENEFICIARY'S NAME

ACCOUNT OWNER'S MAILING ADDRESS

CITY

STATE

ZIP CODE

This is my new address; please update my account information.
Note: If the new address is a non-U.S. address, you will be restricted from making additional purchases into this account.

ACCOUNT OWNER'S PHONE NUMBER

REGISTERED REPRESENTATIVE'S NAME

REGISTERED REPRESENTATIVE'S PHONE NUMBER

□ □ □ - □ □ - □ □ □ □
SOCIAL SECURITY NUMBER

□ □ □ - □ □ - □ □ □ □
SOCIAL SECURITY NUMBER

2. Change the Beneficiary

Note:

- This section must be completed when designating a new beneficiary on the account.
- If transferring an account(s) to more than one beneficiary, please complete a separate form for each new beneficiary.
- You cannot change the beneficiary on an account established as an UTMA/UGMA account.

Complete this section to change the beneficiary and transfer the account balance from your current MFS 529 Savings Plan account to an MFS 529 Savings Plan account for the new beneficiary. The Designated Beneficiary of the account receiving the transferred funds must be a Member of the Family (as defined in the Program Disclosure Booklet) of the Designated Beneficiary of the account from which the funds are transferred in order to avoid any adverse state or federal income, estate, gift or transfer tax consequences.

A. Amounts to transfer from the current account to the new beneficiary.

Identify the account(s) and the portion of the account(s) to transfer by checking the option that applies. If the amount(s) is/are to be transferred to a new MFS Account, please complete a new MFS 529 Savings Plan Account Application.

FUND NUMBER	ACCOUNT NUMBER	AMOUNT	SELECT ONE:		
			UNITS	DOLLARS	ALL
□ □ □ □	_____	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
□ □ □ □	_____	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
□ □ □ □	_____	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
□ □ □ □	_____	_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. Change or Add a Successor Account Owner (for account in Section 1)

A Successor Account Owner is an individual, trust or other entity who assumes control of the account upon the death or resignation of the Individual Account Owner.

This new designation will cancel previous designations you have made for this MFS 529 Savings Plan Account.

NEW SUCCESSOR ACCOUNT OWNER'S FIRST NAME	MI	LAST NAME
<input type="text"/>	<input type="text"/>	<input type="text"/>
SOCIAL SECURITY NUMBER	DATE OF BIRTH (MM/DD/YYYY)	

Is the new Successor Account Owner a U.S. person residing in the United States? (A U.S. person is a citizen or resident alien of the United States. If the new Account Owner is a non-U.S. person or has a non-U.S. address, the account will be restricted from making additional purchases.)

Yes No

5. Authorization Must be signed by the current account owner or successor account owner, indicating the capacity in which you are acting, if the account owner is deceased.

As the Account Owner, I authorize the change(s) requested on this form. I certify that the information contained herein is correct and that I have read the MFS 529 Savings Plan Participant Agreement & Disclosure Statement.

SIGNATURE

Date (MM/DD/YYYY)

PRINT NAME

Medallion Signature Guarantee

A Medallion Signature Guarantee is required if you are changing the Current Account Owner of the MFS 529 Savings Plan.

AFFIX GUARANTEE STAMP HERE

The signature(s) must be guaranteed by an eligible bank, broker, dealer, credit union, national securities exchange registered securities association, clearing agency, or savings association. Medallion Signature Guarantees shall be accepted in accordance with policies established by the MFS 529 Savings Plan. Notarization by a Notary Public is not acceptable in lieu of a Medallion Signature Guarantee provided by one of the eligible guarantor institutions listed above.

If you have any questions about this form, please contact the MFS 529 Savings Plan Service Team at 1-888-529-0063 Monday-Friday 8am-7pm ET.

Mail completed form to:

Regular mail
MFS 529 Savings Plan
PO Box 534454
Pittsburgh, PA 15253- 4454

Overnight mail
MFS 529 Savings Plan
Attention: 534454
500 Ross Street, 154-0520
Pittsburgh, PA 15262