

## Learning Quest Advisor Incoming Rollover Form



Complete this form to initiate a direct rollover from another 529 college savings plan (529 Plan) or an Education Savings Account (ESA) to an existing Account in Learning Quest Advisor.

Forms can be downloaded from our website at **learningquest.com**, or you can call us to order any form- or request assistance in completing this form - at **1-877-882-6236**. If you have requested this form from your online account, certain fields are prefilled based on information that you've already enter. Please complete the remaining fields of this form before mailing.

Type in your information and print out the completed form, or print clearly, preferably in capital letters and black ink. **Mail the form to the address below.** Do not staple.

Return this form and any other required documents to:

**Learning Quest Advisor  
P.O. Box 2947  
Shawnee Mission, KS 66201-1347**

Overnight address:

**Learning Quest Advisor  
1001 E 101st Terrace, Suite 200  
Kansas City, MO 64131**

Or fax this to: **1-617-559-8904**

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### Helpful Tips:

- You may roll over assets for the same Designated Beneficiary once every 12 months. You may roll over assets at any time if you name a new Designated Beneficiary who is an eligible family member of the current Designated Beneficiary of the 529 Plan Account. You may roll over proceeds from an ESA to a 529 Plan Account. The Designated Beneficiary of the ESA must be both the Designated Beneficiary and the Account Owner of the 529 Plan Account.
- Registrations must match from the current custodian's (currently where the funds are invested) account to this Learning Quest Advisor account. For example, individual to individual, trust to trust, or UGMA to UGMA. If the registration is changing with this rollover request from individual to joint or joint to individual, an additional signature is required in **Section 5**.
- Minor Owned accounts (Responsible Individual accounts) and pre-paid plans are initiated by your current 529 firm by a withdrawal to yourself and then rolled over to a Learning Quest Advisor account using an Additional Contribution Form.
- Check with your current custodian to see if they will accept our form or require you to liquidate the assets prior to rollover. Some plans require their own paperwork to be completed.
- Verify the address of the current custodian in **Section 3**. Please reach out and verify where outgoing rollover paperwork is received, it may be different than the address on the statement.
- If the current custodian requires a Medallion Signature Guarantee, you will need to obtain it in **Section 5**.
- Make sure to include a recent 529 account statement.
- There can be possible state tax implications such as deduction recapture if rolling over from a different state. Please consult a tax advisor to discuss your situation.
- Completing the Rollover process can take 3-4 weeks. If a withdrawal is needed in the next 30 days, complete it first before initiating the rollover request.
- If you are making recurring contributions at the current custodian, please stop further contributions.



\* LEARNING QUEST ADV ROLLOVER \*

## 1. Rollover type

- ☐ Rollover from 529 Plan
- ☐ Rollover from ESA
- ☐ Transfer from another Learning Quest Account in a different share class or from another Kansas 529 Plan Account.
- Note:** This option is considered an exchange and will count towards your twice per calendar year exchange limit.

## 2. Learning Quest Advisor Account information

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Account Number (If you have not established an Account, also complete and enclose an **Account Application**.)

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Social Security Number of the Account Owner

[illegible]

Name of Account Owner/Responsible Individual/Custodian (first, middle initial, last) or Entity

[illegible]

Name of Joint Account Owner (first, middle initial, last)

$$\boxed{\phantom{0}}\boxed{\phantom{0}}\boxed{\phantom{0}} - \boxed{\phantom{0}}\boxed{\phantom{0}}\boxed{\phantom{0}} - \boxed{\phantom{0}}\boxed{\phantom{0}}\boxed{\phantom{0}}\boxed{\phantom{0}}$$

Telephone Number (In case we have a question about your Account.)

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Telephone Number

[illegible]

Name of Designated Beneficiary (first, middle initial, last)

-  -

Designated Beneficiary Social Security Number

### 3. Current 529 Plan 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 as your Learning Quest Advisor Account. Please contact your current 529 Plan Manager or Custodian for the proper mailing address.

**NOTE: INCLUDE A COPY OF A RECENT ACCOUNT STATEMENT.**

[illegible]

Account Number of 529 Plan or ESA

[illegible]

Name of Current 529 Plan Manager or Custodian (Usually a financial institution)

[illegible]

Name of 529 Plan (If applicable. This is the name of your current 529 program.)

[illegible]

Address

[illegible]

City

11

State

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Zip Code

\_\_\_\_\_

Contact Person

$$\boxed{\phantom{0}}\boxed{\phantom{0}}\boxed{\phantom{0}} - \boxed{\phantom{0}}\boxed{\phantom{0}}\boxed{\phantom{0}} - \boxed{\phantom{0}}\boxed{\phantom{0}}\boxed{\phantom{0}}\boxed{\phantom{0}}$$

Telephone Number

- ☐ Check this box if the Designated Beneficiary on this account differs from the Designated Beneficiary indicated in **Section 2**.

#### 4. Instructions to current 529 Plan Manager or ESA Custodian

I authorize you to liquidate the investments specified below and rollover the proceeds to Learning Quest Advisor. Please provide the contributions and earnings breakdown for the rollover amount so the entire amount is not treated as earnings.

**Note:** The assets described below must all be held by the Financial Institution indicated in **Section 3**. Your rollover proceeds will be invested according to the standing allocation instructions on file at the time the assets are received.

Check one.

A. ☐ **Roll over all of the assets in my account to Learning Quest Advisor.** (To list more than two Accounts, use a separate sheet.)

Account Number

\$   
Estimated Account Value

Account Number

\$   
Estimated Account Value

B. ☐ **Roll over a portion of the assets as directed below to Learning Quest Advisor.** (To list more than two Accounts, use a separate sheet.)

Account Number

Name of Investment Portfolio

\$   
Amount

Account Number

Name of Investment Portfolio

\$   
Amount

#### 5. Signature — YOU MUST SIGN BELOW — Original Signature(s) is required. Electronic signature will not be accepted.

- Check with your current plan to see if you need a medallion signature guarantee, or additional documentation or forms to facilitate the transfer. If required, provide your signature guarantee below.
- If changing the Beneficiary (Section 3), I (We) certify that the new Beneficiary is a "member of the family" of the current Beneficiary, as defined in the Learning Quest Advisor Handbook, and as described in Section 529 of the Internal Revenue Code.
- It is account owner's responsibility to ensure a breakdown of the Principal/Earnings is supplied to the Learning Quest Advisor by the current 529/ESA plan. Until that information is received the rollover assets will be considered 100% earnings.
- All Learning Quest Advisor Account Owners must sign as their names appear in **Section 2**. If the Account Owner is a minor, the Custodian or Responsible Individual must sign this form.

I certify that I have read and understand, consent, and agree to all of the terms and conditions of the Learning Quest Advisor Handbook, 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 Designated Beneficiary in a 12-month period for 529 Plan accounts.

SIGNATURE

Signature of Account Owner/Responsible Individual

—  —   
Date (mm/dd/yyyy)

SIGNATURE

Signature of Joint Account Owner

—  —   
Date (mm/dd/yyyy)

## Signature Guarantee — IF APPLICABLE

A signature guarantee is a warranty by the guarantor that the signature is genuine and that the person signing is competent and authorized to sign. The signature(s) must correspond in every particular, without alteration, with the name(s) printed on the current account registration. Each signature must be guaranteed by a participant in a Securities Transfer Association Signature Guarantee Program. Many domestic banks, trust companies, credit unions, brokers, dealers, national securities exchanges, registered securities associations, clearing agencies and savings associations participate in such programs. Each guarantee must be an original ink stamp that states "Signature Guaranteed/Medallion Guaranteed" and must be signed on behalf of the guarantor by an authorized person.

**Note: Acknowledgement of signature by a notary public is NOT acceptable. Please affix signature guarantee ink stamp below with appropriate signature, title of officer and date.**

SIGNATURE
Signature Guarantor
Title
Name of Institution
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Date (mm/dd/yyyy)

**Authorized Officer to place stamp here**

### 6. Authorization and acceptance *(No Account Owner action is necessary in this section.)*

The State of Kansas sponsors Learning Quest Advisor, a college savings program authorized under Section 529 of the Internal Revenue Code. The State of Kansas has appointed American Century Investment Management Inc. (ACIM) as the program manager of Learning Quest Advisor. ACIM has delegated to American Century Services, LLC (ACS LLC) certain administrative duties, including maintaining account records and accepting transfers. Accordingly, on behalf of ACIM, ACS LLC hereby certifies that the Account Owner named on this form has established a Learning Quest Advisor Account for the benefit of the named Designated Beneficiary and is willing to accept the transfer requested on the enclosed form.

Send withdrawal proceeds by check to **Learning Quest Advisor, P.O. Box 2947, Shawnee Mission, KS 66201-1347.**

Make the check payable to **Learning Quest Advisor**. Include the Account Owner name and the Learning Quest Advisor Account number *(if provided)* on the check.

Please furnish a breakdown showing the portion of the proceeds attributable to contributions and the portion attributable to earnings with the check. If you have any questions, please contact a Learning Quest Advisor Specialist at **1-877-882-6236**.

American Century Services, L.L.C.

As Agent for American Century Investment Management Inc., Program Manager



Greg Barner  
VP, Client Operations & Chief Privacy Officer  
American Century Services, LLC