

2. Current 529 Program Manager or ESA Custodian (Financial Institution)

The account from which you are moving assets must have the same account owner name as well as Social Security number or taxpayer identification number as your account with the Brighter Future Advisor Plan.

Account Number of 529 Plan or ESA

Name of Current Plan Manager or Custodian (usually a financial institution)

Address

City State Zip

Contact Person Telephone Number

Check this box if the beneficiary on this account differs from the beneficiary indicated in Section 1.

3. Instructions to Your Current 529 Program Manager or ESA Custodian

The assets described below must all be held by the financial institution indicated in Section 2. If you are moving assets from more than one institution, fill out a separate form for each. Your rollover proceeds will be invested according to the allocation instructions on file at the time the assets are received. If you have not established an account, they will be invested according to what you choose on the Account Application.

(Check one.)

A. Rollover all of the assets in my account. (To list more than two accounts, use a separate sheet.)

Account Number Estimated Account Value

Account Number Estimated Account Value

B. Rollover a portion of the assets as directed below. (To list more than three options, use a separate sheet.)

Account Number Name of Investment Portfolio All or Dollar Amount

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Account Number Name of Investment Portfolio All or Dollar Amount

4. Signature — YOU MUST SIGN BELOW

If your current plan manager or custodian requires a Signature Guarantee, do not sign below until you are in the presence of an authorized officer of a bank, broker, or other qualified financial institution. The guaranteeing institution is financially responsible if the signature isn't genuine. A notary public cannot provide a Signature Guarantee, nor can you guarantee your own signature. The lack of a required Signature Guarantee could delay this rollover.

I certify that I have read and understand, consent and agree to all of the terms and conditions of the Brighter Future Advisor Plan Program Description and Participation Agreement, and understand the rules and regulations governing rollover contributions from other 529 plans and education savings accounts. I understand that IRS regulations permit only one such rollover for the same beneficiary in a 12-month period for 529 accounts.

➤ SIGNATURE _____
Signature of Account Owner

□□ – □□ – □□□□
Date (mm/dd/yyyy)

Signature Guarantee – IF APPLICABLE

➤ SIGNATURE _____
Signature Guarantee

Title


Name of Institution

□□ – □□ – □□□□
Date (mm/dd/yyyy)

Authorized Officer to Place Stamp Here

5. Authorization and Acceptance *(No Account Owner action is necessary in this section.)*

Brighter Future Advisor Plan hereby agrees to accept the rollover described herein and upon receipt will deposit the proceeds in the account established on behalf of the individual named herein.



Authorized Signature, Brighter Future Advisor Plan

INSTRUCTIONS TO CUSTODIAN

Send redemption proceeds by check to **Brighter Future Advisor Plan, P.O. Box 219700, Kansas City, MO 64121-9700**. Make the check payable to: **Brighter Future Advisor Plan**. Include the account owner name and Brighter Future Advisor Plan account number (if provided) on the check and enclose a statement that shows the principal and earnings in the account.