

Auto-Exchange Form

For Investors Utilizing
A Financial Advisor

(For Classes A and C)

(Intended for Michigan Residents)

MI 529 Advisorsm Michigan Education Savings Program

This form may be used for the Auto-Exchange Plan option—described in the current MI 529 Advisor Plan Disclosure Statement—to regularly exchange units from one MI 529 Advisor Plan Portfolio to another within the same Class. (Please note: exchanges between 529 Plan accounts with different registrations are not allowed.)

This form must be preceded by or accompanied by the current MI 529 Advisor Plan Disclosure Statement and Participation Agreement. Please read both documents carefully, before you invest.

If you have questions, please call your MI 529 Advisor Plan Investor Services Representative toll-free, Monday–Friday, 8:00am–8:00pm Eastern Time, at **1-866-529-8818**.

Send this form to either: *via regular mail:*

MI 529 Advisor Plan
P.O. Box 55070
Boston, MA 02205-5070

via overnight courier:

MI 529 Advisor Plan
c/o Boston Financial Data Services, Inc.
30 Dan Road
Canton, MA 02021-2809

1. Account Owner Information

Individual/Primary Account Owner (or Custodian)

First Name (or Trustee) Middle Initial Last Name

Date of Birth Social Security Number

2. Designated Beneficiary

Beneficiary First Name Middle Initial Last Name

Beneficiary Date of Birth Beneficiary Social Security Number

3. Auto-Exchange Plan Instructions

Please indicate how you would like to regularly exchange units. (Investors must have \$1,000 or more invested in PIMCO Government Money Market Fund to establish an Auto-Exchange Plan)

I wish to make monthly quarterly exchanges, on or about the 1st 15th day of the month, beginning _____ (month/year), from the following Portfolio:

PIMCO Government Money Market

Portfolio Name Account Number Class of Units

I wish to make the exchanges to the following Portfolio(s):

Portfolio Name Account Number (if an existing account) Contribution Amount (minimum of \$25.00)

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This form must be received five business days before the first exchange date or the exchange will default to the next month.

Minimum contribution: \$25 (per portfolio). Maximum balance limit: \$235,000 per beneficiary (including contributions in MESP Direct Program and MET).

3. Signature and Agreement of Account Owner

By completing this form and signing below, I request that the Plan Administrator establish an Auto-Exchange Plan and am authorizing the automatic exchange of units from my MI 529 Advisor Plan account listed above. I understand that this Auto-Exchange Plan (A/K/A, "Dollar Cost Averaging") is subject to the terms and conditions of the current MI 529 Advisor Plan Disclosure Statement, and upon such request do agree, represent and warrant that I have read, understand and agree to the terms and conditions set forth in both the current Plan Disclosure Statement and Participation Agreement. As Account Owner, I understand that Account Owner assumes all investment risk of an investment in the Program, including the potential loss of principal. **ACCOUNT OWNER AGREES THAT ANY CLAIM BY ACCOUNT OWNER OR THE DESIGNATED BENEFICIARY AGAINST THE STATE OF MICHIGAN, ITS AGENCIES OR INSTRUMENTALITIES, THE STATE TREASURER, THE MICHIGAN DEPARTMENT OF TREASURY, TIAA-CREF TUITION FINANCING, INC., ALLIANZ GLOBAL INVESTORS DISTRIBUTORS, LLC AND ITS SUBCONTRACTORS AND AFFILIATES, ANY VENDORS, CONTRACTORS, INVESTMENT ADVISORS OR INVESTMENT MANAGERS SELECTED OR APPROVED BY THE STATE AND ANY AGENTS, REPRESENTATIVES, OR SUCCESSORS OF ANY OF THE FOREGOING (THE "PARTIES"), MAY BE MADE SOLELY AGAINST THE ASSETS IN ACCOUNT OWNER'S ACCOUNT AND THAT ALL OBLIGATIONS ARE LEGALLY BINDING CONTRACTUAL OBLIGATIONS OF THE ADVISOR PLAN ONLY. AS A CONDITION OF AND IN CONSIDERATION FOR THE ACCEPTANCE OF THIS AGREEMENT BY THE PLAN ADMINISTRATOR ON BEHALF OF THE STATE, ACCOUNT OWNER AGREES TO WAIVE AND RELEASE THE PARTIES FROM ANY AND ALL LIABILITIES ARISING IN CONNECTION WITH RIGHTS OR OBLIGATIONS ARISING OUT OF THIS AGREEMENT OR THE ACCOUNT.**

Sign exactly as the account is to be registered.

Signature

Date

NOTICE: The Account is not insured by any state and neither the principal deposited nor any investment return is guaranteed by any state. Furthermore, the accounts are not insured, nor the principal or any investment return guaranteed, by the federal government or any federal agency.