

THE AIM COLLEGE SAVINGS PLAN® ROLLOVER FORM

Use this form to roll over assets from another 529 Plan, a Coverdell Education Savings Account or a U.S. savings bond to an account in The AIM College Savings Plan (The Plan). If you do not have an existing account in The Plan, please submit this form along with a completed The AIM College Savings Plan Account Application. An account must be established for your assets to roll over as requested.



Please complete all applicable sections and return to The AIM College Savings Plan.

For assistance with completing this form or additional information, ask your financial advisor or call an Invesco Aim Client Service representative at 877-AIM-PLAN (246-7526), weekdays, 7:30 a.m. to 6 p.m. Central Time. We recommend that you speak with a tax advisor or a financial advisor regarding this rollover.

PLEASE USE BLUE OR BLACK INK

PLEASE PRINT CLEARLY IN BLOCK CAPITAL LETTERS

1 The AIM College Savings Plan Account Information

Existing The AIM College Savings Plan Account Number (Leave blank if submitted with a new application.)

Account Owner's Name

Account Owner's Social Security Number or Tax Identification Number

Daytime Phone Number

Evening Phone Number

Beneficiary's First Name

M.I.

Last Name

Beneficiary's Social Security Number (Required)

2 Releasing Institution's Account Information

Please select the type of investment your proceeds are being transferred from:

- 529 Prepaid Tuition Program 529 College Savings Plan
 Coverdell Education Savings Account U.S. Savings Bond

Name of Releasing Institution

Mailing Address

City

State

ZIP

Account Number

Beneficiary's First Name

M.I.

Last Name

Beneficiary's Social Security Number (Required)

3 Rollover Instructions For Releasing Institution

Please check one of the following boxes to indicate how the distribution should be processed.

Direct rollover of the entire account value.

Direct rollover in the amount of: \$, .

\$, . or % from the _____ fund/investment.

\$, . or % from the _____ fund/investment.

\$, . or % from the _____ fund/investment.

\$, . or % from the _____ fund/investment.

\$, . or % from the _____ fund/investment.

I have already withdrawn the funds and wish to deposit them into The Plan.

Please note:

Your rollover must be completed within 60 days and you must provide the appropriate documentation detailed in Section 4 indicating the earnings portion of the investment. If more than 60 days pass before depositing the proceeds into the new account, the contribution will not be treated as a qualified rollover but as a regular contribution. This distribution may result in tax consequences and penalties. Please seek advice from your tax advisor or financial advisor for more information regarding this issue.

4 Principal and Earnings (This section to be completed by the releasing institution for direct rollover requests.)

The institution releasing the proceeds must provide the earnings portion of the investment. If this information is not provided, the entire contribution will be treated as investment earnings and will be taxed as such at the time of withdrawal unless Invesco Aim Investment Services, Inc. receives the appropriate documentation detailed below:

- In the case of an investment transferred from another 529 Plan, a statement issued by the releasing institution detailing the earnings portion of the distribution.
- In the case of an investment transferred from a Coverdell Education Savings Account, statements issued by the releasing institution reflecting all contributions made over the life of the account.
- In the case of an investment transferred from a U.S. savings bond, a statement or Form 1099-INT issued by the releasing financial institution detailing the interest from the distribution.

Total amount being transferred: \$, .

Amount deemed as earnings: \$, .

Amount deemed as principal: \$, .

5 Investment Options

Your initial investment in the AIM College Savings Plan account will be invested based on your portfolio selection below. You may invest part of your money in the model portfolios and/or the portfolios invested in individual fund portfolio options. Please review the descriptions of the portfolios in the Enrollment Handbook before indicating your investment options.

Enrollment-Based Portfolios ¹	Share Class			Model Portfolios			
	A	B	C	Fixed-Allocation Portfolios ²	A	B	C
	Portfolio Number				Portfolio Number		
Enrollment-Based Portfolios	EBA	EBB	EBC	AIM Conservative Allocation Fund 529 Portfolio	5581	5681	5781
				AIM Growth Allocation Fund 529 Portfolio	5577	5677	5777
				AIM Moderate Allocation Fund 529 Portfolio	5579	5679	5779
				AIM Moderate Growth Allocation Fund 529 Portfolio	5578	5678	5778
				AIM Moderately Conservative Allocation Fund 529 Portfolio	5580	5680	5780

Individual Fund Portfolio Investment Options

Individual Fund Portfolio Options	Share Class		
	A	B	C
	Portfolio Number		
AIM Money Market Fund 529 Portfolio	5521	5621	5721

¹ The Enrollment-Based Portfolios are a series of seven investment portfolios designed to fit particular investment time horizons, based on the anticipated year the beneficiary will enroll in an institution of higher education. If you elect to invest in the Enrollment-Based Portfolios, the investment manager will invest your contributions in the appropriate portfolio and will reallocate your investments as the beneficiary nears enrollment. For more information regarding this process, see the Enrollment Handbook. If you do not provide the anticipated year the beneficiary will enroll in an institution of higher education, your initial investment will be made based on the assumption that enrollment will begin when the beneficiary turns 18 years of age.

The Enrollment-Based Portfolio numbers above are for account setup purposes only. Your account statement will reference the portfolio and the appropriate portfolio number your initial investment purchased.

² The Fixed-Allocation Portfolios offer you an aggressive growth strategy, a growth strategy or a balanced strategy for the duration of your investment. You may make a change in your investment strategy once per calendar year if your current strategy no longer meets your investment needs.

Please indicate your investment option(s) and investment amount(s). PLEASE SELECT ONE SHARE CLASS PER PORTFOLIO.

Please Note:

- If a class of shares is not indicated, the investment(s) will be made into **Class C shares**.
- Class B shares cannot be purchased for a beneficiary who is **over 13 years of age**. Contributions received on or after the beneficiary's 13th birthday will be invested in Class C shares unless you direct Invesco Aim Investment Services, Inc. otherwise.

Portfolio Number (Please choose from above listed options.)	Name of Portfolio or Individual Fund Portfolio	Share Class	Amount
1. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	<input type="checkbox"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
2. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	<input type="checkbox"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
3. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	<input type="checkbox"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
4. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	<input type="checkbox"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
5. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	_____	<input type="checkbox"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
		Total	\$ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>

6 Rollover Authorization and Signature

I have established an account in The AIM College Savings Plan (The Plan). Please accept this request as your authorization and instruction to liquidate assets noted, which your company currently holds for me. I understand if the information required in Section 4 is not provided by the releasing institution the entire contribution may be treated as earnings, resulting in a possible taxable event at the time of withdrawal. I understand if a distribution has already taken place and the deposit is not made into The Plan within 60 days the contribution will not be treated as a qualified rollover but as a regular contribution with a possible tax consequence and penalty.

Signature _____ Date / /

Month Day Year

Signature _____

Date / /
Month Day Year

Please note: The releasing institution holding your current investment may require this signature to be guaranteed. Please call that institution for its requirements.

<p>Signature Guarantee:</p> <p>(Please Place Signature Guarantee stamp here)</p>	<p>Each signature must be guaranteed by a bank, broker-dealer, savings and loan association, credit union, national securities exchange or any other "eligible guarantor institution" as defined in rules adopted by the Securities and Exchange Commission. Signatures may also be guaranteed with a medallion stamp of the STAMP program or the NYSE Medallion Signature Program, provided that the amount of the transaction does not exceed the relevant surety coverage of the medallion. Additionally, we will not be able to accept a stamp indicating "endorsement guarantee."</p>
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7 Invesco Aim Acceptance (This section to be completed by Invesco Aim.)

This is to advise you that Invesco Aim will accept the account identified above for:

Depositor's Name

Account Number

Authorized Signature  _____

Date / /
Month Day Year

Please make checks payable to: The AIM College Savings Plan.

We reserve the right to reject any application or payment such as temporary, credit card or third-party checks.

Please mail your check with this rollover form to the location below:

<i>(Direct Mail)</i>	<i>(Overnight Mail)</i>
Invesco Aim Investment Services, Inc. P.O. Box 4739 Houston, TX 77210-4739	Invesco Aim Investment Services, Inc. 11 Greenway Plaza, Ste. 100 Houston, TX 77046

Proceeds Sent by Wire

Please mail this rollover form to the address listed under the "checks payable" section. Call the transfer agency at 877-246-7526 or 877-AIM-PLAN to receive a reference number. Then use the following wire instructions:

Beneficiary Bank ABA/Routing #: 113000609
 Beneficiary Account #: 00100366807
 Beneficiary Account Name: Invesco Aim Investment Services, Inc.
 RFB: Portfolio name, reference #
 OBI: Client's name, account #

Invesco Aim Website (invescoaim.com)

The Invesco Aim website gives you 24-hour access to The AIM College Savings Plan. By using the website, you can obtain the most up-to-date information about your account.

- Obtain portfolio prices
- Confirm your account transaction history
- Retrieve account forms and investor education materials
- Verify your share balance and net asset value
- Obtain the most recent quarter-end account balance
- Download to Quicken® or Microsoft® Money



Program Trustee

