Arkansas Brighter Future Direct Plan

Incoming Rollover Form



- Complete this form to initiate a direct rollover from another 529 plan or an education savings account (ESA) to an existing account
 in the Arkansas Brighter Future Direct Plan. (If you have not established an account, you must also complete and enclose an
 Account Application.)
- Print clearly, preferably in capital letters and black ink.

Forms can be downloaded from our website at **www.BrighterFutureDirect529.com**, or you can call us to order any form — or request assistance in completing this form at **1.800.587.7301** any business day from 9:00 a.m. to 8:00 p.m. ET.

Mail this form and any other required documents to:

Arkansas Brighter Future Direct Plan P.O. Box 219376 Kansas City, MO 64121-9376 For overnight delivery or registered mail, send to:

Arkansas Brighter Future Direct Plan 1001 E 101st Terrace, Suite 200 Kansas City, MO 64131

Arkansas Brighter Future Direct Plan Account Information	
Account Number (If you have not established an account, also complete and enclose an Account Application.)	
Social Security Number or Taxpayer Identification Number	
Name of Account Owner (first, middle initial, last)	
Daytime Telephone Number Evening Telephone Number	
Name of Designated Beneficiary (first, middle initial, last)	
Designated Reposicions Social Socurity Number or Taypayar Identification Number /Required	

	ication i	numbe	r as v	nıır	acc	nunt	with	the	Ark	ansa	ıs Bri	iahte					ner Ilan													
								7	7 (11)		7		7		7	7	7					7	٦٢				1	٦٢		_
Accoun		of 529	」∟ Plan o	J∟ r ESA					_								_ _						_ L				JL		_	
					1	7		7	1		7	1	7		1	7						7					1	7		_
Name o	 of Current	Plan M	anage	r or C	 Istor	dian /] usual	lv a f] nanc	∐ ial ins	 titutio][nn]					IJL			L			IJL][L	_
				1	1	7		7 G	7		7	<i>,</i>	7	1	1	7	7					7					1	7		
Address										_							_ L													_
Audres					1.	1		1	1					7	_						1									
																[_				
City															S	State				Zip										
																						- [] –	- [
Contact	Person																T	elep	hon	e Ni	umbe	ſ								
C	heck this b	box if th	e bene	eficiar	v on	this a	ccou	nt diff	ers fr	om th	e ben	eficia	rv ind	icate	d in S	Secti	on 1													
one in at the Acco	ssets des stitution time the unt App	scribe n, fill o e asse olicat	d belout a s ts are i on.	ow n sepai e rec	nust rate	forn	oe he n for	eld b eac	y th	e fina our ro	ancia ollov	l ins er pr	titut ocee	on i ds v	ndic vill k	oe ir	ives	ted	cti o	on i	ding	to th	ne a	allo	ati	on i	ıstr	ucti	ons	8 0
one in at the Acco	stitution time the unt App	scribe n, fill o e asse olicat mplet ver al	d belout a sts are ion. e one	ow n separ e rec	nust rate eive	all I forn d. If	oe he n for you	eld b eac have	y the	e fina our ro t esta	ancia ollovi ablis	Il ins er pr hed	titut ocee an ad	on i ds v ccou	ndic vill k nt, t	oe ir they	will	eted I be	ction and accompanies of the control	on a	ding ted a	to th	ne a	alloo ng to	ati	on i	ıstr	ucti	ons	8 0
one in at the Acco	stitution time the unt App k and co	scribe n, fill o e asse olicat mplet ver al	d belout a sts are ion. e one	ow n separ e rec	nust rate eive	all I forn d. If	oe he n for you	eld b eac have	y the	e fina our ro t esta	ancia ollovi ablis	Il ins er pr hed	titut ocee an ad	on i ds v ccou	ndic vill k nt, t	oe ir they	will	eted I be	ction and accompanies of the control	on a	ding ted a	to th	ne a	alloo ng to	ati	on i	ıstr	ucti	ons	8 0
one in at the Acco	stitution time the unt App k and co. Rollo Accoun	scribe n, fill o e asse olicat mplet ver al	d belout a state are ion. e one l of t er	ow n separ e rec	nust rate eive	all I forn d. If	oe he n for you	eld b eac have	y the	e fina our ro t esta	ancia ollovi ablis	Il ins er pr hed	titut ocee an ad	on i ds v ccou	ndic vill k nt, t	oe ir they	will will specific with the second specific will be specifically speci	sted I be	etic	on a second and a second and a second a	epara	to the same s	ne a	alloo ng to	ati	on i	ıstr	ucti	ons	8 0
one in at the Acco	stitution time the unt App	scribe n, fill o e asse olicat mplet ver al	d belout a state are ion. e one l of t er	ow n separ e rec	nust rate eive	all I forn d. If	oe he n for you	eld b eac have	y the	e fina our ro t esta	ancia ollovi ablis	Il ins er pr hed	titut ocee an ad	on i ds v ccou	ndic vill k nt, t	oe ir they	will will specific with the second specific will be specifically speci	sted I be	etic	on a second and a second and a second a	ding ted a	to the same s	ne a	alloo ng to	ati	on i	ıstr	ucti	ons	8 0
one in at the Acco (Check	stitution time the unt App k and co. Rollo Accoun	scribe n, fill o e asse plicat mplet ver al	d belout a saturate are one one one one one one one one one on	sepan	nust rate eive	all I form	n for you	eld be each have	y the	e fina our ro t esta	ancia bllove ablis	Il inser properties to the description of the descr	rtituti	on i ds v ccou	ndic vill t nt, t	oe ir chey	will sunt s[E	ested I be	etic lace inv	on a se	epara ccoun	to the total	ne a	et.)	eati	on in	nstr you	ucti cho	ons	8 0
one in at the Acco (Check	stitution time the unt App k and co. Rollo Accoun	scribe n, fill o e asse plicat mplet ver al	d belout a saturate are one one one one one one one one one on	sepan	nust rate eive	all I form	n for you	eld be each have	y the	e fina our ro t esta	ancia bllove ablis	Il inser properties to the description of the descr	rtituti	on i ds v ccou	ndic vill t nt, t	oe ir chey	will sunt s[E	ested I be	etic lace inv	on a se	epara ccoun	to the total	ne a	et.)	eati	on in	nstr you	ucti cho	ons	8 0
one in at the Acco	stitution time the unt App k and co. Rollo Accoun	scribe n, fill o e asse plicat mplet ver al	d belout a saturate are one one one one one one one one one on	sepan	nust rate eive	all I form	n for you	eld be each have	y the You	e fina our ro t esta	ancia bllove ablis	Il inser properties to the description of the descr	rtituti	on i ds v ccou	ndic vill t nt, t	oe ir chey	will sunt s[energy sunt sunt sunt sunt sunt sunt sunt sunt	ested I be	e inv	on Second	epara ccoun	to the coordinate s	ne a	et.)	eati	on in	nstr you	ucti cho	ons	8 0
one in at the Acco (Check	stitution time the unt App k and co. Rollo Accoun	scribe a, fill of asset amplet wer al at Numb	d belout a state are one one one one one one one one one on	sepan	nust rate eive	all I form	n for you	eld be each have	y the You	e fina our ro t esta	ancia bllove ablis	Il inser properties to the description of the descr	ritituti	on i ds v ccou	ndic vill t nt, t	oe ir chey	will sunt s[energy sunt sunt sunt sunt sunt sunt sunt sunt	ested I be	e inv	on Second	epara ccoun	to the coordinate s	ne a	et.)	eati	on in	nstr you	ucti cho	ons	8 0
one in at the Acco (Check	stitution time the unt App k and co. Rollo Accoun Rollo Rollo	scribe a, fill of asset amplet wer al at Numb	d belout a sits are s	on c	nust rate eive	all I form	oe hen for you	eld be each have	y the You	e fina our ro t esta	ancia bllove ablis	Il inser properties to the description of the descr	ritituti	on i ds v ccou	ndic vill t nt, t	oe ir chey	will sunt s[energy sunt sunt sunt sunt sunt sunt sunt sunt	ested I be	e inv	on Second	epara ccoun	to the coordinate s	ne a	et.)	eati	on in	nstr you	ucti cho	ons	8 0
one in at the Acco (Check	stitution time the unt App k and co. Rollo Accoun Rollo Accoun	scribe a, fill of asset all asset all asset amplet ver al at Numb ver a	d belout a sits are s	on c	nust rate eive	all I form	oe hen for you	eld be each have	y the You	e fina our ro t esta	ancia bllove ablis	Il inser properties to the description of the descr	ritituti	on i ds v ccou	ndic vill t nt, t	oe ir chey	will sunt s[energy sunt sunt sunt sunt sunt sunt sunt sunt	ested I be	e inv	on Second	epara ccoun	to the coordinate s	ne a	et.)	eati	on in	nstr you	ucti cho	ons	8 0
one in at the Acco (Check	stitution time the unt App k and co. Rollo Accoun Rollo Accoun	scribe n, fill o e asse olicat wer al t Numb ver a t Numb or	d belout a sts area one	on c	nust rate eive	all I form	oe hen for you	eld be each have	y the You	e fina our ro t esta	ancia bllove ablis	Il inser properties to the description of the descr	ritituti	on i ds v ccou	ndic vill t nt, t	oe ir chey	will wunt s an t	sted I be	etice inv	corres a se	epara ccoun	to the confidence of the confi	ne a rdir	et.)	eati	on in	nstr you	ucti cho	ons	8 0
one in at the Acco (Check	stitution time the unt App (and co.) Rollo Accoun Rollo Accoun All	scribe n, fill o e asse olicat wer al t Numb ver a t Numb or	d belout a state are fon. I of t porti	on c	nust rate eive	all I form	oe hen for you	eld be each have	y the You	e fina our ro t esta	ancia bllove ablis	Il inser properties to the description of the descr	ritituti	on i ds v ccou	ndic vill t nt, t	oe ir chey	will wunt s an t	sted I be	etice inv	corres a se	ding ted a a separate of the s	to the confidence of the confi	ne a rdir	et.)	eati	on in	nstr you	ucti cho	ons	8 0

or

Dollar Amount

All

DO NOT STAPLE

4. Signature — YOU MUST SIGN BELOW

If your current plan manager or custodian requires a 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 isn't genuine. A notary public cannot provide a Signature Guarantee, nor can you guarantee your own signature. The lack of a required 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 Arkansas Brighter Future Direct Plan Program Description and Participation Agreement, and understand the rules and regulations governing rollover contributions from other 529 plans and education savings accounts. I understand that IRS regulations permit only one such rollover for the same beneficiary in a 12-month period for 529 accounts.

SIGNATURE Signature of Account Owner	
Signature Guarantee – IF APPLICABLE	Authorized Officer to Place Stamp Here
➤ SIGNATURE Signature Guarantee	
SIGNATURE Signature of Guarantor	
Title	
Name of Institution	
Date (mm/dd/yyyy)	

5. Authorization and Acceptance (No Account Owner action is necessary in this section.)

The Arkansas Brighter Future Direct Plan hereby agrees to accept the rollover described herein and upon receipt will deposit the proceeds in the account established on behalf of the individual named herein.

Authorized Signature, Arkansas Brighter Future Direct Plan

INSTRUCTIONS TO CUSTODIAN

Send redemption proceeds by check to **Arkansas Brighter Future Direct Plan, P.O. Box 219376, Kansas City, MO 64121-7241**. Make the check payable to: **Arkansas Brighter Future Direct Plan**. Include the account owner name and the Arkansas Brighter Future Direct Plan account number (if provided) on the check and enclose a statement that shows the principal and earnings in the account.





DO NOT STAPLE

[PAGE LEFT BLANK INTENTIONALLY]