

# SPECIFIC LOT IDENTIFICATION LOT SELECTION FORM



This form should be completed if you have selected Specific Lot Identification as the cost basis method on your account and you are requesting a disposition of shares. This form must be submitted with the transaction request.

## 1. Account Information

ACCOUNT REGISTRATION \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_

FUND NUMBER

ACCOUNT NUMBER \_\_\_\_\_

## 2. Lot Selection

Provide the lot selections that you would like depleted from your account. You must submit a separate Specific Lot Identification Lot Selection Form for each account from which you are requesting a transaction.

**Note:** You must provide this information in the order in which you would like your lots depleted.

### LOTS TO BE TRANSFERRED/EXCHANGED TO:

FUND NUMBER

ACCOUNT NUMBER \_\_\_\_\_

DATE OF ACQUISITION

NUMBER OF SHARES

OR

DOLLAR AMOUNT

,

\_\_\_\_\_

\$ \_\_\_\_\_

,

\_\_\_\_\_

\$ \_\_\_\_\_

,

\_\_\_\_\_

\$ \_\_\_\_\_

,

\_\_\_\_\_

\$ \_\_\_\_\_

,

\_\_\_\_\_

\$ \_\_\_\_\_

**LOTS TO BE TRANSFERRED/EXCHANGED TO:**

   

FUND NUMBER

ACCOUNT NUMBER \_\_\_\_\_

DATE OF ACQUISITION

NUMBER OF SHARES

OR

DOLLAR AMOUNT

  /   /    

\_\_\_\_\_

\$ \_\_\_\_\_

  /   /    

\_\_\_\_\_

\$ \_\_\_\_\_

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\$ \_\_\_\_\_

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\_\_\_\_\_

\$ \_\_\_\_\_

  /   /    

\_\_\_\_\_

\$ \_\_\_\_\_

**LOTS TO BE TRANSFERRED/EXCHANGED TO:**

   

FUND NUMBER

ACCOUNT NUMBER \_\_\_\_\_

DATE OF ACQUISITION

NUMBER OF SHARES

OR

DOLLAR AMOUNT

  /   /    

\_\_\_\_\_

\$ \_\_\_\_\_

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\$ \_\_\_\_\_

  /   /    

\_\_\_\_\_

\$ \_\_\_\_\_

**Important information regarding transfer requests:**

In the event the lots selected above are not sufficient to fulfill your transfer request MFSC will deplete the lots in the order presented above and will then process the remainder of the transfer based on the first in, first out cost basis method.

If you have any questions about this form, please visit [mfs.com/taxcenter](http://mfs.com/taxcenter) or call 1-800-225-2606 any business day.

**Fax** completed form to 1-877-654-3203 or **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.  
Suite 219341  
430 W 7th Street  
Kansas City, MO 64105-1407