UNIFORM GIFTS/TRANSFERS TO MINORS ACT (UGMA/UTMA) TRANSFER AUTHORIZATION TO FORMER MINOR

Instructions

Use this form to transfer a Uniform Gifts/Transfers to Minors Act (UTMA/UGMA) account to the former minor.

- The minor must have reached the age of termination of custodianship under the Uniform Gifts/Transfers to Minors Act in that state.
- Complete one form for each account registration. If the former minor has custodial accounts with more than one custodian, one form is needed per account.
- The transfer will be processed as a "re-registration." If the transfer is for any other reason, complete the Transfer Authorization Form.
- The account will be re-registered as an individual account for the former minor. To transfer the custodial account to any other account type, please complete the Transfer Authorization Form, which can be found at **mfs.com/Forms**.
- 1. Account Information (for the account being transferred)

ACCOUNT REGISTRATION		
ACCOUNT REGISTRATION (CONTINUED)	PHONE NUMBE	R
MAILING ADDRESS		
CITY	STATE	ZIP CODE
REGISTERED REPRESENTATIVE'S NAME	REGISTERED RE	PRESENTATIVE'S PHONE NUMBER
2. Transfer Instructions		
Transfer all accounts under the former minor's social secur	rity number:	

3. New Account Information

Important Information About Procedures for Opening a New Account

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

You must provide the following information for each person listed on the account: name, date of birth, Social Security number or taxpayer identification number and residential address (a P.O. Box is not acceptable). We also may ask to see your driver's license or other identifying documents. In the event that MFSC, on behalf of the fund, is unable to verify the identity of investors, MFSC and the fund reserve the right to take additional steps up to and including closing the account if required by applicable law.

If the former minor is a non-U.S. Person or has a non-U.S. address, upon transfer of ownership, the former minor will be restricted from making additional purchases into this account and exchanges into and out of this account.

Please talk to your financial professional, or call the MFS Service Center at 1-800-225-2606.

Former Minor's First Name	MI	FORMER MINO	R'S LAST NAME	
FORMER MINOR'S SOCIAL SECURITY NUMBER	FORMER MINOR'S DATE OF BIRTH	H (MM/DD/YYYY) PHO	NE NUMBER	MOBILE NUMBER
FORMER MINOR'S STREET ADDRESS REQUIRED (NO P.O	BOXES)			
СІТҮ		STATE	ZIP CODE	
Former Minor's Mailing Address (if Different Fro	DM ABOVE)			
CITY		STATE	ZIP CODE	

If the former minor's legal name has changed, please complete Section 4. A Medallion signature guarantee stamp is required in Section 7.

If the residential address provided for the new account is different from the address of record of the transferred account, a Medallion signature guarantee stamp is required in Section 7.

MFS will apply the MFS open-end fund's default method of Average Cost Basis to your account. The cost basis associated with any shares acquired and subsequently withdrawn, exchanged or transferred after January 1, 2012 will be reported to the IRS under this method. If you would like to select a method other than Average Cost or select a method to be automatically applied to future accounts you open with MFS, please complete and return a Cost Basis Reporting Selection/Change Form. You may also select a cost basis method by accessing your account through MFS Access once the account is established. In order to learn more please go to **mfs.com/TaxCenter**.

4. Name Change Authorization

Please provide both your former and new names, and sign below as both your former and new name. A Medallion Signature Guarantee is required in Section 7.

I authorize MFS to change my name on my account(s) from my former name

FORMER NAME

to my new nam	e NEW NAME		
SIGNATURE (FORMER	NAME)	DATE (MM/DD/YYYY)	

SIGNATURE (NEW NAME)

5. Dealer Information

MFS cannot accept an account application without all of the dealer information completed; this includes the signature of an authorized person from the firm. If you are aware of additional accounts that may qualify for linking under MFS Right of Accumulation policy, please notify us.

We hereby authorize MFSC to act as our agent in connection with transactions under this authorization form and agree to notify MFS Fund Distributors, Inc. of any purchase eligible for a reduced sales charge under a Letter of Intent or Right of Accumulation. This application for the purchase of shares and the establishment of any shareholder account privileges complies with the terms of the applicable prospectus. We guarantee the investors' signatures and certify that we have verified the identity of the investors.

Apply the dealer information from the transferred account to the new account(s). If this option is selected, do not complete the fields below. Skip to Section 6.

MI	LAST NAME	
	FIRM NUMBER	
	STATE	ZIP CODE
REGISTERE	REGISTERED REPRESENTATIVE'S NUMBER	
REGISTERE	REGISTERED REPRESENTATIVE'S EMAIL ADDRESS	
MATRIX LE	MATRIX LEVEL	
	REGISTERE	FIRM NUMBER FIRM FIRM FIRM FIRM FIRM FIRM FIRM FIRM

AUTHORIZED SIGNER OF BROKER/DEALER FIRM (REQUIRED)

6. Distribution Option If a selection is not made distributions will be reinvested.

- O Dividends and capital gains reinvested
- O Dividends in cash, capital gains reinvested
- O Dividends and capital gains in cash

For additional service options, please attach a Service Application, which can be located on **mfs.com/Forms** or obtained by calling 1-800-225-2606.

7. Signature and Certification

I am of legal age and have read and understood the terms of the prospectus for each fund to be purchased. I authorize MFS Service Center, Inc. (MFSC), its affiliates, and the fund to act on any instructions believed to be genuine for any service authorized on this form. I agree they will not be held liable for any resulting loss. I understand that MFSC may be required to use information provided on this application to verify the identity of investors. In the event that MFSC, on behalf of the fund, is unable to verify the identity of investors, MFSC and the fund reserve the right to take additional steps up to and including closing the account if required by applicable law.

A U.S. Person is a citizen or resident alien of the United States. U.S. tax regulations require the completion of this section in order to prevent the imposition of backup withholding tax on dividends, on capital gain distributions, and on the proceeds of redemptions and exchanges.

U.S. Persons only

Under penalties of perjury, I certify that

- 1. The number shown on this form is my correct taxpayer identification number, and
- 2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- 3. I am a U.S. Person (including a U.S. resident alien).
- 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. Exemption code (if any)

See IRS Form W-9 for FATCA exemptions and reporting codes. Generally, if you are only submitting this form for an account you hold in the United States, you may leave this field blank.

Note: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

Check if you are an exempt recipient and mark the appropriate account type:

IRA) с	Corporation	C Ret

Nominee irement Plan

Other

The IRS does not require your consent to any provisions of this document other than the certification required to avoid backup withholding and FATCA reporting.

Non-U.S. Persons

I am a non-U.S. Person.

If you are not a U.S. Person, please attach the appropriate completed Form W-8, which you can obtain online at irs.gov. If the above is checked or if the address provided in Section 3 is a non-U.S. address, you will be restricted from making additional purchases into this account and exchanges into and out of this account unless a limited exception applies.

FORMER MINOR'S SIGNATURE

DATE (MM/DD/YYYY)

PRINT NAME

Signature Authentication

- Signature authentication is required for all requests.
- If the former minor's name has changed and Section 4 was completed, a Medallion signature guarantee is required.
- If the address provided for the new account is different from the address of record of the transferred account, a Medallion signature guarantee stamp is required.

Notary Public Stamp, Signature Guarantee, or Medallion Signature Guarantee Stamp

AFFIX 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. Signature guarantees
	shall be accepted in accordance with policies
	established by MFS Service Center, Inc. and
	must not be dated. A notary public stamp car be obtained from a notary public signing
	agent. Both notary public signature and
	original notary stamp is required within the
	affix stamp box.

Please be sure to complete all appropriate sections of this form. If you have any questions about this form, please call 1-800-225-2606 any business day or visit our website, **mfs.com**.

Mail completed form to:

Regular mail

MFS Service Center, Inc P.O. Box 219341 Kansas City, MO 64121-9341

Overnight mail

MFS Service Center, Inc. 801 Pennsylvania Ave, Suite 219341 Kansas City, MO 64105-1307