

**Indiana529**

**Direct Savings Plan**

# Indiana529 Direct Savings Plan Organization Resolution Form

- Complete a separate form for each Account Owner for whom the organization serves as an agent.
- This form identifies the officers or other persons who are authorized to conduct transactions on Indiana529 Direct Savings Plan (Indiana529) Account(s) on behalf of an organization.
- Organizations covered by this form include: corporations; partnerships; limited liability companies; professional corporations or associations; endowments; business trusts; and other entities or organizations.
- This form requires the signature of two authorized persons from your organization, one of whom must be the secretary or other authorized person who can certify the names of those authorized to access and transact on an Account. If your organization has only one authorized signatory, then a bank officer, practicing attorney, or member of a domestic stock exchange must countersign this form.
- This resolution remains in effect until we have been notified in writing that it has been revoked or a new **Organization Resolution Form** has been submitted. You must file a new Organization Resolution Form when there is any change in the identity of the persons authorized to act on behalf of your organization.
- Type in your information and print out the completed form, or print clearly, preferably in capital letters and black ink. Mail the form to the address below. Do not staple.

Forms can be downloaded from our website at [www.indiana529direct.com](http://www.indiana529direct.com), or you can call us to order any form—or request assistance in completing this form—at **1.866.485.9415** any business day from 8 a.m. to 8 p.m. E.T. Terms used in this form not otherwise defined, have the same meaning as those terms used in the Indiana529 Direct Savings Plan Disclosure Booklet (Disclosure Booklet).

Return this form and any other required documents to:	For overnight delivery or registered mail, send to:
<b>Indiana529 Direct Savings Plan</b>	<b>Indiana529 Direct Savings Plan</b>
<b>P.O. Box 219418</b>	<b>1001 E 101st Terrace, Suite 200</b>
<b>Kansas City, MO 64121</b>	<b>Kansas City, MO 64131</b>

## 1. Organization information

Name of Organization

Address

City

State

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Zip Code

Firm Tax ID Number







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