

Investment Option Name	Indicate the Outgoing Amount (in dollars OR percentage)	
	Dollars	Percentage
Managed Allocation Option	\$, .	.00%
Diversified Equity Option (2241)	\$, .	.00%
100% Equity Option (1953)	\$, .	.00%
Balanced Option (2240)	\$, .	.00%
Fixed Income Option (2242)	\$, .	.00%
Guaranteed Option (1954)	\$, .	.00%
Total OUTGOING Amount	\$, .	

4 Transfer amount TO each Investment Option

Indicate the incoming rebalance amount in either dollars **OR** a percentage of the **TOTAL** amount being transferred. Note, if you indicate the amount in dollars, then the total amount below must equal the total amount in Section 3. If you indicate the amount in percentages, then the total allocation must equal 100%. Complete only 1 column below – in either dollars or percentage.

Investment Option Name	Indicate the Incoming Amount (in dollars OR percentage)		Is this a new Investment Option?
	Dollars	Percentage	
Managed Allocation Option	\$, .	.00%	<input type="checkbox"/> Yes OR <input type="checkbox"/> No
Diversified Equity Option (2241)	\$, .	50.00%	<input type="checkbox"/> Yes OR <input checked="" type="checkbox"/> No
100% Equity Option (1953)	\$, .	.00%	<input type="checkbox"/> Yes OR <input type="checkbox"/> No
Balanced Option (2240)	\$, .	25.00%	<input type="checkbox"/> Yes OR <input checked="" type="checkbox"/> No
Fixed Income Option (2242)	\$, .	.00%	<input type="checkbox"/> Yes OR <input type="checkbox"/> No
Guaranteed Option (1954)	\$, .	25.00%	<input type="checkbox"/> Yes OR <input checked="" type="checkbox"/> No
Total INCOMING Amount	\$, .	100.00%	

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

By signing this form, I authorize the transfer of my Account to another eligible Beneficiary and acknowledge the following:

- I certify that all of the information provided by me on this *Change of Beneficiary Form* is, and all information provided by me in the future will be, true, complete and correct.
- I agree to the same representations, warranties, and agreements for my new Beneficiary as were stated in the original *Account Application* for my current Beneficiary.
- I certify that the new Beneficiary is a "member of the family" of the current Beneficiary, as defined in Section 529 of the Internal Revenue Code. (Refer to the *Disclosure Booklet* for a definition of "member of the family".)
- If I am participating in the Automatic Contribution Plan (ACP), I understand that my participation in ACP will be cancelled only if I transfer my entire Account to a new Beneficiary; otherwise my ACP contributions will continue in my original Account unless an *Electronic Banking Information Form* accompanies this form.
- If I am making contributions by automatic payroll deduction, I understand that my payroll contributions will continue in my original Account, unless an updated *Payroll Deduction Form* accompanies this form. I also understand that I must notify my employer if I want to stop or change the amount of my payroll deduction at any time.

For Entity Accounts, e.g. *Trusts, Estates, Business Entities, IRC 501(c)(3) Organizations, or State/Local governments.*

If I am signing on behalf of an entity, I certify that I am authorized by the entity Account Owner identified in Section 1 to act on its behalf and I have attached the appropriate documentation to substantiate authorization for this transaction.

John A Sample

September 1, 2007

Signature of Account Owner or Authorized Representative of Entity

Date

Important Information about a Change of Beneficiary

The new Beneficiary must be a "member of the family" of the current Beneficiary, as defined in Section 529 of the Internal Revenue Code.

A special note for certain Entity Account Owners: Entities described in IRC Section 501(c)(3), may change the Beneficiary on a qualified scholarship account only if the new Beneficiary is **not** a "member of the family" of the current Beneficiary.

You may wish to consult with your financial, legal and/or tax advisor before completing this form. See the *Disclosure Booklet* for more information.

Overnight Mail

Oklahoma College Savings Plan
30 Dan Road
Canton, MA 02021-2809

Mail this form to:

Oklahoma College Savings Plan
P.O. Box 8193
Boston, MA 02266-8193



Program Administration by TIAA-CREF Tuition Financing, Inc.
Distributed by TIAA-CREF Individual & Institutional Services, LLC

OK0709.BCT



List of Approved Documents for Substantiation by Entity Account Owners

Substantiation is required from an entity Account Owner when opening a Plan Account or when conducting a transaction for that Account. Such documentation must include the following:

- the legal status of the entity;
- authorization by the entity to open the Account or conduct the transaction; and
- authorization by the entity for the signer of the form to open the Account or conduct the transaction.

The same document may provide substantiation of all of the three required elements.

The documents set forth below have been approved by the Board to meet these substantiation requirements and must be original or certified documents, dated no more than 60 days prior to receipt by the Plan.

1. A corporate by-law extract or corporate resolution certified by an officer of the corporation (other than an individual authorized thereby to act as signer for the corporation's Account), with raised seal if in use by the corporation;
2. A certificate signed by the owner of a sole proprietorship;
3. A certificate signed by a general partner of a partnership (other than an individual authorized by the certificate to act as signer for the partnership's Account);
4. A certificate signed by an officer of a limited liability company, other company or association (other than an individual authorized by the certificate to act as signer for the Account of the limited liability company, other company or association);
5. A certificate signed by the chief executive officer of a state or local government agency;
6. A certified copy of a court order establishing an estate and naming a legal representative of the estate that is authorized to act as a signer of the Account of the estate;
7. A certificate signed by the trustee of a trust, a court order, or a certified copy of the portion(s) of a trust instrument, that confirms the creation of the trust and the identity of the trustee, and provides authorization for the trustee to act as a signer for the Account of the trust;
8. A letter or memorandum from the Internal Revenue Service indicating that the entity is an organization described in Section 501(c)(3) of the Internal Revenue Code;
9. An original memorandum exhibiting the appropriate letterhead and containing the holographic signature of any one of the following: (a) the chief executive officer of a corporation or limited liability company; (b) the general partner of a partnership; (c) the owner of a sole proprietorship; or (d) the chief executive officer of a state or local government agency; or
10. If the entity Account Owner is unable to provide substantiation in any of the foregoing forms, the entity Account Owner may propose an alternate form of substantiation to the Plan administrator's designee for consideration. The Plan administrator's designee must review the alternate form of substantiation for authenticity and completeness and must accept or reject it.
 - ***If judged authentic and complete***, the Plan administrator's designee must act on the alternate form of substantiation within 30 business days of so determining.
 - ***If judged inauthentic or incomplete***, the Plan administrator's designee must notify the Account Owner of the rejection of the alternate form of substantiation and set forth the reason for such determination in writing within 30 business days of so determining.

Please retain a copy of this notice with your records.