

# Withdrawal Request Form

Please complete this form to request a withdrawal from your LoneStar 529 Plan® account. A separate form must be completed for each Account from which you would like to make a withdrawal.

Print clearly, in CAPITAL LETTERS, and use black ink. When requested, please color in circles completely. For example: ● not ⊗ not ⊙

If you have questions or would like help completing this form, please call us at **1.800.445.GRAD (4723), option #4**, Monday through Friday from 8am to 6pm Central Time. Return this form and any required documents to:

LoneStar 529 Plan  
c/o NorthStar Financial Services Group, LLC  
P.O. Box 540010  
Omaha, NE 68154  
Fax: **1.402.431.4452**

## 1 | Account Information

The following information is needed for any type of withdrawal being requested.

Account Owner's first name or Custodian's or Entity name	Middle initial	Last name	
Account number			Social Security/Taxpayer ID number
If Trust, Trustee name	Middle initial	Last name	Date of Trust (mm/dd/yyyy)
Street address			( )
City	State	Zip	Daytime phone number
Designated Beneficiary's first name	Middle initial	Last name	( )
Street address			Evening phone number
City	State	Zip	Social Security/Taxpayer ID number

If you want your distribution check sent to an address that is different from the account or above address, please indicate that address in Section 3 and have your signature guaranteed in Section 5.

## 2 | Withdrawal Information

Please complete this section if you are requesting a withdrawal from your LoneStar 529 Plan.

**Type of Withdrawal**  
 Qualified Withdrawal     Nonqualified Withdrawal

**Amount of Withdrawal**  
 Full Withdrawal: This distribution will liquidate all units of all portfolio(s) in my account  
 Partial Withdrawal: \$\_\_\_\_\_ This distribution amount will be liquidated proportionately from among my current Elected Investment Allocation  
 Partial Withdrawal: As listed below:

Name of Portfolio Option	Dollar Amount	or	Total Balance (check if applicable)
_____	\$ _____		<input type="radio"/>
_____	\$ _____		<input type="radio"/>
_____	\$ _____		<input type="radio"/>
_____	\$ _____		<input type="radio"/>
_____	\$ _____		<input type="radio"/>
_____	\$ _____		<input type="radio"/>
_____	\$ _____		<input type="radio"/>

### 3 | Payment Instructions

Indicate recipient of payment.  
(Choose only one.)

- Account Owner on Record**  
Check will be made payable to the Account Owner and sent to the address on record.
- Designated Beneficiary on Record**  
Check will be made payable to the Designated Beneficiary and sent to the address on record.
- Direct Payment to an Eligible Institution of Higher Education**

Name of eligible post-secondary institution		For Account of: Name of Designated Beneficiary	
Social Security/Taxpayer ID number			
Mailing address	City	State	Zip

- Alternate Payee**  
A guaranteed signature is required in Section 5 if an alternate payee or address is selected.

Individual's first name or Entity name	Middle initial	Last name	
Street address	City	State	Zip

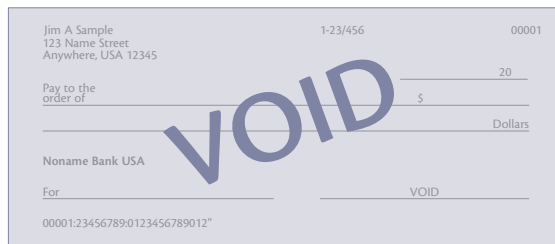
- Direct Payment to Your Bank** (please include a voided check)  
Your bank account will be credited within three to five business days from the date this form is received in good order.

If I change banks, I agree to notify the LoneStar 529 Plan promptly in writing. I agree to give adequate notice (normally 15 days) to terminate this service. I understand that if a transaction cannot be made because the account has been closed, this service will be canceled by the LoneStar 529 Plan and I agree to return promptly any amount overpaid to me from a redemption of units. I understand that any of the features and privileges described herein may be modified, suspended or canceled by the LoneStar 529 Plan or the applicable portfolio at any time without notice and that all services described herein are subject to the terms of the LoneStar 529 Plan Description and Savings Trust Agreement, as amended from time to time, which I acknowledge I have received and read. I further agree that neither the LoneStar 529 Plan, NorthStar Financial Services Group, LLC, nor any of its subsidiaries or affiliates, will be liable for any loss, liability, cost or expenses for acting upon my written instructions, except to the extent permitted by applicable law.

X \_\_\_\_\_ X \_\_\_\_\_  
Signature(s) of Bank Account Owner(s)

We cannot establish options to transfer money electronically between your bank and fund accounts without pertinent bank information.

You must enclose a voided check or preprinted deposit slip.



## 4 | Signature Authorization

I certify that the information I have provided with respect to my LoneStar 529 Plan account is true, complete and correct. I authorize NorthStar Financial Services Group, LLC, including its subsidiaries and affiliates (NorthStar), to process the disbursement from the LoneStar 529 Plan account indicated in this instruction. I agree that the LoneStar 529 Plan, the applicable portfolio, NorthStar, and any officers, managers, directors, employees, or agents of NorthStar, will not be liable for any loss, cost, or expense for acting upon my instructions, if it follows reasonable procedures designed to prevent unauthorized transactions.

I understand that NorthStar and the LoneStar 529 Plan do not determine whether a withdrawal is qualified or not. Receipts and other forms of substantiation do not need to be submitted to the program. I acknowledge that I am responsible for reporting this distribution in accordance with the current IRS rules, including applicable penalties, and further acknowledge that, even though this withdrawal was processed, it may not be considered qualified by the IRS.

**You must sign and date below to complete this application.**

X

\_\_\_\_\_  
Signature of Account Owner, Custodian or Trustee

\_\_\_\_\_  
Date

## 5 | Signature Guarantee

A signature guarantee is a warranty by a participant in a Securities Transfer Association Signature Guarantee Program that the signature is genuine and that the person signing is competent and authorized to sign. Many domestic banks or trust companies, credit unions, brokers, dealers, national securities exchanges, registered securities associations, clearing agencies or savings associations participate in such programs.

**A signature guarantee is required if you:**

- Withdraw money and the check is payable to a third party other than an Eligible Institution of Higher Education or your Designated Beneficiary; provided he/she resides at the address of record
- Withdraw more than \$100,000
- Are requesting a withdrawal and your or your beneficiary's address of record has changed within 30 days of the date of withdrawal
- Are requesting a withdrawal with payment to a bank whose information is not currently established on this account

Your signature(s) must correspond in every particular, without alteration, with your name(s) as printed on the current account registration.

**Acknowledgment of signature by a notary public is NOT acceptable. Please affix signature guarantee ink stamp below with appropriate signature, title of officer and date.**

Affix medallion stamp here.

X

\_\_\_\_\_  
Signature guarantee (if required)

**Before you mail, have you:**

- Entered all Account Owner and Designated Beneficiary information in Section 1
- Included a voided check or preprinted savings account deposit slip (if applicable)
- Signed your Withdrawal Request
- Obtained a signature guarantee (if applicable)

The LoneStar 529 Plan® is established and maintained by the Texas Prepaid Higher Education Tuition Board and distributed by Northern Lights Distributors, LLC, Member FINRA/SIPC. NorthStar Financial Services Group, LLC, the parent company of Northern Lights Distributors, LLC, is the Plan manager and administrator of the Plan.

As stated in the current Plan Description and Savings Trust Agreement, total Plan fees for the portfolios range from 0.66% to 2.48% with a maximum sales charge of 5.75% and are subject to change.

Some states offer favorable tax treatment to their residents only if they invest in the state's own plan. Non-residents of Texas should consider whether their home state, or the beneficiary's home state, offers its residents any state tax or other state benefits, such as financial aid, scholarship funds, and protection from creditors that are only available for participants in that state's 529 plan.

You could lose money by investing in this investment option. Although the money market fund in which your investment option invests (the "underlying fund") seeks to preserve its value at \$1.00 per share, the underlying fund cannot guarantee it will do so. An investment in this investment option is not insured or guaranteed by the Federal Deposit Insurance Corporation or any other government agency. The underlying fund's sponsor has no legal obligation to provide financial support to the underlying fund, and you should not expect that the sponsor will provide financial support to the underlying fund at any time.

No part of an account, the principal invested nor any investment return, is insured or guaranteed by the FDIC, the state of Texas, the Texas Prepaid Higher Education Tuition Board, any other state or federal governmental agency or NorthStar or its affiliates. An account might not make money and could lose money (including the principal invested) if money is invested in the Plan. Interests in the Plan have not been registered with the U.S. Securities and Exchange Commission or with any state.

**Before investing in the Plan, investors should carefully consider the investment objectives, risks, administrative fees, service and other charges and expenses associated with municipal fund securities. The Plan Description and Savings Trust Agreement contains this and other information about the Plan and may be obtained by visiting [www.lonestar529.com](http://www.lonestar529.com) or calling 1.800.445.GRAD (4723), Option #4. Investors should read these documents carefully before investing.**

Comments or complaints may be forwarded to the Prepaid Higher Education Tuition Program, Office of the Comptroller of Public Accounts, at P.O. Box 13407, Austin, Texas 78711-3407 or at 1.512.936.2064.

"LoneStar 529 Plan" is a registered service mark of the Texas Prepaid Higher Education Tuition Board.  
All rights reserved.

The LoneStar 529 Plan is distributed by Northern Lights Distributors, LLC Member FINRA, SIPC  
17605 Wright Street, Omaha, NE 68130  
©Copyright 2018 NorthStar Financial Services Group, LLC. All rights reserved.

LS-006 January 1, 2018

**LONESTAR**  
529 PLAN<sup>SM</sup>