### Future Path 529 Plan Withdrawal Request Form

## Future Path

Complete this form to request a full or partial withdrawal from your Future Path 529 Plan. You must submit a separate form for each type
of withdrawal you are requesting. See the Future Path 529 Plan Description and Participation Agreement ("Plan Description") for more
information. Capitalized terms that are not defined in this form have the meaning given to them in the Plan Description.

Note: You can also request a withdrawal by telephone or online at www.futurepath529.com.

- We are required to file IRS Form 1099-Q if you take a withdrawal from your Future Path 529 Plan Account. Contact your financial professional or the IRS for any documents you may be required to retain evidencing the type of withdrawal you are making.
- Contributions and rollovers by check, recurring contribution, and electronic bank transfer (EBT) may not be collected for seven business days. We will process the withdrawal on the appropriate trade date, but will not send proceeds from the withdrawal request until the money has been collected.
- Enter 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.

Forms can be downloaded from our website at **www.futurepath529.com**, or you can call us to order any form—or request assistance in completing this form—at **1.800.587.7305** any business day from 8 a.m. to 8 p.m. Eastern time.

Return this form and any other required documents to: **Future Path 529 Plan P.O. Box 55578 Boston, MA 02205-5578**  For overnight delivery or registered mail, send to:

Future Path 529 Plan 95 Wells Ave., Suite 155 Newton, MA 02459

# Account Owner information Account Number Account Number Account Owner Social Security Number or Taxpayer Identification Number Name of Account Owner (first, middle initial, last) Telephone Number (In case we have a question about your Account.)



1

Bene	eficiary information	
Name of	of Beneficiary (first, middle initial, last)	
	iary Social Security Number	
Reas	son for withdrawal (Choose only one of the following.)	
A	<b>Qualified withdrawal to the Account Owner.</b> * My withdrawal will be used to pay for the Beneficiary's Qualified Education Expenses, K-12 Tuition Expenses, Apprenticeship Program Expenses or Qualified Education Loan Repayment	
В.	<b>Qualified withdrawal to the Beneficiary.*</b> My withdrawal will be used to pay for the Beneficiary's Qualified Higher E Expenses, K-12 Tuition Expenses, Apprenticeship Program Expenses or Qualified Education Loan Repayments. <i>(The Be will receive a check at the address on file.)</i>	
C	Qualified withdrawal to an Eligible Educational Institution.* Make my check payable to the college or universideliver it to the exact address below.	ty and
	<i>Note:</i> (If selecting Priority delivery in <i>Section 5</i> , please provide a street address and <i>not</i> a P.O. Box)	
	Name of School <i>(Complete only if the withdrawal is to be sent directly to the school.)</i>	
	Department/Office/Contact Name	
	Student ID	
	Mailing Address	
	City City Code City City Code City City City City City City City City	
D.	<b>Indirect rollover.**</b> I will invest my withdrawal in another Qualified Tuition Program within the next 60 days.	
E	<b>Federal Non-Qualified Withdrawal to the Account Owner.***</b> My withdrawal will not be used to pay for the Be Qualified Higher Education Expenses, K-12 Tuition Expenses, Apprenticeship Program Expenses or Qualified Education Repayments.	
F	<b>Federal Non-Qualified Withdrawal to the Beneficiary.</b> *** My withdrawal will not be used to pay for the Benefic Qualified Higher Education Expenses, K-12 Tuition Expenses, Apprenticeship Program Expenses or Qualified Education Repayments. <i>(The Beneficiary will receive a check at the address on file.</i> )	,

\* The IRS may require you to substantiate that your withdrawal is qualified. Consult the IRS or your tax advisor for current documentation requirements.

\*\* Please note: Federal law allows the following account distributions with no resulting federal taxes or penalties: up to \$10,000 per beneficiary per year for K-12 Tuition Expenses, up to a lifetime amount of \$10,000 per individual for Loan Repayment Expenses, and indirect rollovers to another 529 program.

\*\*\* Earnings on Federal Non-Qualified Withdrawals are subject to federal income tax and may be subject to a 10% federal penalty tax, as well as state and local taxes and state deduction recapture. For more information, refer to the Future Path 529 Plan Description and Participation Agreement ("Plan Description").

В.

C.



#### Amount of withdrawal (Choose one.)

A. **Full balance.** Withdraw the entire amount held in all of the Investment Options in my Account, discontinue my Recurring Contributions *(if applicable)*, and close this Account. **Note:** If you contribute to the Account by Payroll Direct Deposit, you must notify your payroll department of the change.

**Partial amount prorated from all Investment Options in your account.** Provide the total amount of your withdrawal below. We will withdraw that amount proportionately from all Investment Options you own.



#### Partial amount as follows.

**Important:** If the dollar amount you indicate for a particular Investment Option exceeds the amount available for withdrawal, we will liquidate the entire balance of that Investment Option.

Name of Investment Option	<b>Dollar amount</b> (For partial amounts.)	OR Total balance (Check if applicable.)
	\$,	
	\$,	
	\$,	
	\$,	
	\$,	
	\$,	
	\$	

## 5. Delivery Method (Choose only one of the following.) A. First-class mail. Check will be mailed via USPS to the recipient's address on file (unless Section 5. D. applies). Allow up to 10 business days for delivery or longer after recent contributions or account maintenance. See page 1. B. Priority delivery. Not available for P.O. boxes or non-street addresses. A transaction charge of \$15 will be applied to your Account. Your withdrawal check will be sent to the recipient's address on file and should be received within three (3) business days of your trade date (no Saturday or holiday delivery). Recent contributions or certain account maintenance may delay the date the check is released. See page 1. C. By Automated Clearing House (ACH) to Bank Account of Account Owner. Bank Name

Last four digits of Bank Account Number

#### 6. Signature — YOU MUST SIGN BELOW

I have received the Future Path 529 Plan Description and Participation Agreement ("Plan Description"). I understand that by signing this form, I am agreeing to be bound by the terms and conditions of the Plan Description. I understand that the Future Path 529 Plan<sup>®</sup> ("Plan") may from time to time amend the Plan Description, and I agree I will be subject to the terms of those amendments. I understand that the Plan Description and this form shall be construed, governed, and interpreted in accordance with the laws of the State of Nevada.

SIGNATURE	
Signature of Account Owner	

	—	
Date ( <i>mm/dd/yyyy</i> )		

J.P.Morgan