

Authorization for Change of Account Registration

Notice: This form is intended for Shareholders who own Morgan Stanley mutual fund shares directly with the fund. If you own shares of a Morgan Stanley mutual fund through a Financial Intermediary, including Morgan Stanley Wealth Management, please contact your Financial Intermediary for instructions on updating your account.

Regular Mail
Morgan Stanley Funds
P.O. Box 219804
Kansas City, MO 64121-9804

Overnight Mail
Morgan Stanley Funds
801 Pennsylvania Ave, Suite 219804
Kansas City, MO 64105-1307

For assistance:
800-869-6397
9:00 a.m. - 5:30 p.m. ET, Mon-Fri

Important Instructions: To use a fillable form in Windows Edge, please click on the three dots at the upper right of the browser and select “Open with Internet Explorer” which will make the fillable sections appear.

Part 1. Reason for Registration Change

☐ Adding a new joint account owner

☐ Death of account owner/trustee

☐ Removing an existing account owner

☐ Converting to a trust account*

☐ Other: please explain*

*Note, these account types may need additional documentation.

Part 2. Redemption Instructions

Account number	Fund Number(s)
Current registration	Phone Number

Part 3. Fund Information

Please provide the dollar amount, number of shares, or the percentage of the Fund(s) to be re-registered from the account referenced in Part 2. Note: If the entire balance should be re-registered, please indicate by entering 100%

Fund	Amount
Fund	Amount
Fund	Amount
Fund	Amount
Fund	Amount

Check One

☐ Dollars ☐ Shares ☐ (%) Percent

☐ Dollars ☐ Shares ☐ (%) Percent

☐ Dollars ☐ Shares ☐ (%) Percent

☐ Dollars ☐ Shares ☐ (%) Percent

☐ Dollars ☐ Shares ☐ (%) Percent

Part 4. Re-Registration Instructions

Please indicate where the Fund(s) referenced in Part 3 should be transferred. Please only choose one.

- ☐ Transfer to an existing account held at Morgan Stanley Account Number _____
- ☐ Transfer to a new account, instructions provided in Part 6 thru 15

Part 5. Authorization

ALL registered owners or authorized signers of the current account provided in Part 2 must sign the below section, include a Medallion Signature Guarantee for each signature, and state the reason for re-registration. **A Medallion Signature Guarantee is always required on this form. This form will not be processed without a Medallion Signature Guarantee. Please attach additional pages for more signers.**

Signer #1 Information

If you are acting on behalf of the owner, please check the appropriate capacity in which you are acting. If not listed, please check "Other" and specify your capacity.

- ☐ Shareholder ☐ Attorney-in-Fact (POA) ☐ Custodian ☐ Executor(trix) ☐ Former Minor ☐ Joint Tenant
- ☐ Trustee ☐ Beneficiary Named on Account ☐ Other, please specify: _____

Reason for Re-Registration*: _____

*If redemption is due to death, the death date must be entered below. Depending on the Decedent's state of residence, an Inheritance Tax Waiver may also be required.

Date of Death: _____

Signature	Date
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Medallion Signature Guarantee

Please see below for more information.

The signature(s) must be guaranteed by an eligible bank, broker/firm, credit union, national securities exchange, registered securities association, clearing agency, or savings association. Medallion Signature Guarantees shall be accepted in accordance with policies established by Morgan Stanley. Notarization by a Notary Public is not acceptable in lieu of a Medallion Signature Guarantee provided by one of the eligible guarantor institutions listed above.

Please attach medallion here

Signer #2 Information (If Applicable)

If you are acting on behalf of the owner, please check the appropriate capacity in which you are acting. If not listed, please check "Other" and specify your capacity.

- ☐ Shareholder ☐ Attorney-in-Fact (POA) ☐ Custodian ☐ Executor(trix) ☐ Former Minor ☐ Joint Tenant
- ☐ Trustee ☐ Beneficiary Named on Account ☐ Other, please specify: _____

Reason for Re-Registration*: _____

*If redemption is due to death, the death date must be entered below. Depending on the Decedent's state of residence, an Inheritance Tax Waiver may also be required.

Date of Death: _____

Signature	Date
-----------	------

Medallion Signature Guarantee

Please see below for more information.

The signature(s) must be guaranteed by an eligible bank, broker/firm, credit union, national securities exchange, registered securities association, clearing agency, or savings association. Medallion Signature Guarantees shall be accepted in accordance with policies established by Morgan Stanley. Notarization by a Notary Public is not acceptable in lieu of a Medallion Signature Guarantee provided by one of the eligible guarantor institutions listed above.

Please attach medallion here

Part 6. Type of Account (All registrants must sign in Part 16) DO NOT USE FOR IRA ACCOUNTS

Every person to be registered on the account must provide all of the requested information. For all accounts, except for certain entities, the first individual listed will be named first in the account registration. This individual's Social Security number will be used for tax-reporting purposes, and his or her address will be used as the primary address for any mailings unless otherwise specified in Part 7.

☐ Individual account owned by one person. Note: This form is not to be used to establish an Individual Retirement Account (IRA). Please contact us at the number listed below for an Individual Retirement Account (IRA) Application or for assistance in establishing a Transfer on Death account. Transfer to a new account, instructions provided in Part 6 thru 15.

☐ Joint account owned by two or more people. Joint accounts will be registered as "joint tenants with rights of survivorship" unless you indicate otherwise below. You should verify that this registration is valid in your state.

If joint, please indicate

☐ Joint Tenants with Rights of Survivorship

☐ Tenants in Common

☐ Other: Please Specify: _____

Owner's First Name	Middle Initial	Last Name
Owner's Social Security Number		Owner's Date of Birth

Joint Owner's First Name	Middle Initial	Last Name
Joint Owner's Social Security Number		Joint Owner's Date of Birth

If more than two joint registrants, please attach separate sheets with full name, social security number, and birth date for each.

Part 6A. Uniform Gift or Transfer to Minors/Account Administered by Guardian or Conservator

Account established as an irrevocable gift or transfer of assets to a minor. The assets in this account may only be used for the benefit of the minor. An adult custodian administers the account until the minor reaches the age of majority for the state under whose law the gift or transfer is being made.

State under whose law the gift or transfer is being made: _____

Adult Custodian's First Name	Middle Initial	Last Name
Adult Custodian's Social Security Number		Adult Custodian's Date of Birth

Minor's First Name	Middle Initial	Last Name
Minor's Social Security Number		Minor's Date of Birth

If applied for, provide copy of application for social security number or taxpayer identification number.

Account administered by a court-appointed guardian or conservator.

Guardian's First Name	Middle Initial	Last Name
Guardian's Social Security Number		Guardian's Date of Birth

Ward's First Name	Middle Initial	Last Name
Ward's Social Security Number		Ward's Date of Birth

Part 6B. Corporation, Trust, Partnership or Other

For trusts and organizations, the Social Security number or individual Taxpayer ID number listed in this section will not be used for tax reporting. The first mailing address listed will be the primary address for any mailings unless otherwise specified in 'Part 7: Registrant Mailing Address'. All current trustees and executors must complete and sign this form.

Name of Trust, corporation, partnership or other
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☐ Estate

☐ Government Entity

Note: If this account is being opened as any of the legal entities below (e.g., corporation, a limited liability company, a general partnership, statutory trust, a non-profit or similar business entity), please fill out the Beneficial Ownership Certification form. Not including the Beneficial Ownership Certification Form will cause this application to be rejected.

☐ Trust (Attach a copy of the first and last page of the trust agreement.) Date of Trust agreement:

☐ Corporation (Attach a copy of the certified articles of incorporation or business license.)

Check one: ☐ C Corporation ☐ S Corporation

☐ Partnership (Attach a copy of the partnership agreement.)

☐ Foundation

☐ Other: Please Specify: _____

Social Security Number	Or Tax ID Number	
Trustee or Authorized Signer's First name	Middle Initial	Last Name
Trustee or Authorized Signer's Social Security Number	Trustee or Authorized Signer's Date of Birth	
Trustee or Authorized Signer's First name	Middle Initial	Last Name
Trustee or Authorized Signer's Social Security Number	Trustee or Authorized Signer's Date of Birth	

If more than two trustees/authorized signers, please attach separate sheets with full name, social security number, birth date, and address for each. If mailing address is a post office box, a street address is also required by the USA Patriot Act.

Part 7. Registrant Mailing Address (APO and FPO addresses will be accepted)

Address		
City	State	Zip
Email Address	Home Phone	Mobile Phone

If mailing address is a post office box, a street address is also required by the USA Patriot Act. To ensure timely processing of your account, please provide your daytime phone number.

Street address (if different)		
City	State	Zip

Joint Registrant Street Address (Required if different than Registrant address above)

Street address (if different)		
City	State	Zip

☐ Monthly Account Statements* ☐ Daily Account Activity Confirmations*

*Not available for individual and joint account types

Part 8. Interested Party Option

In addition to the confirmations and investment statements sent to my/our registered address, I/we hereby authorize the Fund to mail confirmations and investment statements to the name and address provided below.

☐ Monthly Account Statements* ☐ Daily Account Activity Confirmations*

*Not available for individual and joint account types

Name		
Address		
City	State/Province	Zip/Postal Code
Country	Phone Number	Email Address

Part 9. Cost Basis Election (Required, select only one option)

As a result of the Economic Stabilization Act of 2008, mutual fund companies are required to provide cost basis reporting to both you and the IRS. Morgan Stanley will report the cost basis on the sale of any shares purchased after the effective date of January 1, 2012. When filing your tax return, you will be required to use the cost basis reported on your Form 1099-B.

If you do not elect a cost basis reporting method below, the Fund will use Average Cost as the default method. This election is good for all future transactions unless you either revoke or change the election. You may always change your cost basis method on future purchases, no matter what cost basis method you choose.

Revocation: if you elect Average Cost or the default to Average Cost was applied, you have the option to revoke this election in writing, prior to the first redemption, transfer, or exchange of any covered shares from the fund in your account. If a change request is received after the first redemption, transfer, or exchange, those shares purchased under the Average Cost method must retain the basis of Average Cost. IRS regulations do not allow the change of a cost basis election after a sale of shares has been executed.

The election you make will apply to all funds in this account. There are several choices for cost basis depletion. The tax implications may be different for each. Please consult with your Tax Advisor and/or Financial Professional before making important tax elections for your account.

☐ Average Cost (ACST) Fund Default

☐ First in First Out (FIFO)

☐ Last in First Out (LIFO)

☐ High Cost First Out (HIFO)

☐ Low Cost First Out (LOFO)

☐ Loss/Gain Utilization

☐ Specific Lot Identification (SLID) _____
(SLID) Secondary Reporting Method (ACST is not a valid secondary method)

You should consult with a tax advisor, CPA, Financial Planner, or Investment Manager to decide what option is best for you.

Part 10. Financial Intermediary Information (To be completed by your financial intermediary)

By designating a financial intermediary or financial advisor, I hereby authorize the Fund, its Transfer Agent and its Principal Underwriter to accept instructions from and transmit information (such as statements) to such designee concerning my account. Please note: Morgan Stanley Distribution, Inc. strongly encourages the use of a financial advisor when purchasing shares of Morgan Stanley Funds. If you do not designate a financial intermediary below, all transactions placed directly with the Fund are deemed to be unsolicited orders. If you do not designate an advisor, sales charges and fees will be paid to Morgan Stanley Distribution, Inc., the Fund’s underwriter and distributor. Canadian residents are only permitted to purchase shares pursuant to this application through Morgan Stanley Distribution, Inc. and not through a financial advisor or other intermediary.

Firm Name	E-mail Address	
Registered Rep. Name	Representative’s Assistant	
Branch Address		
Registered Rep. Phone Number	Fax Number	
Firm Number	Branch Number	Registered Rep. Number

Part 11. Automatic Investment Plan (Optional)

This option allows you to automatically invest a minimum of \$100 per fund from your bank account into your Morgan Stanley account on a regular basis.

This Account Application must be preceded or accompanied by the appropriate prospectus(es) or summary prospectus(es). Please refer to www.msim.com or contact customer service to obtain the appropriate fund number(s). Be sure the funds you want are currently open to new investors. Please note that we are not able to accept cash, money orders or traveler's checks. There is a 10-day holding period placed on investments purchased via check.

Before investing, investors should consider carefully the investment objectives, risks, charges and expenses of a mutual fund. This and other important information is contained in the prospectus or summary prospectus, which can be obtained from a financial advisor. Prospective investors should read the prospectus carefully before investing.

My investment will begin in the month of _____ and occur on/about the _____ day of each month.

1.	Invest \$	into fund #
2.	Invest \$	into fund #

Part 12. Bank Wires/Electronic Funds Transfer (Optional)

☐ Checking ☐ Savings

You must attach a voided check or deposit slip. They must be preprinted; starter or counter checks will not be accepted. Your request cannot be processed without it.

At least one name in the account registration needs to match a name on the check. If not, a Medallion Signature Guarantee is needed.

Please attach a voided check here

Part 13. Rights of Accumulation Discount/Statement of Intention (Optional)

You may reduce your class A sales charge by establishing a statement of intention. To qualify for a reduced sales charge on purchases of class A shares, I agree to the Statement of Intention and escrow agreement conditions set forth in the Fund’s prospectus. Although I am not obligated to do so, I intend to invest an aggregate amount which, together with investments made to Morgan Stanley Funds (excluding reinvested dividends, capital gains or appreciation), will equal or exceed the amount selected below. If during the 13-month period you redeem any of the shares that you purchased pursuant to the statement of intention, the value of the redeemed shares will not be included for purposes of satisfying your statement of intention.

This option is available for Class A shares of Morgan Stanley Multi-Class Funds and/or shares of Morgan Stanley Funds sold with a front-end sales charge. May not apply to all funds, refer to the fund prospectus.

☐ \$50,000 ☐ \$100,000 ☐ \$250,00 ☐ \$500,000 ☐ \$1,000,000 or more

Part of my shares will be held in escrow. If I do not invest the amount indicated, within 13 months, Morgan Stanley can redeem the escrowed shares to satisfy the sales charge.

My other Morgan Stanley accounts for Rights of Accumulation or Letter of Intent (List others on a separate sheet):

Fund Number	Account Number
Fund Number	Account Number

Please include a copy of your most recent statement for accounts listed above.

Part 14. Dividend and Capital Gain Distributions (Required)

Your selection will apply to all funds opened through this form, and you may change your distribution options at any time. If you don’t select an option, all distributions (dividends and capital gains) will be reinvested in additional shares of the same fund.

Reinvested in additional shares of the same fund	<input type="checkbox"/> Capital Gains	<input type="checkbox"/> Dividends
Check to address of record (min. \$10)	<input type="checkbox"/> Capital Gains	<input type="checkbox"/> Dividends
Electronic transfer to bank in Part 12	<input type="checkbox"/> Capital Gains	<input type="checkbox"/> Dividends

Part 15. Telephone Privileges

Your account will automatically have the telephone privileges described in the Fund’s prospectus. You may decline these privileges by checking the box below or submitting a request in writing. If you do not decline the telephone redemption and/or exchange privileges, Morgan Stanley and/or its service providers and affiliates shall not be held responsible for the authenticity of instructions received by telephone, which shall be recorded, reasonably believed to be genuine, and you will bear the risk of possible losses resulting from an unauthorized and fraudulent telephone transaction.

If you do not want to redeem or exchange your shares over the telephone, check here ☐ and you may redeem only by written instructions.

Part 16. Signatures of All Holders and Taxpayer Certification

I (we) acknowledge that purchasing shares of the Fund may subject the purchaser to U.S. taxation (the amount of any tax liability will depend on a number of factors) and the purchaser should obtain its own advice as to whether it will be liable for any U.S. tax as a result of each purchase).

- The undersigned certify that I (we) have full authority and legal capacity to purchase and redeem shares of the Fund and affirm that I (we) have received a current Prospectus of Morgan Stanley Institutional Fund, Inc. and/or Morgan Stanley Institutional Fund Trust, and/or Morgan Stanley Retail Funds and agree to be bound by its terms.*
- My purchase order will not be processed unless this account application and purchase payment are received in good order; the Fund(s) service agent, DST Asset Manager Solutions, Inc. (DST AMS), will attempt to collect the missing information required by either contacting me or my financial advisor.
- If DST AMS is not able to obtain the information in a reasonable time frame, I understand that the application will be rejected.
- If DST AMS obtains the required information, I understand that my investment will be accepted and will receive the price as of the next calculated net asset value after all the information is received.
- I (we) acknowledge that neither I (we) nor any other person who has an ownership interest in or authority over this Account knowingly owns, operates or is associated with a business that uses, at least in part, the Internet to receive or send information that could be used in placing, receiving or otherwise knowingly transmitting a bet or wager. (This applies to non-individual entities, such as Trusts, Corporations, Partnerships, Limited Liability Companies, Nonprofit Organizations or Other Incorporated or Non-Incorporated entities).
- I acknowledge that DST AMS will attempt to verify my identity within a reasonable time frame after this application is received. If DST AMS is unable to verify my identity, I understand that DST AMS reserves the right to restrict additional transactions and/or liquidate my account at the next calculated net asset value after the account is closed (minus any applicable sales charges and/or tax

Certification under interest and dividend compliance act of 1983

As required by law and under penalties of perjury, I certify that I am a U.S. citizen, or resident alien, and (1) the Social Security or other taxpayer identification number (TIN) provided on this application is my correct TIN, and (2) currently I am not under IRS notification that I am subject to backup withholding. (Please strike out clause (2) if you are currently under notification.) (3) I am a U.S. person (including a U.S. resident alien) and, (4) The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. If a TIN is not supplied, the Fund withholds 30% of reportable dividends or interest and/or redemptions and your account may be closed, unless you are not a U.S. citizen or resident.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Application must be completed and will be verified as required by the USA Patriot Act. If not completed, this application will be returned.

Check appropriate box for federal tax classification (REQUIRED):

☐ U.S. Citizen (including U.S. resident alien)

☐ Trust/Estate

☐ Exempt Payee

☐ Limited Liability Company: Enter tax classification (C=C corporation, S=S corporation, P=partnership): _____

☐ C Corporation

☐ S Corporation

☐ Other _____

Authorized Signer	Date
Authorized Signer	Date

U.S. Customer Privacy Notice

FACTS	WHAT DOES MSIM DO WITH YOUR PERSONAL INFORMATION?	
WHY?	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.	
WHAT?	The types of personal information we collect and share depend on the product or service you have with us. This information can include: <ul style="list-style-type: none"> • Social Security number and income • Investment experience and risk tolerance • Checking account information and wire transfer instructions 	
HOW?	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons MSIM chooses to share; and whether you can limit this sharing.	

REASONS WE CAN SHARE YOUR PERSONAL INFORMATION	DOES MSIM SHARE?	CAN YOU LIMIT THIS SHARING?
For our everyday business purposes —such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes —to offer our products and services to you	Yes	No
For joint marketing with other financial companies	No	We don't share
For our affiliates' everyday business purposes —information about your transactions and experiences	Yes	No*
For our affiliates' everyday business purposes —information about your creditworthiness	Yes	Yes*
For our affiliates to market to you	Yes	Yes*
For nonaffiliates to market to you	No	We don't share

TO LIMIT OUR SHARING	Call toll-free: (844) 312-6327 or email: msimprivacy@morganstanley.com . Please include your name, address, and first three digits (and only the first three digits) of your account number in the email. If we serve you through an investment professional, please contact them directly. Specific Internet addresses, mailing addresses, and telephone numbers are listed on your statements and other correspondence. Please note: If you are a new customer, we can begin sharing your information 30 days from the date we sent this notice. When you are no longer our customer, we continue to share your information as described in this notice. However, you can contact us at any time to limit our sharing.
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QUESTIONS?	Call toll-free: (844) 312-6327 or email: msimprivacy@morganstanley.com
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WHO WE ARE	
Who is providing this notice?	Morgan Stanley Investment Management Inc. and its investment management affiliates ("MSIM") (See Affiliates definition below.)

WHAT WE DO	
How does MSIM protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings. We have policies governing the proper handling of customer information by personnel and requiring third parties that provide support to adhere to appropriate security standards with respect to such information.
How does MSIM collect my personal information?	We collect your personal information, for example, when you <ul style="list-style-type: none"> • open an account or make deposits or withdrawals from your account • buy securities from us or make a wire transfer • give us your contact information We also collect your personal information from others, such as credit bureaus, affiliates, or other companies.
Why can't I limit all sharing?	Federal law gives you the right to limit only <ul style="list-style-type: none"> • sharing for affiliates' everyday business purposes—information about your creditworthiness • affiliates from using your information to market to you • sharing for nonaffiliates to market to you State laws and individual companies may give you additional rights to limit sharing. (See below for more on your rights under state law.)
What happens when I limit sharing for an account I hold jointly with someone else?	Your choices will apply to everyone on your account

DEFINITIONS	
Affiliates	<p>Companies related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> • <i>Our affiliates include registered investment advisers such as Eaton Vance Management and Calvert Research and Management, registered brokerdealers such as Morgan Stanley Distribution, Inc. and Eaton Vance Distributors, Inc., and registered and unregistered funds sponsored by Morgan Stanley Investment Management such as the registered funds within Morgan Stanley Institutional Fund, Inc. (together, the "Investment Management Affiliates"); and companies with a Morgan Stanley name and financial companies such as Morgan Stanley Barney LLC and Morgan Stanley & Co. (the, "Morgan Stanley Affiliates").</i>
Nonaffiliates	<p>Companies not related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> • <i>MSIM does not share with nonaffiliates so they can market to you.</i>
Joint marketing	<p>A formal agreement between nonaffiliated financial companies that together market financial products or services to you.</p> <ul style="list-style-type: none"> • <i>MSIM does not jointly market.</i>

OTHER IMPORTANT INFORMATION

*** PLEASE NOTE: MSIM does not share your creditworthiness information or your transactions and experiences information with the Morgan Stanley Affiliates, nor does MSIM enable the Morgan Stanley Affiliates to market to you. Your opt outs will prevent MSIM from sharing your creditworthiness information with the Investment Management Affiliates and will prevent the Investment Management Affiliates from marketing their products to you.**

Vermont: Except as permitted by law, we will not share personal information we collect about Vermont residents with Nonaffiliates unless you provide us with your written consent to share such information.

California: Except as permitted by law, we will not share personal information we collect about California residents with Nonaffiliates and we will limit sharing such personal information with our Affiliates to comply with California privacy laws that apply to us.