

### Important information about this form:

- Fill out this form to change the investment option on your Alabama ABLE account.
- You can only make two investment changes per calendar year.
- All investment strategy changes submitted at the same time would be counted as one strategy change.
- When you transfer money FROM an investment option, there is a \$5 withdrawal minimum. Unless you decide to withdraw all the funds from a portfolio, you can withdraw up to 95% of the portfolio's balance.
- When you transfer money TO an investment option, there is a \$5 contribution minimum to each portfolio or fund you wish to add money to.
- Make sure you use black ink to type or print clearly in capital letters.

### Need help?

Give us a call Monday – Friday from 8am – 7pm CT at **1-833-711-2253**

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

### Mail the form to:

Alabama ABLE  
P.O. Box 534419  
Pittsburgh, PA 15253- 4419

### Overnight Mail:

Alabama ABLE  
Attention: 534419  
500 Ross Street, 154-0520  
Pittsburgh, PA 15262

### Fax:

833-223-5121

## 1 ABL account information

\_\_\_\_\_  
Name of Beneficiary on the ABLE Account (First and last)

\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
Beneficiary's Social Security or Taxpayer Identification Number

\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
Alabama ABLE account number

## 2 Investment change instructions

These changes apply only to the assets currently in your account. In the “Reallocate funds FROM” section, please indicate the investment option with the corresponding dollar amount from which you are reallocating assets. In the “Reallocate funds TO” section, please indicate the investment option with the corresponding amount to which you are reallocating assets. If you’d like to complete reallocations from more than 3 portfolios, please submit multiple copies of this page of this form. All reallocations will be processed together and will only count as one investment change.

Please read the Alabama ABL **Program Description & Participation Agreement** for important information about the cash and investment options before making a decision.

### Reallocation #1:

#### A Move funds FROM the following option:

\_\_\_\_\_   
 Portfolio name

Select one:

Partial Amount

Liquidate this portfolio in full

\$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

#### B Move funds TO the following option(s):

Conservative Portfolio \$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_   
 Amount (per pay period)

Moderate Portfolio \$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_   
 Amount (per pay period)

Aggressive Portfolio \$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_   
 Amount (per pay period)

FDIC Savings Fund \$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_   
 Amount (per pay period)

\_\_\_\_\_   
 \$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_   
 Total Contribution Amount

## Reallocation #2

**A** Move funds FROM the following option:

\_\_\_\_\_

Portfolio name

Select one:

Partial Amount

Liquidate this portfolio in full

\$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

**B** Move funds TO the following option(s):

Conservative Portfolio

\$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_  
Amount (per pay period)

Moderate Portfolio

\$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_  
Amount (per pay period)

Aggressive Portfolio

\$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_  
Amount (per pay period)

FDIC Savings Fund

\$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_  
Amount (per pay period)

\_\_\_\_\_  
\$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_  
Total Contribution Amount

## Reallocation #3

**A** Move funds FROM the following option:

\_\_\_\_\_   
 Portfolio name

Select one:

Partial Amount

Liquidate this portfolio in full

\$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

**B** Move funds TO the following option(s):

Conservative Portfolio

\$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_   
 Amount (per pay period)

Moderate Portfolio

\$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_   
 Amount (per pay period)

Aggressive Portfolio

\$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_   
 Amount (per pay period)

FDIC Savings Fund

\$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_   
 Amount (per pay period)

\_\_\_\_\_   
 \$ \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_   
 Total Contribution Amount

**5 Sign the form**

By signing below, I am agreeing to the terms and conditions set forth below and in the **Program Description & Participation Agreement**. I understand and agree that those documents govern all aspects of this Account and are incorporated herein by reference.

I certify that all of the information provided by me on this form is, and all information provided by me in the future will be, true, complete and correct and I authorize the Program to open this Account based upon this information.

I certify and understand the following:

- An investment change of funds among investment portfolios for my account can only be requested twice per calendar year.
- I authorize the investment change of assets in my account per my instructions in **Step 2**.
- If I am making contributions by payroll deduction or monthly transfer, I understand that those recurring contributions will continue into my previously designated investment portfolio(s) unless updated by me.
- I understand that if I set up an online gifting page, gift contributions made to this account will continue being made to the investment portfolio I designated when setting up the page, unless updated by me.
- I understand that this investment change of funds will become effective upon the Program's receipt of this form in good order.

\_\_\_\_\_  
**Signature of Beneficiary or Authorized Legal Representative**

\_\_\_ / \_\_\_ / \_\_\_\_\_  
**Date (mm/dd/yyyy)**