



Oregon College Savings Plan Rebalance Investment Portfolios Form

Use this form to rebalance funds among Investment Portfolios within a Plan Account
Questions? Call toll-free 1.866.772.8464
P.O. Box 55914, Boston, MA 02205-5914
Visit OregonCollegeSavings.com

Important Information

- You can rebalance funds among Investment Portfolios within your Account twice per calendar year (or upon a change in Beneficiary to a Member of the Family). A rebalance of funds to or from an account in another Plan in the Network for the same Beneficiary will be considered a rebalance among Investment Portfolios for purposes of this restriction.
- Print in capital letters using blue or black ink, sign and date the form and mail it to the Plan at the above address.
- A Signature Validation Program (SVP) Stamp¹ may be required as described in Section 4.

1 Current Account Information *(You must provide complete information.)*

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Plan Account Number (Complete one form for each Account you own and/or for each Beneficiary).

Telephone Number

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Account Owner or Custodian Name (First, MI, Last, Suffix), or Entity Name

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Beneficiary Name (First, MI, Last, Suffix)

2 Rebalance Instructions *(You must complete this section)*

This Rebalance instruction applies only to assets currently in your account; it will not change your allocation instructions for future contributions.

- For a FULL rebalance, enter the dollars, write the word "ALL" or indicate the percentage in the "Rebalance From" column.
- For a PARTIAL rebalance, enter the dollars or percentages in the "Rebalance From" column.

Then, enter a percentage next to your selected Investment Portfolio(s) in the "Rebalance To" column. The total amount in the "Rebalance From" column will be applied to your Investment Portfolio(s) using the percentage(s) appearing in the "Rebalance To" column.

Note: If you're closing an investment portfolio and do not want future contributions made to that portfolio, please establish or change your allocation instructions in Section 3.

Rebalance FROM <i>(in Dollars OR percentage)</i>		Investment Portfolio Name <i>(Investment Portfolio Code)</i>	Rebalance TO <i>(percentage only)</i>	Check if new Investment Portfolio ²
Dollars or ALL	Percentage			
	%	Age-Based Portfolio	%	<input type="checkbox"/> New Portfolio
	%	Aggressive Portfolio (2806)	%	<input type="checkbox"/> New Portfolio
	%	Moderate Portfolio (2807)	%	<input type="checkbox"/> New Portfolio
	%	Conservative Portfolio (2808)	%	<input type="checkbox"/> New Portfolio
	%	Diversified US Equity Portfolio (2811)	%	<input type="checkbox"/> New Portfolio
	%	Diversified International Equity Portfolio (2816)	%	<input type="checkbox"/> New Portfolio
	%	Diversified Fixed Income Portfolio (2818)	%	<input type="checkbox"/> New Portfolio
	%	Balanced Index Portfolio (2813)	%	<input type="checkbox"/> New Portfolio
	%	US Equity Index Portfolio (2812)	%	<input type="checkbox"/> New Portfolio

¹ A Signature Validation Program (SVP) Stamp is available from banks or trust companies, savings banks, savings and loan associations or members of a national stock exchange and warrants that the signer is the appropriate person to provide instruction. A notary public **cannot** provide a Signature Validation Program (SVP) Stamp. Please contact your bank or broker, if needed.

² If a new Investment Portfolio is opened, a different portfolio number will be assigned and new investment coupons will accompany your confirmation statement. You can also use the Additional Contribution by Mail form to contribute by check at any time.

Rebalance FROM <i>(in Dollars OR percentage)</i>		Investment Portfolio Name <i>(Investment Portfolio Code)</i>	Rebalance TO <i>(percentage only)</i>	Check if new Investment Portfolio ³
Dollars or ALL	Percentage			
	%	International Equity Index Portfolio (2815)	%	<input type="checkbox"/> New Portfolio
	%	Social Choice Portfolio (2819)	%	<input type="checkbox"/> New Portfolio
	%	Diversified Inflation Protection Portfolio (2817)	%	<input type="checkbox"/> New Portfolio
	%	Fixed Income Index Portfolio (2814)	%	<input type="checkbox"/> New Portfolio
	%	Money Market Portfolio (2810)	%	<input type="checkbox"/> New Portfolio
	%	Principal Plus Interest (2809)	%	<input type="checkbox"/> New Portfolio
TOTAL			100%	

Note: If you allocate contributions to the Principal Plus Interest Portfolio, rebalances made at a later date from the Principal Plus Interest Portfolio to the Money Market Portfolio will not be permitted.

3 Allocation Instructions for Future Contributions

Note: If you're closing an investment portfolio and do not want future contributions made to that portfolio, please establish or change your allocation instructions below.

- Use my current allocation instructions on file for future contributions.
- Establish or change my allocation instructions as indicated below for my future contributions.
 - Use a whole percentage next to each Investment Portfolio below. The TOTAL of all allocations must equal 100%.
 - The Plan will apply these allocation instructions to future Automatic Contribution Plan (ACP) contributions.
 - These allocation instructions will not apply to payroll contributions, if any.

You can change your Allocation Instructions online, by telephone, or by form at any time.

Investment Portfolios	Whole Percentage <i>(per Investment Portfolio)</i>
Age-Based Portfolio	%
Aggressive Portfolio (2806)	%
Moderate Portfolio (2807)	%
Conservative Portfolio (2808)	%
Diversified US Equity Portfolio (2811)	%
Diversified International Equity Portfolio (2816)	%
Diversified Fixed Income Portfolio (2818)	%
Balanced Index Portfolio (2813)	%
US Equity Index Portfolio (2812)	%
International Equity Index Portfolio (2815)	%
Social Choice Portfolio (2819)	%
Diversified Inflation Protection Portfolio (2817)	%
Fixed Income Index Portfolio (2814)	%
Money Market Portfolio (2810)	%
Principal Plus Interest (2809)	%
TOTAL	100%

³ If a new Investment Portfolio is opened, a different portfolio number will be assigned and new investment coupons will accompany your confirmation statement. You can also use the Additional Contribution by Mail form to contribute by check at any time.

4 Signature and Authorization *(This section must be signed for this change to take effect.)*

By signing this form, I authorize the rebalance of funds from my current Investment Portfolio(s) in Section 2 to the Investment Portfolio(s) as indicated. I certify and understand the following:

- A rebalance of funds among Investment Portfolios for my Account can only be requested twice per calendar year.
- I authorize the rebalance of assets in my account per my instructions in section 2. If applicable, any allocation instruction indicated in section 3 will be applied to all future contributions **excluding my payroll deduction contributions, if any.**
- If I am making contributions by payroll deduction, I understand that my payroll contributions will continue into my previously designated Investment Portfolio(s) unless an updated *Payroll Deduction Form* accompanies this request. I understand that I must notify my employer to stop or change the amount of my payroll deduction.
- I understand that this rebalance of funds will become effective upon the Plan's receipt of this form in good order.

I certify that I am the Account Owner, or I have the authority to act as the Account Owner. (If I am an individual acting in a legal capacity as a representative of the Account Owner, or an entity Account Owner, a Signature Validation Program Stamp appears below.)

Signature of Account Owner, Custodian or Authorized Representative of an Individual or Entity Account Owner

Date

IMPORTANT INFORMATION

A Signature Validation Program Stamp is required for all entity Accounts or Accounts for which the individual completing this form is acting in a legal capacity as a representative of the individual Account Owner. You may be required to provide proof of your authority to act on behalf of this Account to your bank or broker before a Signature Validation Program Stamp will be provided. A Signature Validation Program (SVP) Stamp is available from banks or trust companies, savings banks, savings and loan associations or members of a national stock exchange and warrants that the signer is the appropriate person to provide instruction.

Note: A Signature Validation Program Stamp is not required if a *Plan Power of Attorney Form* is on file for an Individual Account, or if a *Plan Power of Attorney Form* accompanies this form.

AFFIX SVP STAMP HERE

Mail this form to:

Oregon College Savings Plan
P.O. Box 55914
Boston, MA 02205-5914

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