

Important information about this form:

- Fill out this form to make a full or partial rollover from your Oregon College Savings Plan account to a Roth IRA account. If the beneficiary has an OregonSaves IRA Account, the funds can be sent directly to the Roth IRA. If this is the case, simply put your OregonSaves information in Step 3 of this form.
- Carefully read the Oregon College Saving Plan Description and Participation Agreement before completing this form. This rollover may have tax consequences. The Account Owner and Beneficiary/Roth IRA Owner are solely responsible for complying with all relevant federal and state laws and IRS requirements, including any rules or guidance released by the IRS in the future. You should speak with a qualified tax professional prior to making a 529 to Roth IRA rollover.
- We are required to file an IRS Form 1099-Q when you make a rollover from your 529 account.
- Use black ink to type or print clearly, and do not staple the sheets together.

Important information about 529 to Roth IRA Rollover

Assets in a 529 Qualified Tuition Program (“529 Plan”) account must meet all IRS requirements and guidelines to be moved to a Roth IRA owned by the 529 Plan account Designated Beneficiary via a direct rollover. **The information below is not intended as legal or tax advice**, nor can it be cited as such, as it does not constitute a complete description of IRS requirements or guidance. Requirements include:

- A. The Roth IRA must be owned by the 529 Plan account Designate Beneficiary.
- B. The 529 Plan account must have been maintained for at least 15 years.
- C. The rollover may not exceed the aggregate amount of contributions (and earnings that are attributable to such contributions) to the 529 Plan account made prior to the five year period ending on the date of the rollover.
- D. The rollover from the 529 Plan account must occur after December 31, 2023.
- E. The rollover will be issued in the form of a check payable to: “IRA Custodian, FBO [the 529 Beneficiary/Roth IRA owner’s name].”
- F. The 529 to Roth IRA rollover limit is subject to a lifetime maximum of \$35,000 for all rollovers from any 529 Plan account to any Roth IRA owned by the applicable 529 Plan beneficiary, and an annual maximum equal to the general Roth IRA contribution limit for the Designated Beneficiary each year.
 - a. Maximum annual Roth IRA contribution limits can be found on the IRS website at: <https://www.irs.gov/retirement-plans/traditional-and-roth-iras>.

Need help?

Give us a call Monday – Friday
from 6am – 5pm PT at
1-866-772-8464

Individuals with speech or hearing disabilities may dial 711 to access Telecommunications Relay Service (TRS) from a telephone or TTY.

Mail the form to:

Oregon College Savings Plan
P.O. Box 534440
Pittsburgh, PA 15253-4440

Overnight Mail:

Oregon College Savings Plan
Attention: 534440
500 Ross Street, 154-0520
Pittsburgh, PA 15262

Fax:

833-286-8172

1 Oregon College Savings Plan Account Owner Information

IMPORTANT: Distributions paid directly to the Owner or Beneficiary of a 529 account are not eligible for future tax-/penalty-free rollovers to a Roth IRA. Therefore, rollover checks will be made payable to the Roth IRA Custodian named in Step 3 “FBO [Oregon College Saving Plan Beneficiary/Roth IRA Owner]”. The check will be mailed to the Roth IRA Custodian. We suggest you consult with your Roth IRA Custodian for information on further processing prior to filling out this form. Please note that if the rollover amount exceeds in whole or in part the applicable limits on the 529 to Roth IRA rollovers, such excess will be subject to applicable federal and state income taxes, including tax penalties applicable to non-qualified distributions from a 529 Plan account.

Oregon College Savings Plan Account Number

Name of Account Owner (First and last)

____ - ____ - _____
Account Owner’s Social Security or Taxpayer Identification Number

____ - ____ - _____
Account Owner’s Telephone number

2 Oregon College Savings Plan Beneficiary/Roth IRA Owner Information

Name of Beneficiary/Roth IRA Owner (First and last)

____ - ____ - _____
Beneficiary/Roth IRA Owner’s Social Security or Taxpayer Identification Number

____ - ____ - _____
Beneficiary/Roth IRA Owner’s Telephone number

Beneficiary/Roth IRA Owner’s Mailing address

This is the address to which your 1099-Q will be sent.

Street address 1

Street address 2

City

State

____ - ____ - _____
Zip Code

3 Roth IRA Rollover Instruction (All fields required)

Please indicate whether this is a full or partial rollover.

Check here if this is a **full rollover**. This will liquidate your 529 account.

The value of the full rollover is dependent upon the market value of the account at the time the liquidation is processed. Please be aware that the Roth IRA custodian may reject full rollovers that exceed the annual contribution maximum and such excess will be subject to applicable federal and state income taxes, including tax penalties applicable to non-qualified distributions for a 529 Plan account.

Check here if this a **partial rollover**. Please Complete **Step 4**.

Please indicate the tax year(s) to which this rollover applies.

If you indicate more than one contribution year, please advise your Roth IRA custodian on how you would like your rollover applied. **IMPORTANT:** Prior year contributions can only be made until the current year's tax day – typically April 15th. Please refer to the irs.gov website for the current and prior tax year contribution limits.

20 ____ \$ __, ____ . ____
Current year contribution **Amount**

20 ____ \$ __, ____ . ____
Prior year contribution **Amount**

Name of Receiving Roth IRA Custodian (Check will be sent to the Roth IRA Custodian and be made payable to Roth IRA Custodian, FBO Oregon College Savings Plan Account Beneficiary/Roth IRA Owner)

Roth IRA Account Number

Roth IRA Custodian Mailing address

PO boxes are accepted.

Street address 1

Street address 2

City

State

____ - ____ - ____
Zip Code

4 Partial Rollover – Source Fund Election

Only complete this section if you selected “Partial Rollover” in **Step 3**.

Indicate the amount to be withdrawn from the portfolios of your choosing. Be sure to only elect from portfolios in which you currently have a balance. (See Appendix on page 7 for Portfolio Codes.)

____	_____	\$ ____ , ____ . ____
Code	Portfolio Name	Amount

____	_____	\$ ____ , ____ . ____
Code	Portfolio Name	Amount

____	_____	\$ ____ , ____ . ____
Code	Portfolio Name	Amount

____	_____	\$ ____ , ____ . ____
Code	Portfolio Name	Amount

____	_____	\$ ____ , ____ . ____
Code	Portfolio Name	Amount

	\$ ____ , ____ . ____
	Total rollover amount

5 Sign the form

The signature and acknowledgement of both the Oregon College Saving Plan Account owner and Beneficiary/Roth IRA Owner are required. In the event the two are the same, a signature is required in each space below, or the request may not be processed.

Oregon College Savings Plan Account Owner Attestation

- As the Account Owner of the Oregon College Savings Plan account, by signing below, I understand that the IRS may issue guidance that may impact a rollover from the 529 Account to a Roth IRA. I also understand that additional restrictions may apply under federal Roth IRA rules and guidance.
- I certify that I have read, understand, consent, and agree to all of the terms and conditions of the Plan Disclosure Booklet, 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 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 Account has been open and the amount of assets in my 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 of my 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.
- In the event that these funds must be returned to the 529 account I understand that it will be treated as a new contribution to the 529 account and will therefore no longer be eligible to rollover to a Roth IRA for five years.
- I agree that neither the Oregon College Savings Plan Program Manager, nor the Oregon College Savings Plan Custodian nor the Oregon State Treasury shall have responsibility for any such tax consequences or any other consequences resulting from this amount being deemed ineligible for rollover in whole or in part.

Signature of Oregon College Savings Plan Account Owner

___/___/___
Date (mm/dd/yyyy)

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Oregon College Savings Plan Account Beneficiary / Roth IRA Owner Attestation:

- As the Owner of the Roth IRA account, by signing below, I certify that I am also the Beneficiary of the Oregon College Savings Plan Account referenced above.
- I understand that the IRS may issue guidance that may impact a rollover from the 529 Account to a Roth IRA. I also understand that additional restrictions may apply under federal Roth IRA rules and guidance.
- I certify that I have read, understand, consent, and agree to all of the terms and conditions of the Plan Disclosure Booklet, 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 the 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 the 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 the Account has been open and the amount of assets in my 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 of the 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.
- In the event that these funds must be returned to the 529 account I understand that it will be treated as a new contribution to the 529 account and will therefore no longer be eligible to rollover to a Roth IRA for five years.
- I agree that neither the Oregon College Savings Plan Program Manager, nor the Oregon College Savings Plan Custodian nor the Oregon State Treasury shall have responsibility for any such tax consequences or any other consequences resulting from this amount being deemed ineligible for rollover in whole or in part.

**Signature of the Oregon College Savings Plan Account Beneficiary /
Roth IRA Owner**

____ / ____ / ____
Date (mm/dd/yyyy)

Appendix – Oregon College Savings Plan Portfolio Options

College Enrollment Year

Code	Portfolio Name
ORC42	Enrollment Year 2042
ORC41	Enrollment Year 2041
ORC40	Enrollment Year 2040
ORC39	Enrollment Year 2039
ORC38	Enrollment Year 2038
ORC37	Enrollment Year 2037
ORC36	Enrollment Year 2036
ORC35	Enrollment Year 2035
ORC34	Enrollment Year 2034
ORC33	Enrollment Year 2033
ORC32	Enrollment Year 2032
ORC31	Enrollment Year 2031
ORC30	Enrollment Year 2030
ORC29	Enrollment Year 2029
ORC28	Enrollment Year 2028
ORC27	Enrollment Year 2027
ORC26	Enrollment Year 2026
ORC25	Enrollment Year 2025
ORC24	Enrollment Year 2024
ORC23	Enrollment Year 2023
ORC22	Enrollment Year 2022
ORC21	Enrollment Year 2021
ORC20	Enrollment Year 2020
ORC19	Enrollment Year 2019
ORC18	Enrollment Year 2018

Static Portfolios

Code	Portfolio Name
ORCCO	Target Risk – Conservative
ORCMO	Target Risk – Moderate
ORCAG	Target Risk – Aggressive
ORCDU	Diversified U.S. Equity
ORCDI	Diversified International Equity
ORCDF	Diversified Fixed Income
ORCIN	Diversified Inflation Protection
ORCBI	Balanced Index
ORCSC	Social Choice Balanced
ORCSF	Short-Term Fixed Income Index
ORCUE	U.S. Equity Index
ORCIE	International Equity Index
ORCFI	Fixed Income Index
ORCXX	FDIC-Insured Option

The investment information on this page has been provided by Sellwood Consulting, the investment advisor for the Oregon College Savings Plan. Before you make a decision, review the Plan Disclosure Booklet to learn about the important details and risks of each investment option.