



The Vanguard 529 College Savings Plan

Direct Rollover Out to Roth IRA Form

- Complete this form to initiate a direct rollover of assets from your Vanguard 529 Account to an existing Roth IRA account established for the benefit of the Beneficiary.
- The designated beneficiary in **Section 1** will be the responsible tax party who will receive the IRS Form 1099-Q.
- Your rollover will be processed out of your Vanguard 529 Account according to the instructions you provide in **Section 3**.
- Please review **Section 4** to determine whether or not your assets are eligible for rollover to a Roth IRA.
- Please consult with the Roth IRA provider to determine whether there are additional requirements before submitting this form.
- Complete a separate form for each account.
- Complete all sections in blue or black ink and print in capital letters. Be sure to sign and date this form.

Forms can be downloaded from our website at vanguard.com/serviceforms. Or you can call us toll-free to order any form at **866-734-4530** on business days from 8 a.m. to 8 p.m., Eastern time. Return this form and any other required documents in the enclosed postage-paid envelope, or mail to **The Vanguard 529 College Savings Plan, P.O. Box 55111, Boston, MA 02205-5111**. For overnight delivery or registered mail, send to **The Vanguard 529 College Savings Plan, 95 Wells Avenue, Suite 155, Newton, MA 02459-3204**.

1. Vanguard 529 account owner information

Account number	
Last four digits of Social Security number or other taxpayer ID number	
Name of account owner <i>first, middle initial, last</i> or Trust	
Phone number <i>area code, number, extension</i>	
Name of beneficiary	
Last four digits of beneficiary's Social Security number or other taxpayer ID number	

Remember to sign in Section 4.



2. Roth IRA manager or custodian (*Financial institution*)

The receiving Roth IRA must have the same account owner name and Social Security number or taxpayer identification number as the beneficiary of your Vanguard 529 Account.

Please select only one.

A. Move this into the beneficiary's existing VG Brokerage Roth IRA.			
Brokerage account number			
Name of receiving Roth IRA manager Vanguard			
Address of receiving Roth IRA manager P.O. Box 982901	City El Paso	State TX	Zip code 79998-2901

B. Please contact the receiving Roth IRA plan manager or custodian for proper mailing address.			
Account number			
Name of receiving Roth IRA manager or custodian <i>Usually a financial institution</i>			
Address of receiving Roth IRA manager	City	State	Zip code
Phone number <i>area code, number, extension</i>			

3. Instructions to Vanguard 529

The assets described below will be moved from your Vanguard 529 Account to the Financial Institution indicated in **Section 2**.

- The value of the assets being rolled over to the Roth IRA is subject to the annual contribution limit for the taxable year applicable to the beneficiary for all individual retirement plans maintained for the benefit of the beneficiary.
- For any given tax year, you have until your tax-filing deadline (generally April 15 of the following year) to contribute to an IRA. If you take a 529 distribution after December 31, roll it over to a Roth IRA by the tax-filing deadline, and designate it for the prior tax year, the distribution will be reported as a Roth IRA contribution for the prior year. If you don't designate it for the prior year, it will result in a current-year election.

Please indicate tax year (*required—one form per tax year*)

Tax year (yyyy)
Y Y Y Y

Please select only one.

A. Roll over all of the assets in my Vanguard 529 account to the beneficiary's Roth IRA indicated in Section 2.
B. Roll over a partial pro-rated amount of the assets to the beneficiary's Roth IRA.
Dollar amount \$

C. Roll over a partial, fund-specific amount of the assets to the beneficiary's Roth IRA.			
Important: If the dollar amount you indicate for a particular Investment Portfolio exceeds the total balance in the Investment Portfolio as of the previous market close, we will liquidate the total balance of that Investment Portfolio.			
Name of investment portfolio	Dollar amount <i>(For partial amounts.)</i> \$	or	Total balance <i>(Check if applicable)</i>
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4. Authorization—YOU MUST SIGN BELOW

By signing below, I certify that the information contained in this form, and in any required documentation, is true, complete and correct.

Note: The IRS may issue additional guidance that may impact 529 account rollovers to Roth IRAs. Please consult a financial professional or tax advisor regarding the applicability of these rollovers to your personal situation.

- I certify that I have read, understand, consent, and agree to all of the terms and conditions of the Vanguard 529 College Savings Plan Description, and understand the rules and regulations governing rollover contributions to Roth IRAs from 529 plans, and that the rollover I am requesting meets all of the requirements and conditions required for an eligible rollover of assets to Roth IRAs from 529 plans.
- I understand that my 529 account must be open for 15 or more years in order to qualify for a rollover to a Roth IRA.
- I understand that IRS regulations permit a lifetime maximum amount of \$35,000 per beneficiary to be rolled over from 529 accounts to Roth IRAs.
- I understand that 529 contributions and associated earnings must be in my account for more than 5 years in order to qualify for a rollover to a Roth IRA.
- I understand that I am responsible for tracking and documenting the length of time my 529 account has been open and the amount of assets in my 529 account eligible to be rolled into a Roth IRA.
- I understand that 529 assets can only be rolled over into a Roth IRA maintained for the benefit of the beneficiary on my 529 account.
- I understand that the Roth IRA contribution is subject to the Roth IRA contribution limit for the taxable year applicable to the beneficiary for all individual retirement plans maintained for the benefit of the beneficiary.
- I understand that if this rollover does not meet the requirements of the Roth IRA provider, my contribution may be rejected.

Name of current account owner <i>or authorized person</i>	
Signature of account owner X	Today's date <i>mm dd yyyy</i> M M - D D - Y Y Y Y

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