

**SIT MUTUAL FUNDS**  
**COVERDELL EDUCATION SAVINGS ACCOUNT ROLLOVER CERTIFICATION FORM**

Sit Mutual Funds    PO Box 9763    Providence, RI 02940    1-800-332-5580

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Use this form to certify a rollover distribution from a current Coverdell ESA to a Sit Mutual Funds Coverdell ESA. You must complete the rollover within 60 calendar days of your receipt of that distribution.

**Designated Beneficiary of Coverdell ESA:**

|        |        |           |                        |
|--------|--------|-----------|------------------------|
| First  | Middle | Last Name | Social Security Number |
| Street |        |           | / /                    |
| City   |        |           | ( )                    |
|        | State  | Zip Code  | Telephone Number       |

**Responsible Individual:**

|        |        |           |                        |
|--------|--------|-----------|------------------------|
| First  | Middle | Last Name | Social Security Number |
| Street |        |           |                        |
| City   |        |           | ( )                    |
|        | State  | Zip Code  | Telephone Number       |

**Rollover Contribution Amount: \$** \_\_\_\_\_

I, as the Responsible Individual for the above account, certify the following statements are true and correct:

1. This rollover contribution is from another Coverdell Education Savings Account, and not from a Traditional, SEP, SIMPLE or Roth IRA or from a qualified plan, qualified annuity, 403(b) plan or 457 plan.
2. This rollover contribution is being made within 60 days after the distribution from another Coverdell Education Savings Account in which the above-named designated beneficiary was either the original designated beneficiary or is an eligible family member of the original designated beneficiary.
3. During the 12-month period prior to this distribution being rolled over, the Designated Beneficiary has not received a distribution from the same Coverdell Education Savings Account which was subsequently rolled over to another Coverdell Education Savings Account, and the distribution being rolled over has not been part of a distribution from another Coverdell Education Savings Account that was subsequently rolled over.
4. The property received in the distribution from the distributing Coverdell Education Savings Account is the same property being rolled over into this Coverdell Education Savings Account.

I agree that I am solely responsible for all tax consequences of this rollover contribution. I also agree that neither the Custodian, Sit Mutual Funds, nor any agent of either of them has any responsibility for any tax consequences.

**I have read, understand, and agree to be legally bound by the terms of the Sit Mutual Funds Coverdell ESA Custodial Agreement.** I also understand that the Custodian will rely on this form when accepting this rollover contribution. I understand that this rollover is irrevocable and may not be reversed in the future. I also understand that I am responsible for the movement of the rollover to the successor Coverdell ESA, and that neither Sit Mutual Funds, PFPC Inc., PFPC Trust Company, nor their agents, have any duty to enforce the collection of any assets to be rolled over to the above Sit Mutual Funds Coverdell ESA.

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**Responsible Individual's Signature**

**Date**