



## 2 my529 Receiving Account(s)

Fill in the information below for the my529 account(s) receiving the money.

In either dollars or percentages, indicate how you would like your transferred money allocated among the accounts listed. If you allocate your transfer as a percent of the total, please use whole percentages only.

<hr/>	<hr/>	<hr/>	<hr/>		
my529 Account Number	Beneficiary's Last Name	First Name	\$ Dollar Amount	OR	% Percent of Total
<hr/>		<hr/>		<hr/>	
Account Owner/Agent's Last Name	First Name	Home Phone	Work Phone		
<hr/>	<hr/>	<hr/>	<hr/>		
my529 Account Number	Beneficiary's Last Name	First Name	\$ Dollar Amount	OR	% Percent of Total
<hr/>		<hr/>		<hr/>	
Account Owner/Agent's Last Name	First Name	Home Phone	Work Phone		
<hr/>	<hr/>	<hr/>	<hr/>		
my529 Account Number	Beneficiary's Last Name	First Name	\$ Dollar Amount	OR	% Percent of Total
<hr/>		<hr/>		<hr/>	
Account Owner/Agent's Last Name	First Name	Home Phone	Work Phone		
<hr/>	<hr/>	<hr/>	<hr/>		
my529 Account Number	Beneficiary's Last Name	First Name	\$ Dollar Amount	OR	% Percent of Total
<hr/>		<hr/>		<hr/>	
Account Owner/Agent's Last Name	First Name	Home Phone	Work Phone		



\$ \_\_\_\_\_ OR \_\_\_\_\_ %  
**Total Dollar Amount** OR **Total Percentage**  
*Must equal the Total* *Must equal 100*  
*Transfer Amount on* *percent*  
*page 1*

## 3 Signature Authorization

By signing below,

- I authorize a transfer of the amount listed in section 1 into the account(s) identified in section 2.
- I certify that the receiving beneficiary is a member of the transferring beneficiary's family, as defined in the Program Description.
- I have read and agree to the terms and conditions of the Program Description and the Account Agreement I signed when I opened the source account.
- I have received, read, understand, and agree to all the terms and conditions in the current Program Description and this Account Agreement and will retain a copy of this Account Agreement for my records.
- **I understand that I can request two investment option changes for all my accounts for the same beneficiary each calendar year.**
- I understand that transferring money from a my529 account with the same account owner and same beneficiary is considered one of my investment option changes for the calendar year for this beneficiary.
- If I am transferring money to an account owned by another my529 account owner, I understand that I am surrendering the title and all rights to the account and interest in the money being transferred. I also understand that there can only be one account owner for each my529 account.
- I certify that the information on this form is true and accurate.



\_\_\_\_\_  
 Account Owner/Agent of Source Account Signature

\_\_\_\_\_  
 Date (mm/dd/yyyy)

\_\_\_\_\_  
 Account Owner/Agent Name (please print)

\_\_\_\_\_  
 Account Owner/Agent Title (if signed on behalf of a trust, corporation, or other institution)