Michigan Education Savings Program
Rollover Form (for New or Existing Accounts)

Use this form to rollover funds into the Program

Questions? Call toll-free 1-877-861-MESP (1-877-861-6377),
P.O. Box 55925, Boston, MA 02205-5925
Visit www.misaves.com

Instructions

- Read the Program *Disclosure Booklet* for additional 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 *Michigan Education Savings Program* (MESP) Account for this Beneficiary.
- The entire rollover amount will be treated as earnings, and will be reported as earnings upon withdrawal, unless the Program receives a statement, including breakdown of the earnings and contributions, from your original account.
- Complete all sections in blue or black ink and print in capital letters. Be sure to sign and date this form. A Medallion Signature Guarantee stamp may be required as described in section 5.[1] Read the ***Important Information*** on the following page.

1 Type of Rollover *(Check only one box.)*

☐ **Direct Rollover from another Qualified Tuition Program (QTP), excluding the Michigan Education Trust (MET)**
The Program will request a transfer of funds on your behalf directly from your current QTP into your MESP Account. To avoid delays, please verify whether your current QTP has any additional requirements **before** you submit this form to MESP.

☐ **Indirect Rollover from another Qualified Tuition Program (QTP), including the Michigan Education Trust (MET), or a Coverdell Education Savings Account** Your check must be payable to the *Michigan Education Savings Program* and must be received by MESP within 60 days of the date of withdrawal from the other account to qualify for rollover treatment. Please include a copy of your statement from the former QTP that includes a breakdown of contributions and earnings for the amount of the check.

2 MESP Program Account Information *(This is your new or existing MESP Account.)*

You can rollover assets, either directly or indirectly, into a MESP Account for the same Beneficiary or into a MESP Account for another Beneficiary who is a "member of the family" of the original Beneficiary, as described in the *Disclosure Booklet*. Note, you cannot change the beneficiary for funds currently in a Uniform Gifts to Minors Act (UGMA) or Uniform Transfers to Minors Act (UTMA) account.

Who is the MESP Beneficiary?	☐ **Same Beneficiary**	☐ **New Beneficiary,** excluding UGMA/UTMA		
Type of Account: *(Check only one.)*	☐ **Individual**	☐ **Custodial** (UGMA/UTMA)	☐ **Entity**	

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Fund and Program Account Number (Leave blank for a new MESP Account.)	*Account Owner Social Security or Taxpayer Identification Number*

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

Beneficiary Name (First, MI, Last, Suffix)

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

Tell us where to deposit your funds and please indicate whether your rollover 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?**
Conservative Age Based Allocation Option	**$**	**%**	☐ Yes OR ☐ No
Moderate Age Based Allocation Option	**$**	**%**	☐ Yes OR ☐ No
Aggressive Age Based Allocation Option	**$**	**%**	☐ Yes OR ☐ No
Principal Plus Interest Option (1934)	**$**	**%**	☐ Yes OR ☐ No
100% Equity Option (1933)	**$**	**%**	☐ Yes OR ☐ No
Balanced Option (2190)	**$**	**%**	☐ Yes OR ☐ No
100% Fixed Income Option (2191)	**$**	**%**	☐ Yes OR ☐ No
TOTAL ROLLOVER CONTRIBUTION AMOUNT	**$**	**100.00%**	

[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.

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

Use a separate *Rollover Form* for each Qualified Tuition Program you maintain for this Beneficiary.

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

Account Owner Social Security or Taxpayer Identification Number

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

Beneficiary Name (First, MI, Last, Suffix)

To my current Qualified Tuition Program: *(Check only one box.)*

Please withdraw funds from my account as requested here, issue a rollover check to the *Michigan Education Savings Program* and mail to the address below.

☐ **Rollover the ENTIRE balance in my account. (Est. Amt.: $ _____.)**

OR

☐ **Rollover a PARTIAL balance in my account, as indicated below.**

Investment Option(s)	Rollover Amount(s)
1.	**$**
2.	**$**
3.	**$**
TOTAL OUTGOING ROLLOVER AMOUNT	**$**

Provide the mailing address for your current Qualified Tuition Program (QTP).

Current QTP Name

Mailing Address Line 1

Mailing Address Line 2

City, State, Zip

5 Signature and Authorization *(Account Owner, Custodian or Authorized Representative of Entity must sign here.)*

By signing below, I certify the following:

- The information contained in this form, and in any accompanying documentation, is true, complete and correct.
- I certify that I have not requested a rollover for the same Beneficiary within the last 12 months.
- If this rollover represents a change of beneficiary, I certify that the new Beneficiary is a "member of the family" of the current Beneficiary, as defined in Section 529 of the Internal Revenue Code.
- If I have enclosed a check for an indirect rollover, then I also certify that this amount was withdrawn from another Qualified Tuition Program or from a Coverdell Education Savings Account. I understand that the *Michigan Education Savings Program* must receive this check within 60 days of the withdrawal to qualify for rollover treatment.

I certify that I am the Account Owner, or I have the authority to act as the Account Owner. (If I am an individual acting in a legal capacity as a representative of the Account Owner, or an entity Account Owner, a medallion signature guarantee stamp appears below.[1])

Signature of Account Owner, Custodian or Authorized Representative of Entity *Date*

GUARANTOR TO AFFIX STAMP HERE

Mail this form to:

Michigan Education Savings Program
PO Box 55925
Boston, MA 02205-5925

Program Administration by TIAA-CREF Tuition Financing, Inc.

IMPORTANT INFORMATION

Your current qualified tuition program 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 qualified tuition program for instructions before mailing this form to the Plan. 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.