

2. New Account Owner Information

[Grid for legal name]

Legal Name of New Account Owner (first, middle initial, last), **Trust, or Business/Entity**

[Grid for birth/trust date]

Birth Date or Trust Date (month, day, year)

[Grid for ID number]

Last Four Digits of Social Security Number or Other Taxpayer ID Number

Does the new Account Owner have an existing Account for the Beneficiary(ies) listed in **Section 1**? *(Check one.)*

No. The new Account Owner must complete an Enrollment Application.

Yes. [Grid] — [Grid]
Account Number

The Units will transfer based on the new Account Owner's portfolio allocation.

[Grid] — [Grid]
Account Number

[Grid] — [Grid]
Account Number

Remember: You must include a Future Path 529 Plan Enrollment Application for each Beneficiary if the new Account Owner does not currently have an existing Account for the Beneficiary.

3. Authorization—THE CURRENT AND NEW ACCOUNT OWNERS MUST SIGN BELOW

Note: Do not sign below until you are in the presence of a notary public.

- As current Account Owner: I certify that Future Path 529 Plan is authorized to close the Account(s) I indicated in Section 1 and transfer all of the assets to an Account for the new Account Owner named in Section 2. I understand that if I have an Automatic Investment Plan (AIP) established on the Account, it will be stopped. If I contribute to the Account by payroll direct deposit, I must notify my payroll department of the change.
As current Account Owner: I certify that the information provided in this form is true and complete in all respects. Please provide all information, including the date of each signature. The effective date for all signatures must be on the same day.

Grid for Name of Current Account Owner

Name of Current Account Owner (first, middle initial, last), Trust, or Business/Entity

Signature line for Current Account Owner

Signature of Current Account Owner, Trustee, or Authorized Individual

Date line for Current Account Owner

Date (month, day, year)

- As new Account Owner: I certify that the information provided in this form is true and complete in all respects.

Grid for Name of New Account Owner

Name of New Account Owner (first, middle initial, last), Trust or Business/Entity

Signature line for New Account Owner

Signature of New Account Owner, Trustee or Authorized Individual

Date line for New Account Owner

Date (month, day, year)

(Your signature must be notarized. See below. We are not able to accept a signature guarantee in place of a notary's seal.)

STATE OF _____)

) ss.:

COUNTY OF _____)

This document was acknowledged before me on _____ (Month, Day, Year) by _____ (name of current Account Owner), who certifies the correctness of this signature.

Signature line for Notary Public

Signature of Notary Public

Date line for Notary Public

Date (month, day, year)

Grid for Notary Public's Name

Notary Public's Name (first, middle initial, last)

My commission expires:

Date line for commission expiration

Date (month, day, year)

Notary to Place Seal Here

Applies to Current Account Owner signature in Section 3.