

Fund Transfer Form

(Transfers between CollegeCounts 529 Fund Accounts)

CollegeCountsSM
Alabama's 529 Fund
ADVISOR PLAN

PO Box 85290
Lincoln, NE 68501-5290
CollegeCounts529advisor.com

- Complete this form to transfer funds between your CollegeCounts 529 Fund Accounts.
- You may transfer Accounts within the same Fee Structure. You cannot transfer between Fee Structures.
- A transfer to an Account for another Beneficiary may have federal gift tax or generation-skipping transfer tax consequences. You should consult your tax advisor under such circumstances.
- Return this completed form to:

Regular Mail:
CollegeCounts 529 Fund
PO Box 85290
Lincoln, NE 68501-5290

Overnight Mail:
CollegeCounts 529 Fund
6811 S. 27th Street
Lincoln, NE 68512

- For assistance, call toll-free: 866.529.2228 or contact your financial advisor.

1 Account Information

Account Owner's First Name	M.I.	Last Name
Address		City, State, ZIP
Phone	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
	Account Owner's Social Security Number	

2 Transfer Funds Between CollegeCounts 529 Fund Accounts

From Account	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Beneficiary's Name
To Account	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Beneficiary's Name
\$	Amount to Transfer	Relationship between Beneficiaries on the Accounts listed above (brother, sister, first cousin, etc.)
<input type="checkbox"/>	Entire Balance	<input type="checkbox"/>
<input type="checkbox"/>	Close Account	

3 Authorization

I certify that all of the information contained herein is true and correct. I direct the CollegeCounts 529 Fund to make the transfer that I have indicated above. I understand that a transfer to an Account for another Designated Beneficiary may have tax consequences, and I assume full responsibility for any tax consequences.

X _____
Signature of Account Owner Date



Offered by the
State of Alabama

UBT 529 Services a Division of
UNION BANK
& TRUST COMPANY®
Program Manager