College SAVE Plan

College SAVE™

Bank of North Dakota's 529 Plan

Incoming Rollover Form

- Print clearly, preferably in capital letters and black ink.
- Complete this form to initiate a direct rollover from another 529 plan or an education savings account (ESA) to an existing account in College SAVE. (If you have not established an account, you must also complete and enclose an **Enrollment Form**.)

Forms can be downloaded from our website at **www.collegesave4u.com**, or you can call us to order any form — or request assistance in completing this form — at **1.866.SAVE.529 (866.728.3529)** any business day from 8 a.m. to 8 p.m. ET.

Return this form to:

For overnight delivery or registered mail, send to:

College SAVE P.O. Box 219781 Kansas City, MO 64121-9781 College SAVE 1001 E 101st Terrace, Suite 200 Kansas City, MO 64131

1. College SAVE Account Information

Account Number (If you have not established an account, also complete and enclose an Enrollment Form.)	Social Security Number or Taxpayer Identification Number
Name of Account Owner (first, middle initial, last)	
Daytime Telephone Number	Evening Telephone Number
Name of Designated Beneficiary (first, middle initial, last)	
Designated Beneficiary Social Security Number or Taxpayer Identification Number	

All

Dollar Amount

The assets described below must all be held by the financial institution indicated in Section 2 . If you are moving assets from moone institution, fill out a separate form for each. Your rollover proceeds will be invested according to the allocation instructions of at the time the assets are received. If you have not established an account, they will be invested according to what you choose of Enrollment Form.										7	1	1						ПГ									1			
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Signature — YOU MUST SIGN BELOW

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

I certify that I have read the College SAVE Plan Disclosure Statement 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 designated beneficiary in a 12-month period for 529 accounts.

▶SIGNATURE	
Signature of Account Owner	Date (mm/dd/yyyy)
Medallion Signature Guarantee — IF APPLICABLE	
► SIGNATURE	Authorized Officer to Place Stamp Here
Signature of Guarantor	Authorized Officer to Frace Stamp fiere
Title	
Name of Institution	
Date (mm/dd/yyyy)	
Authorization and acceptance (No Participant action is necessary in	n this section.)
College SAVE hereby agrees to accept the rollover described herein and upor established on behalf of the individual named herein.	receipt will deposit the proceeds in the account

INSTRUCTIONS TO CUSTODIAN

Send redemption proceeds by check to College SAVE, P.O. Box 219781, Kansas City, MO 64121. Make the check payable to College SAVE. Include the Participant's Social Security Number or individual taxpayer identification number on the check and enclose a statement that shows the principal and earnings in the account.

Authorized signature, College SAVE

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