

4. Instructions if Assets have been redeemed

Assets redeemed from another 529 Plan, Qualified U.S. Savings Bond, or ESA must be deposited within 60 days of the withdrawal. You must include a statement from the former institution certifying the breakdown of contributions and earnings of the amount transferred. Until such statement is provided, CollegeBound Saver will treat the entire deposit as earnings.

Enclosed is a check made payable to CollegeBound Saver for

\$, .

Total Amount of Redemption

\$, .

Principal Amount of Redemption

\$, .

Earnings Amount of Redemption

5. Signature — YOU MUST SIGN BELOW

- I certify that I have read and understand, consent, and agree to all the terms and conditions of the CollegeBound Saver Program Description as it relates to this Incoming Rollover request.
- By signing below, I authorize CollegeBound Saver or its designee to roll over assets into CollegeBound Saver according to the instructions above.
- If the Account is owned by an entity or trust, I certify that I am authorized to act on its behalf in making this request. If the Account is funded with UGMA/UTMA assets, I further certify that I am the parent/guardian/custodian of the Account in question and that this request is in the best interest of the Beneficiary.
- If I am rolling over assets from another 529 Plan, by signing below I certify that there has not been a rollover for this Beneficiary during the prior 12-month period. I further understand that moving assets among the same Account Owner and Beneficiary account that is in any Rhode Island state-issued 529 plan will count towards my twice per calendar year Investment Option change limit and I certify that more than one Investment Option change has not occurred during the calendar year.
- If rolling over assets from another 529 Plan to a new Beneficiary, I certify that the new Beneficiary is a "Member of the Family" of the current Beneficiary at the distributing 529 plan.
- I further certify that if I have already redeemed the rollover amount for deposit into a CollegeBound Saver account, this request is within 60 days of the withdrawal.
- If I am requesting a direct rollover, by signing below, I authorize the current 529 Plan manager or custodian to liquidate my investment identified in **Section 3** and roll over the assets into the CollegeBound Saver Account indicated in **Section 2** of this form. I understand I may need a signature guarantee in **Section 6**.
- I understand that I cannot make additional contributions for a Beneficiary when the fair market value of all accounts maintained for that Beneficiary within all programs offered by the State of Rhode Island exceeds \$500,000.
- I understand that the program manager, custodian or financial institution of the account from which assets are being redeemed is responsible for providing CollegeBound Saver with a statement certifying the breakdown of contributions and earnings of the amount transferred. I further understand that until such statement is provided, CollegeBound Saver will treat the entire contribution as earnings.
- I understand that rollovers, deposits, or Beneficiary changes not meeting these conditions may result in the earnings portion of the deposit being considered a Non-Qualified Withdrawal subject to federal income tax and an additional 10% federal tax, and may be subject to state or local income tax.

If the current 529 Plan manager or custodian of the account from which assets are being redeemed requires a Medallion Signature Guarantee, do not sign here. Please go to Section 6.

SIGNATURE

Signature of Account Owner

- -

Date (mm/dd/yyyy)

6. Medallion Signature Guarantee—IF APPLICABLE

(Only applicable if the current 529 Plan manager or custodian of the account from which the assets are being redeemed requires a Medallion Signature Guarantee - please check with your current 529 Plan manager or custodian. The lack of a required Signature Guarantee could delay this rollover.)

- You must provide the following information as underwritten certification that your signature is genuine.
- You can obtain a Medallion Signature Guarantee from an authorized officer of a bank, broker, or other qualified financial institution. A notary public cannot provide a Medallion Signature Guarantee, nor can you guarantee your own signature.
- **Do not sign below until you are in the presence of the authorized officer providing the Medallion Signature Guarantee.**

I certify that the information provided herein is true and complete in all respects, and that I have read and understand, consent, and agree to all the terms and conditions of the Program Description.

SIGNATURE

Signature of Account Owner

Signature Guarantor

Signature Guarantor

Title

Title

Name of Institution

Name of Institution

□□ — □□ — □□□□

(mm/dd/yyyy)

Authorized Officer to place stamp here

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

CollegeBound Saver hereby agrees to accept the rollover described herein and upon receipt will deposit the proceeds in the account established on behalf of the Account Owner named herein.

Margaret Frost

Authorized signature, CollegeBound Saver

INSTRUCTIONS TO CUSTODIAN

Send redemption proceeds by check to **CollegeBound Saver, P.O. Box 55986 Boston, MA 02205-9714**. Make the check payable to **CollegeBound Saver**. Include the Account Owner name and the CollegeBound Saver Account number *(if provided)* on the check and enclose a statement that shows the principal and earnings in the Account.



State of Rhode Island
Office of the General Treasurer
Seth Magaziner

