

| | |
|------------------|-------------------------------------|
| NOT FDIC INSURED | May Lose Value |
| NOT BANK ISSUED | No Bank, State or Federal Guarantee |

If you have questions while completing this form, please call us toll free at 1.888.244.5674, Monday through Friday, 8:00 a.m. to 8:00 p.m., Eastern time, or visit us at www.futurescholar.com.

Please print or type, and keep a copy of this form for your records. Send your completed form and investment to the following address:

Regular mail:
Future Scholar 529 College Savings Plan
P.O. Box 8036
Boston, MA 02266-8036

Overnight mail:
Future Scholar 529 College Savings Plan
30 Dan Road
Canton, MA 02021

1. Current account information

A. Future Scholar 529 College Savings Plan Account number

B. Account Owner information (If not an individual, indicate the type of entity (e.g., a trust) and insert the entity's legal name.)

Social Security number or other taxpayer identification number

First name (or entity name)

(m.i.)

(last)

C. Designated Beneficiary information

Social Security number or other taxpayer identification number

Date of birth (month/day/year)

First name (or entity name)

(m.i.)

(last)

2. Portfolio choices

Amount of additional investment: \$ _____

** SC Taxpayers, Please note:

If you contribute to your Future Scholar account between January 1 and April 15, you may advise the Program Manager whether your contribution should be applied to the current tax year or the prior tax year. Contributions postmarked after April 15 or without tax year instructions will be considered a contribution for the current tax year.

Please indicate your preference: Current Tax Year Prior Tax Year

| Portfolio Name | % of Investment |
|----------------|-----------------|
| | % |
| | % |
| | % |
| | % |
| | % |
| | % |
| | % |
| | % |

100%

Make checks payable to Future Scholar College Savings Plan

The Future Scholar 529 College Savings Plan is sponsored by the South Carolina Office of State Treasurer and investments:

| | | |
|----------------------|----------------|----------------------------------|
| Are Not FDIC Insured | May Lose Value | Are Not Bank or State Guaranteed |
|----------------------|----------------|----------------------------------|

Columbia Management Distributors, Inc. the distributor and program manager of the plan, is a registered broker-dealer, member of FINRA and SIPC, and is a non-bank affiliate of Bank of America, N.A.. Columbia Management Distributors, Inc. and its affiliates do not provide tax advice. Please consult your tax advisor for tax guidance.

3. Signature(s)

I hereby ratify these written instructions and any telephone instructions given pursuant to this authority. I also agree that neither Future Scholar 529 College Savings Plan, Bank of America or its affiliates nor the State of South Carolina Office of the Treasurer will be liable for any loss, liability, cost, or expense for acting upon such instructions. I understand that telephone calls to Future Scholar 529 College Savings Plan may be recorded, and I consent to such tape recordings.

Signature of Account Owner (if the Account Owner is a legal entity, the title of the individual signing for the entity should be indicated.)

Date

Signature of parent, guardian or custodian if Account is funded by UGMA/UTMA assets and Designated Beneficiary is a minor.

Date

