## Transfer Due to Death of Custodian Form



Monday - Friday 8:00 a.m. to 8:00 p.m. ET

www.troweprice529.com

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- Use this form to change the Custodian of an Account due to the death of the original Custodian.
- Complete this form for each new Custodian.

#### • Successor Custodian on file:

If the Custodian of an Account is deceased, and there is a Successor Custodian on file, the Successor Custodian requests the transfer of ownership. Please include a death certificate for the deceased Custodian if one is not already on file. **Note:** If your Account is an UGMA/UTMA Account, the Successor Custodian is only acting in this capacity until the Beneficiary has reached the age of termination.

# No Successor Custodian on file for an UGMA/UTMA Account: If the Custodian of an UGMA/UTMA Account is deceased, and a Successor Custodian was not designated, the executor of the decedent's estate is responsible

for naming a new Custodian. Please include a death certificate for the deceased Custodian as well as documentation appointing the executor.

#### No Successor Custodian on file for a minor-owned Account:

If the Custodian of a minor-owned Account (not funded with an UGMA/UTMA) is deceased, and a Successor Custodian was not designated, the parent or legal

guardian of the minor Account Owner is responsible for naming a new Custodian. Please include a death certificate for the deceased Custodian as well as documentation of the relationship of the parent/legal guardian to the minor (e.g., birth certificate, guardianship appointment, etc.).

- If the new Custodian does not already have an Account for the Beneficiary, the new Custodian must establish an Account.
- Type in your information and print out the completed form, or print clearly, preferably in capital letters and black ink.

Capitalized terms not otherwise defined on this form have the meanings set forth in the Plan Disclosure Document.

Deceased Custodian (First name)			
Deceased Custodian (Last name)			
Last 4 Digits of Social Security Number	OR	Account Number	
Beneficiary (First name)			
Beneficiary (Last name)			
Transfer Instructions			
Transfer to Successor Cus	odian — Section 3		
	ed by Executor (UGMA/UTMA	Account) Continu	

ΤО

DEATH CUST

TRANS DUE

### 3. Transfer to Successor Custodian

Α.	Successor Information					
	Successor Custodian (First name)  (M.I.)					
	Successor Custodian (Last name)					
	Please check one box:					
	The new Custodian already has an Account for this Beneficiary. (Please provide Account number.)					
	Existing Account Number					
	A new Account will be established for this Beneficiary. (Please include an Account Application with this form.)					
В.	Investment Instructions					
	If an option is not selected below, the transfer amount will be allocated according to the new Account's allocation for future contributions.					
	Check one.					
	I want to transfer the assets in-kind. (An "in-kind" transfer will move the assets to the receiving Account without a change in the currently held investment(s) or the allocation for future contributions.)					
	I want to transfer and allocate the assets according to the new Account's allocation for future contributions. (By selecting this option, the current investments will be liquidated, and the funds will be deposited into the new Account according to the allocation for future contributions on the new Account.)					
Na	aming of New Custodian by Executor (UGMA/UTMA Account with no Successor on file)					
	Executor Information					
Please remember to include the documentation appointing the executor of the decedent's estate.						
	Executor's First Name (M.I.)					
	Executor's Last Name					
В.	New Custodian Information					
	New Custodian's First Name (M.I.)					
	New Custodian's Last Name					

Α.	Parent/Legal Guardian Information									
	Please remember to include the documentation validating the parent or legal guardian of the minor Account Owner.									
	Parent/Legal Guardian's First Name									
	Parent/Legal Guardian's Last Name									
В.	New Custodian Information									
	New Custodian's First Name									
	New Custodian's Last Name									
	Please check one box:									
	The new Custodian already has an Account for this Beneficiary. (Please provide Account number.)									
	Existing Account Number									
	A new Account will be established for this Beneficiary. (Please include an Account Application with this form.)									
В.	Investment Instructions									
	If an option is not selected below, the transfer amount will be allocated according to the new Account's allocation for future contributions.									
	Check one.									
	I want to transfer the assets in-kind. (An "in-kind" transfer will move the assets to the receiving Account without a chang the currently held investment(s) or the allocation for future contributions.)									
	I want to transfer and allocate the assets according to the new Account's allocation for future contributions. (By selecting									

### 7. Signature — YOU MUST SIGN BELOW

The Successor Custodian or the new Custodian named by the executor or parent/legal guardian must sign in part A.

As the Successor Custodian, I certify that the information provided in this form is true and complete in all respects. I agree to accept the transfer of assets from the deceased Custodian's Account to an Account for which I am Custodian.

A.	uccessor Custodian	
	SIGNATURE	
	gnature of Successor Custodian Date (mm-dd-yyyy)	
The	xecutor of the deceased Custodian's estate must sign in part B, if applicable.	
	e executor of the deceased Custodian's estate, I certify that the information provided in this form is true and complete in all cts. I certify that I am authorized to act on behalf of the deceased Custodian's estate.	
В.	xecutor of the decedent's estate	
	SIGNATURE	
	gnature of executor of the decedent's estate  Date (mm-dd-yyyy)	
Τ.		
The	arent/legal guardian of the minor Account Owner of the minor-owned Account must sign in part C, if applicable.	
	e parent/legal guardian of the minor Account Owner, I certify that the information provided in this form is true and complete cts. I certify that I am authorized to act on behalf of the minor Account Owner as the individual's parent or legal guardian.	in all
C.	arent or Legal Guardian of minor Account Owner	
	SIGNATURE DE L'ALTERNATURE	
	gnature of Parent/Legal Guardian  Date (mm-dd-yyyy)	
DIa	se only fill out below if you will need your original legal documents returned: (Optional)	
	se only ini out below it you will need your original legal documents returned. [Optional]	
Pag	ent First Name	(M.I.)
nec		(IVI.I.)
нес	ent Last Name	
Mai	g Address	
City	State Zip Code	