

3. Current 529 Program Manager or ESA Custodian (Financial Institution)

The account from which you are moving assets must have the same Account Owner name as well as Social Security number or Taxpayer Identification number as your Account with CHET Advisor. Please contact your current 529 Program Manager or Custodian for proper mailing address.

You must provide a statement from your existing 529 Program Manager, detailing your existing account's basis and earnings. If you do not provide a breakdown of your investment portion and earnings portion, the entire amount may be treated as earnings that may be taxable upon withdrawal.

Check if you are investing the proceeds from an UGMA/UTMA Account.

Account Number of 529 Plan or ESA

Account Number of 529 Plan or ESA

Name of Current 529 Program Manager or Custodian (Usually a financial institution)

Name of Current 529 Program Manager or Custodian (Usually a financial institution)

Full Name of 529 Plan (If applicable)

Full Name of 529 Plan (If applicable)

Address

Address

City

City

State

State

Zip Code

Zip Code

Contact Person

Contact Person

Telephone Number

Telephone Number

Check this box if the Designated Beneficiary on this account differs from the Designated Beneficiary indicated in **Section 2**.

4. Current Savings Account (Financial Institution)

Please provide information about the savings account from which you are transferring money (the "Transfer Account") to CHET Advisor.

Check if you are investing the proceeds from an UGMA/UTMA Account.

Account Number

Account Number

Name of Savings Account (financial institution)

Name of Savings Account (financial institution)

Address

Address

City

City

State

State

Zip Code

Zip Code

Telephone Number

Telephone Number

5. Instructions to current 529 Program Manager, ESA Custodian, or Savings Account

The assets described below must all be held by the Financial Institution indicated in **Section 3** or **Section 4**. Your rollover proceeds will be invested according to the standing allocation instructions on file at the time the assets are received. If you have not established an Account, they will be invested according to what you choose on the **Account Application**.

Check one.

A. **Rollover/Transfer all of the assets in my account(s) to CHET Advisor.** *(To list more than two accounts, use a separate sheet.)*

Account Number

\$
Estimated Account Value

Account Number

\$
Estimated Account Value

B. **Rollover/Transfer a portion of the assets as directed below to CHET Advisor.** *(To list more than two options, use a separate sheet.)*

Account Number

Name of Investment Portfolio

\$
Amount

Account Number

Name of Investment Portfolio

\$
Amount

6. Signature — YOU MUST SIGN BELOW

If your current 529 Program Manager or Custodian requires a Medallion Signature Guarantee, do not sign below until you are in the presence of an authorized officer of a bank, broker, or other qualified financial institution. The guaranteeing institution is financially responsible if the signature is not genuine. A notary public cannot provide a Medallion Signature Guarantee, nor can you guarantee your own signature. The lack of a required Medallion Signature Guarantee could delay this rollover.

I certify that I have read and understand, consent, and agree to all of the terms and conditions of the CHET Advisor College Savings Plan Disclosure Booklet, and understand the rules and regulations governing rollover contributions from other 529 Plans and ESA's. I understand that IRS regulations permit only one such rollover for the same Designated Beneficiary in a 12-month period for 529 plan accounts.

SIGNATURE

Signature of Account Owner

□□ — □□ — □□□□

Date (mm/dd/yyyy)

Medallion Signature Guarantee — IF APPLICABLE

SIGNATURE

Signature Guarantor

Title

Name of Institution

□□ — □□ — □□□□

Date (mm/dd/yyyy)

Authorized Officer to place stamp here

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

The CHET Advisor College Savings Plan 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.



Authorized signature, CHET Advisor College Savings Plan

INSTRUCTIONS TO CUSTODIAN

Send redemption proceeds by check to **CHET Advisor C, P.O. Box 2800, Enfield, CT 06083-2800**. Make the check payable to **CHET Advisor**. Include the Account Owner name and CHET Advisor Account number (if provided) on the check and enclose a statement that shows the principal and earnings in the Account.