



Kentucky Education Savings Plan Trust Rollover Form for New or Existing Accounts

Use this form to rollover funds into the Plan

Questions? Call toll-free 1-877-598-7878

P.O. Box 8100, Boston, MA 02266-8100

Visit www.kysaves.com

Instructions

- Read the Plan *Disclosure Booklet* for complete rollover information before completing this form.
- Complete a separate form for each rollover account and submit a new *Account Application* along with this form, unless you already have a *Kentucky Education Savings Plan Trust* (KESPT) Account for this Beneficiary.
- Complete all sections in blue or black ink and print in capital letters. Be sure to sign and date this form.

1 Type of Rollover (Check only one box.)

Direct Rollover from another Qualified Tuition Program (QTP)

We will request a transfer of funds on your behalf directly from your current Qualified Tuition Program into your KESPT Account. Please verify whether your current Qualified Tuition Program has any additional requirements before you submit this form to KESPT.

Indirect Rollover from another Qualified Tuition Program (QTP) or a Coverdell Education Savings Account

Your check must be payable to the *Kentucky Education Savings Plan Trust* and must be received by the KESPT within 60 days of the date of withdrawal from the other account to qualify for rollover treatment.

2 KESPT Plan Account Information (This is your new or existing KESPT account.)

You can rollover assets, either directly or indirectly, into a KESPT Account for the same Beneficiary or into a KESPT Account for another Beneficiary who is a "member of the family" of the original Beneficiary, as described in the *Disclosure Booklet*.

Note: Funds that were previously on deposit in a Uniform Gifts to Minors Act (UGMA) or Uniform Transfers to Minors Act (UTMA) can only be deposited into an UGMA/UTMA account for the same Beneficiary within the Plan.

Who is the KESPT Beneficiary?	<input checked="" type="checkbox"/> Same Beneficiary	<input type="checkbox"/> New Beneficiary, excluding UGMA/UTMA
Type of Account: (Check only one.)	<input checked="" type="checkbox"/> Individual	<input type="checkbox"/> Custodial (UGMA/UTMA) <input type="checkbox"/> Entity

1 9 7 0 - 0 1 2 3 4 5 6 7 8 9 0

Fund and Plan Account Number (Leave blank for a new KESPT Account.)

7 8 9 - 1 2 - 3 4 5 6

Beneficiary Social Security or Taxpayer Identification Number

J O H N A S A M P L E

Account Owner or Custodian Name (First, MI, Last, Suffix), or Entity Name

A N N E M S A M P L E

Beneficiary Name (First, MI, Last, Suffix)

3 Contribution Instructions (Your funds may be deposited to any one or more of the following Investment Options.)

Please indicate whether your contribution will be deposited into a new Investment Option or into one you already own.

Investment Options (\$25 minimum per Option)	Select your Investment Options		
	Provide amount (\$ or %)		New option?
Managed Allocation Option	\$	50.00%	<input checked="" type="checkbox"/> Yes OR <input type="checkbox"/> No
Active Equity Option (1970)	\$.00%	<input type="checkbox"/> Yes OR <input type="checkbox"/> No
Equity Index Option (1969)	\$	25.00%	<input checked="" type="checkbox"/> Yes OR <input type="checkbox"/> No
Balanced Option (2006)	\$.00%	<input type="checkbox"/> Yes OR <input type="checkbox"/> No
Fixed Income Option (1971)	\$.00%	<input type="checkbox"/> Yes OR <input type="checkbox"/> No
Guaranteed Option (1819)	\$	25.00%	<input type="checkbox"/> Yes OR <input checked="" type="checkbox"/> No
TOTAL ROLLOVER CONTRIBUTION AMOUNT	\$	100.00%	

4 Instructions to your current Qualified Tuition Program (Complete this section only for a direct rollover.)

Use a separate *Rollover of Funds Form* for each Qualified Tuition Program (QTP) you maintain for this Beneficiary.

0 5 1 0 - 1 2 3 4 5 6 7 8

Account Number (This is the Account you have with your current QTP.)

0 1 2 - 3 4 - 5 6 7 8

Social Security Number or Taxpayer Identification Number

J O H N A S A M P L E

Account Owner Name (First, MI, Last, Suffix or Name of Entity)

A N N E M S A M P L E

Beneficiary Name (First, MI, Last, Suffix)

