

Use this form for:

Rollovers (Complete sections 1, 2, 4)

One rollover per beneficiary allowed during a rolling 12-month period

- Movement of funds between another state's 529 plan (Qualified Tuition Program) and any Virginia529 account
- Movement of funds between Invest529 and Prepaid529 programs

Investment Directions

Two investment direction changes per beneficiary allowed per calendar year

- Changing portfolio selection for an existing Invest529 account (Complete sections 3, 4)
- Movement of funds within Virginia529 savings programs (Complete sections 1, 2, 4)
 - Invest529
 - CollegeAmerica
 - CollegeWealth

Transfers (Complete sections 1, 2, 4)

No limit on number of transfers, funds are being transferred between beneficiaries

All forms and account information are available at Virginia529.com. Please complete this form and return to the address below with all necessary applications, account statements and/or instructions.

Note: Do not use this form to transfer a Coverdell Education Savings Account, or to transfer your Virginia529 account to another state's 529 Qualified Tuition Program (QTP). For details on how to transfer your Virginia529 account to another state's QTP, please contact the other state's QTP.

CHECKLIST

- Is the Account Owner the same person for all accounts involved with the transfer or rollover? Please note, if you are transferring funds between different Invest529 account owners, both parties must sign section 4. (Not applicable to Prepaid529 or CollegeAmerica accounts)
- Is the receiving account open at this time? For assistance in opening your new Virginia529 account:
Contact Virginia529 at 888-567-0540 option 3
Contact CollegeAmerica, American Funds at 800-421-0180 ext 529 or your financial adviser
- Are any of the funds being transferred custodial (UTMA or UGMA)? Transfers involving assets from an UTMA/UGMA account may require further assistance. Contact Virginia529 at 888-567-0540.
- Is there a copy of the current 529 QTP account statement provided? This is required.
- Are there any separate instructions or forms needed to facilitate this rollover? Contact the current 529 QTP administrator to determine if any further forms or instructions are required. Not all 529 QTP administrators will accept a rollover request solely from Virginia529.
- Is a signature guarantee necessary? Virginia529 does not require signature guarantees. Contact the current QTP administrator to determine if this is necessary.
- Are there multiple accounts from which money is being transferred? A form is required for each account. All forms are required to be submitted at the same time.
- Are the funds being transferred into an account for the same beneficiary? If not, the new beneficiary must be a "Member of the Family" as defined by IRC Section 529 (see the applicable Program Description for the definition). The beneficiary of any account containing UTMA/UGMA assets cannot be changed.
- For portfolio changes on a single Invest529 account, did you select only one portfolio? This form will be returned to the account owner for correction in the event that multiple portfolios have been selected in any combination of or within the Age-Based or Static categories.

PLEASE RETURN THIS FORM TO THE ADDRESS OR FAX NUMBER BELOW

Virginia529 • 9001 Arboretum Parkway • North Chesterfield, VA 23236
Toll-Free 1-888-567-0540 • Toll-Free Fax 1-866-757-1295 • Virginia529.com

SECTION 1 | Account Owner Information (account from which funds are being withdrawn)

Account Owner Name

Beneficiary Name

Account Owner Street Address

City, State, Zip Code

Account Owner Daytime Phone Number

Account Owner Email Address

Account Information (from which funds are being withdrawn)

I am requesting a Rollover/Investment Direction Transfer from:

Prepaid529 CollegeWealth, BB&T Invest529

CollegeAmerica _____
Please specify the financial advisor firm

Another State's QTP* _____

Account Number

Street Address

City, State, Zip Code

Phone Number

I would like to: (please only select one)

Liquidate this account (Not applicable to Prepaid529 accounts)

Withdraw \$ _____ from this account (Not applicable to Prepaid529 accounts)

Indicate the number of years to roll over: _____ (Prepaid529 accounts only)

Virginia529 will roll only 1 year unless otherwise instructed. It is not possible to reinstate years of a Prepaid529 contract once they have been rolled over.

* Current Administrator: Please consider this your authorization to send a direct rollover distribution from the 529 Qualified Tuition Program noted in this Section (1). Please transfer all assets immediately if no selection is checked.

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SECTION 2 | Account Owner Information (for account into which funds are being deposited)

Account Owner Name

Beneficiary Name

Account Owner Street Address

City, State, Zip Code

Account Owner Daytime Phone Number

Account Owner Email Address

Account Information (for account into which funds are being deposited)

I am requesting a Rollover/Investment Direction Transfer to:

Prepaid529

Note: Payments received in excess of monthly payment amount will be applied toward the principal on the Prepaid529 account unless otherwise instructed. Separate instructions will need to be submitted along with this form in order to use funds received as a down payment during the Prepaid529 open enrollment period or as a prepayment deposit for the purpose of reducing the monthly payment amount.

Invest529

Note: Separate instructions will need to be submitted along with this form in order to authorize the transferred funds to be applied toward multiple Invest529 accounts. Failure to provide such instructions will delay these funds from being invested in their intended portfolios and may result in the funds being returned to the originating 529 Qualified Tuition Program.

CollegeWealth

Note: Existing accounts only.

CollegeAmerica

_____ Please specify the financial advisor firm

Account Number

Street Address

City, State, Zip Code

Phone Number

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SECTION 3 | Investment Direction for Invest529 accounts

I am requesting to change my portfolio selection for the Invest529 account indicated below. I understand that this request will change all funds invested in my current portfolio and future contributions for this Invest529 account to the new portfolio. I also understand that pursuant to IRC Code 529, I am permitted two investment direction changes per calendar year for each beneficiary.

Please indicate the Invest529 account number for which you are requesting a portfolio change. *A form will need to be completed for each Invest529 account for which you are requesting a portfolio change. All forms for the same account owner and beneficiary must be submitted at the same time.*

Account Owner Name

Beneficiary Name

Invest529 Account Number

Current Invest529 Portfolio

You can only select ONE portfolio from the Static OR Age-Based Portfolios for each account. This form will be returned to the account owner for correction in the event that multiple portfolios have been selected, in any combination of or within, the Age-Based or Static categories. In the event you would like to add a portfolio, you will need to complete an Invest529 application to open a separate new Invest529 account.

If you have an existing Invest529 account with a specific portfolio selection, you cannot have a second Invest529 account with the same portfolio for the same beneficiary. For example, if you have an Active Aggressive Invest529 account for your beneficiary, you cannot select Active Aggressive as your portfolio selection for another Invest529 account for this beneficiary.

Do not complete this section if you are transferring funds among existing Invest529 accounts, as transfers between Invest529 accounts with the same portfolio are not considered investment direction changes. Please complete Sections 1, 2 and 4 for this.

AGE-BASED PORTFOLIOS (target asset allocation as of January 1, 2019)

- | | |
|--|--|
| <input type="checkbox"/> 2036 Portfolio (76.7% Equity, 23.3% Fixed Income) | <input type="checkbox"/> 2027 Portfolio (46.7% Equity, 53.3% Fixed Income) |
| <input type="checkbox"/> 2033 Portfolio (66.7% Equity, 33.3% Fixed Income) | <input type="checkbox"/> 2024 Portfolio (35% Equity, 65% Fixed Income) |
| <input type="checkbox"/> 2030 Portfolio (56.7% Equity, 43.3% Fixed Income) | <input type="checkbox"/> 2021 Portfolio (16.7% Equity, 83.3% Fixed Income) |

PASSIVELY-MANAGED STATIC PORTFOLIOS (target asset allocation as of January 1, 2019)

- Aggressive Growth (80% Equity, 20% Fixed Income)
- Moderate Growth (60% Equity, 40% Fixed Income)
- Conservative Income (20% Equity, 80% Fixed Income)
- Total Stock Market Index Fund (100% Equity)
- Total Bond Market Index Fund (100% Fixed Income)
- Total International Stock Index Fund (100% Equity)
- Inflation-Protected Securities Fund (100% Fixed Income)
- Real Estate Investment Trust Index (100% Equity)
- FDIC-Insured (100% Fixed Income)

ACTIVELY MANAGED STATIC PORTFOLIOS (target asset allocation as of January 1, 2019)

- Active Aggressive (80% Equity, 20% Fixed Income)
- Active Moderate (50% Equity, 50% Fixed Income)
- Active Conservative (25% Equity, 75% Fixed Income)
- Socially-Targeted Investment (100% Equity)
- Stable Value (100% Fixed Income)
- Global Equity (100% Equity)

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SECTION 4 | Signature

I am submitting this request to change the portfolio for an Invest529 account (investment direction change), a rollover or an investment direction change or a transfer for the amount indicated above from an existing account. I understand that Virginia529 is not responsible for any consequences related to the custodian's improper use, transfer or characterization of custodial funds transferred from an UGMA or UTMA account.

I understand that if the breakdown of principal/earnings is not provided by the existing administrator of the 529 plan that I am responsible for providing the appropriate documentation to Virginia529. I understand that if I do not provide this documentation to Virginia529, the entire amount of the transfer will be treated as earnings in computing the earnings portion of any subsequent withdrawal from the account, which may be taxable to me at that time. This documentation is required to be received by Virginia529 within 90 days from the receipt of rollover funds.

I understand that in accordance with IRC Section 529, I am allowed one rollover per 12-month period for the same beneficiary. Exceeding this limit can result in tax and penalty consequences. Virginia529 is not responsible for any consequences related to the account owner's improper use, transfer, or characterization of the rollover.

I understand transfers to and from Invest529, CollegeAmerica and CollegeWealth accounts are considered investment directions as defined by IRC Section 529 regulations. I understand that changing the portfolio on my Invest529 account is considered an investment direction by IRC Section 529 regulations. Two investment direction changes made in any Virginia529 savings program (Invest529, CollegeAmerica and/or CollegeWealth) for the same account owner and beneficiary combination within this year will prevent any other investment direction changes for a Virginia529 account with that same account owner and beneficiary combination until the following calendar year. However, if an account owner owns multiple Invest529, CollegeAmerica and/or CollegeWealth accounts for a specific beneficiary and wishes to change the investments in some or all of those accounts, submitting the investment direction change for each of those accounts at the same time is deemed to be only one investment direction change.

I understand that processing this rollover/transer will be handled in accordance with the guidelines provided in the applicable Program Description and that waiting periods may apply.

I have read the applicable Program Description (Prepaid529, Invest529, CollegeAmerica or CollegeWealth) and by signing below I hereby certify that the information provided herein is true and correct to the best of my knowledge.

Account Owner Signature

Date

IMPORTANT INFORMATION

Your current QTP may require a medallion signature guarantee stamp on this form, or it may have additional requirements before releasing your funds. To avoid delays, call your current QTP for instructions before mailing this form to Virginia529. You may be required to provide proof of your authority to act on behalf of this account to your bank or broker before a medallion signature guarantee or a signature validation program stamp will be provided.

GUARANTOR TO AFFIX STAMP HERE

For office use only, Virginia529 will complete this acceptance agreement.

As Administrator of Virgini529, this Qualified Tuition Program rollover/transfer request will be accepted. To ensure proper credit, please return a copy of this form with the check or indicate the account owner, beneficiary and the Virginia529 account number on the check or check stub. Make the check payable to Virginia529, 9001 Arboretum Parkway, North Chesterfield, VA 23236.

Virginia529-Authorized Administrator's Signature

Date

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