Scholar's Edge®

Direct Rollover Out to Roth IRA Form



- Complete this form to initiate a direct rollover of assets from your Scholar's Edge
 Account to an existing Roth IRA account established for the benefit of the Beneficiary.
- The designated beneficiary in **Section 1** will be the tax responsible party who will receive the IRS Form 1099-Q.
- Your rollover will be processed out of your Scholar's Edge Account according to the instructions you provide in **Section 3**.
- Please review Section 4 to determine whether or not your assets are eligible for rollover to a Roth IRA.
- Please consult with your Roth IRA provider to determine whether there are additional requirements before submitting this form.
- Complete a separate form for each account.
- Complete all sections in blue or black ink and print in capital letters. Be sure to sign and date this form.

Forms can be downloaded from our website at **scholarsedge529.com**, or you can call us to order any form—or request assistance in completing this form—at **1.866.529.SAVE** (1.866.529.7283), Monday through Friday 8:00 a.m. to 7:00 p.m. MT.

	1.866.529.SAVE (1.866.529.7283)
·U—	Monday through Friday

8:00 a.m. to 7:00 p.m. MT scholarsedge529.com

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Regular mailing address:

FAX 617-559-8951

Scholar's Edge PO Box 219798 Kansas City, MO 64121-9798

Overnight mailing address:

Scholar's Edge 1001 E 101st Terrace, Suite 200 Kansas City, MO 64131

1.	Scholar's Edge Account Information

Beneficiary Social Security or Taxpayer Identification Number (Required)

Account Number (Required)
Social Security Number or Taxpayer Identification Number (Required)
Account Owner (First name) (Required) (M.I.)
Account Owner (Last name) (Required)
Telephone Number
Beneficiary (First name) (Required) (M.I.)
Beneficiary (Last name) (Required)



2. Roth IRA Manager or Custodian (Financial Institution	2.	Roth IRA	Manager	or Custodian	(Financial	Institution
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address.		ager or oustou	lian for proper mailing
Account Number of Roth IRA			
Name of Receiving Roth IRA Manager or Custodian (Usually a Financial In	nstitution)		
Address of Receiving Roth IRA Manager or Custodian			
City	State Zip Co	de	
Telephone Number			
Instructions to Scholar's Edge			
The assets described below will be moved from your Schola	· ·		
 The value of the assets being rolled over to the Roth IRA the beneficiary for all individual retirement plans maintain 	•	mit for the taxa	able year applicable to
Check one.			
A. Roll over all of the assets in my Scholar's Edge	Account to the Roth IRA indicated	in Section 2.	
A. Roll over all of the assets in my Scholar's Edge B. Roll over a partial pro-rated amount of the asset \$		in Section 2.	
B. Roll over a partial pro-rated amount of the asse	ets to my Roth IRA.	in Section 2.	
B. Roll over a partial pro-rated amount of the asse	ets to my Roth IRA. assets to my Roth IRA. particular Investment Portfolio exceed	s the total bala	ance in the Investment
B. Roll over a partial pro-rated amount of the assessment. \$	ets to my Roth IRA. assets to my Roth IRA. particular Investment Portfolio exceed	s the total bala	ance in the Investment
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B. Roll over a partial pro-rated amount of the assessment. \$	ets to my Roth IRA. assets to my Roth IRA. particular Investment Portfolio exceed quidate the total balance of that Inves Dollar amount (For partial amounts.) \$	s the total bala tment Portfolic	ance in the Investment o. Total balance

4. SIGNATURE — YOU MUST SIGN BELOW

By signing below, I certify that the information contained in this form, and in any required documentation, is true, complete and correct.

Note: The IRS may issue additional guidance that may impact 529 account rollovers to Roth IRAs. Please consult a financial professional or tax advisor regarding the applicability of these rollovers to your personal situation.

- I certify that I have read, understand, consent, and agree to all of the terms and conditions of the Scholar's Edge Plan Description, and understand the rules and regulations governing rollover contributions to Roth IRAs from 529 plans, and that the rollover I am requesting meets all of the requirements and conditions required for an eligible rollover of assets to Roth IRAs from 529 plans.
- I understand that my 529 account must be open for 15 or more years in order to qualify for a rollover to a Roth IRA.
- I understand that IRS regulations permit a lifetime maximum amount of \$35,000 per beneficiary to be rolled over from 529 accounts to Roth IRAs.
- I understand that 529 contributions and associated earnings must be in my account for more than 5 years in order to qualify for a rollover to a Roth IRA.
- I understand that I am responsible for tracking and documenting the length of time my 529 account has been open and the amount of assets in my 529 account eligible to be rolled into a Roth IRA.
- I understand that 529 assets can only be rolled over into a Roth IRA maintained for the benefit of the beneficiary on my 529 account.
- I understand that the Roth IRA contribution is subject to the Roth IRA contribution limit for the taxable year applicable to the beneficiary for all individual retirement plans maintained for the benefit of the beneficiary.

SIGNATURE		
Signature of Account Owner	Date (mm-dd-yyyy)	