



- Complete a separate form for each type of withdrawal for each designated payee and/or for each Beneficiary.
- Print in capital letters with blue or black ink, sign and date the form, mail it to the Plan at the above address.
- A Medallion Signature Guarantee¹ is required in Section 6: (i) for withdrawal requests of \$100,000 or more; (ii) for certain Entity Accounts excluding most Accounts owned by a trust, or an Account for which the individual completing the form is acting in a legal capacity as a representative of the Account Owner or (iii) if, within the past 30 days, the address on the account has been changed, the bank account information has been added or changed, or the Account was transferred to a new Account Owner.

TREATMENT OF ELEMENTARY AND SECONDARY EDUCATION TUITION COSTS

Effective January 1, 2018, distributions for tuition in connection with enrollment or attendance at an elementary or secondary public, private, or religious school are federal income tax free up to a maximum of \$10,000 of distributions for such tuition expenses per taxable year per Beneficiary from all 529 Plans. State tax consequences may apply based on your state of residence or tax filing. Please see the Plan Disclosure Booklet for more information.

1 Account Information

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Account Number

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Account Owner Telephone Number

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Account Owner Name (First, MI, Last)

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Beneficiary Name (First, MI, Last)

2 Select a Payee

- Account Owner** (This will be the tax responsible party who will receive the 1099Q form).
- Beneficiary** (This will be the tax responsible party who will receive the 1099Q form).
- School – Colleges and Universities only** (The beneficiary will be the tax responsible party who will receive the 1099Q form).
PLEASE NOTE: It generally takes 7-10 business days for the school to receive the check and additional time for processing. If you need it sooner, please contact our telephone representatives at the telephone number above.
- Third Party (Including elementary or secondary schools or Tuition Payment Services)** (The Account Owner will be the tax responsible party who will receive the 1099Q form). A check will be mailed to the address provided in section 5.

3 Withdrawal Information

- This withdrawal is **not** being used for qualified education expenses. This information is being collected on behalf of the Plan and will not affect how your withdrawal will be reported to the Internal Revenue Service. For more information about withdrawals, please refer to the Plan Disclosure Booklet. You should consult with a qualified tax advisor regarding how tax laws may apply to your particular circumstances

Tell us how much to withdraw from this Account. Write a specific amount or "ALL" next to each Investment Option.

Investment Portfolio Name <i>(write in the portfolio name(s) from the list)</i>	Indicate a specific amount or write "ALL"						
	\$,			.
	\$,			.
	\$,			.
	\$,			.
Total Withdrawal Amount	\$,			.

¹ A Medallion Signature Guarantee is available from banks or trust companies, savings banks, savings and loan associations or members of a national stock exchange and warrants that the signer is the appropriate person to provide instruction. A notary public **cannot** provide a Medallion Signature Guarantee. Please contact your bank or broker, if needed.

Investment Portfolio Names		
Age-Based Option	Active-Based Moderate Portfolio (3434)	International Equity Index Portfolio (3440)
Aggressive Age-Based Option	Active-Based Conservative Portfolio (3435)	Bond Index Portfolio (3441)
Index-Based Aggressive Portfolio (3427)	Balanced Portfolio (3437)	U.S. Equity Active Portfolio (3442)
Index-Based Moderate Portfolio (3429)	Large-Cap Stock Index Portfolio (3438)	Social Choice Portfolio (3444)
Index-Based Conservative Portfolio (3430)	Small-Cap Index Portfolio (3439)	Bank CD Portfolio (3445)
Active-Based Aggressive Portfolio (3432)		Principal Plus Interest Portfolio (3446)

Note: Funds cannot be withdrawn until 10 days after the receipt of each contribution. If applicable, a separate payment will be made to the payee designated in Section 2 once the units are available for withdrawal.

4 Systematic Withdrawal Information *(Optional)*

By completing this section you authorize the Plan to systematically withdraw funds from your account and to pay such amounts to the payee indicated in section 2. These systematic withdrawals will continue until the Investment Option(s) from which the systematic withdrawal is made has insufficient funds to continue making these payments, or you advise the Plan in writing to stop making such payments.

✓ **Select the frequency of your systematic withdrawals.**

<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Other
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✓ **Select the month(s) of your systematic withdrawals.**

<input type="checkbox"/> Every Month (or →)	<input type="checkbox"/> Jan.	<input type="checkbox"/> Feb.	<input type="checkbox"/> Mar.
	<input type="checkbox"/> April	<input type="checkbox"/> May	<input type="checkbox"/> June
	<input type="checkbox"/> July	<input type="checkbox"/> Aug.	<input type="checkbox"/> Sep.
	<input type="checkbox"/> Oct.	<input type="checkbox"/> Nov.	<input type="checkbox"/> Dec.

✓ **Select the date(s) of your systematic withdrawals.**

<input type="checkbox"/> 1st	<input type="checkbox"/> 15th	<input type="checkbox"/> Other _____
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5 Select a Delivery Method

Check this box for expedited delivery of check payment *(Optional, \$15 will be deducted from your Account.)*

Pay by Check *(A check will be mailed to your or your beneficiary's address of record.)*

Pay by Electronic Funds Transfer (EFT) *(Funds will be received by your or your beneficiary's bank between 1-3 business days.)*

You may select this option only if your banking information has been on file for at least 30 days and it has been verified by your bank. Before selecting this option, you may call to confirm your bank account information.

- Your bank account will be credited separately for the amount of contributions and earnings, if any, withdrawn from **each** Investment Portfolio. Depending upon the number of Investment Portfolios you own, you could receive multiple deposits into your bank account.
- If you select this method but you do not have a bank account on file or if your banking information has been added or changed within 30 days, a check will be mailed to your address of record.

Pay to Eligible Educational Institution, Tuition Payment Service/Plan, or Other Third Party *(A check will be mailed as designated below.)*

Please confirm the mailing instructions with your school before submitting this form for payment and provide a student ID, if required by the school. Note: Payments for qualified expenses for a foreign Eligible Educational Institution will be paid directly to the Account Owner.

Eligible Educational Institution Name (School), Tuition Payment Plan/Service, or Other Third Party Payee

Student Name, ID or other Identifying Information (This information will appear only on the check.)

School, Tuition Payment Plan/Service, or Other Third Party Payee Mailing Address (Line 1)

School, Tuition Payment Plan/Service, or Other Third Party Payee Mailing Address (Line 1)

City, State, Zip

6 Signature and Authorization (YOU MUST SIGN BELOW.)

By signing below, I certify that the information contained in this Form, is true, complete and correct. I authorize a withdrawal from my Account based on this information. I understand and agree to all terms of the withdrawal as presented here, and in the Plan Disclosure Booklet and Participation Agreement.

If this withdrawal is for Qualified Higher Education Expenses, I further certify that the requested withdrawal represents qualified higher education expenses for the enrollment or attendance of my Beneficiary at an Eligible Educational Institution. To the best of my knowledge, no other request has been previously submitted to this Plan, or to any other Qualified Tuition Program, for reimbursement or payment of this/these expenses by me or my Beneficiary.

If I am participating in the Automatic Contribution Plan (ACP), my participation in ACP will be cancelled if I have requested a withdrawal of my entire Account balance (in all Investment Options) but it will continue if I have only requested a partial withdrawal from my Account unless an *Electronic Banking Information Form* accompanies this form.

- **If I am making contributions by payroll deduction**, I understand that my payroll contributions will continue into this Account, regardless of the amount withdrawn, unless I notify my employer that I want to stop or change the amount of my payroll deduction.

I certify that I am the Account Owner, or I have the authority to act as the Account Owner. A medallion signature guarantee may be required. Please see Important Information below. If I am withdrawing my entire account balance, I request the cancellation of my *Participation Agreement* and the closure of my Account.

Signature of Account Owner

Date (month/day/year)

Important Information

Medallion Signature Guarantee – IF APPLICABLE

A Medallion Signature Guarantee is required: (i) for all entity Accounts except Accounts owned by a trust so long as the Plan has trust documents on file which include the current names of all trustees, or Accounts for which the individual completing this form is acting in a legal capacity as a representative of the individual Account Owner; or (ii) if the address on the account has been changed within the past 30 days, if the Account was transferred to a new Account Owner in the past 30 days or if the bank account has been changed in the past 30 days and the redemption is being sent to the bank of record. A Medallion Signature Guarantee is required for all withdrawal requests of \$100,000 or more. 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 will be provided.

Note: A Medallion Signature Guarantee is not required if a *Plan Power of Attorney Form* is on file for an Individual Account, or if a *Plan Power of Attorney Form* accompanies this form **unless** the withdrawal request is \$100,000 or more.



Overnight Mail
Edvest College Savings Plan
30 Dan Road
Canton, MA 02021-2809

Regular Mail
Edvest College Savings Plan
P.O. Box 55189
Boston, MA 02205-5189

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GUARANTOR TO AFFIX STAMP HERE