New York's 529 College Savings Program Direct Plan

## **Recurring Contribution (Automatic Investment Plan) Electronic Bank Transfer Form**



- Complete this form to start, change, or stop recurring contributions (also known as automatic investment or AIPs) from your bank account, or to add or change bank account information for periodic contributions by electronic bank transfer. Submit a separate form for each account you own.
- To add or change instructions for automatic investment by payroll deduction, use the Payroll Deduction Instruction Form.
- You can start, change, or stop your automatic investment plan (AIP) by accessing your accounts online at nysaves.org.
- Federal law allows distributions of up to \$10,000 per beneficiary per year for tuition expenses in connection with enrollment or attendance at an elementary or secondary public, private, or religious school (K-12 Tuition Expenses) with no resulting federal taxes or penalties.

New York State taxpayers should not take a state income tax deduction on contributions if the funds will be used for K-12 Tuition Expenses. Under New York State law, distributions for K-12 Tuition Expenses will be considered nonqualified withdrawals and will require the recapture of that state income tax deduction.

- The Investment Options offered through the Direct Plan are designed to help you save for post-secondary higher-education expenses. Please see the Disclosure Booklet and Tuition Savings Agreement for additional information.
- Print clearly, preferably in capital letters and black ink.

Important: Allow three business days from the date we receive this form to establish or change your options. Afterward, each contribution will be credited to your account on the business day before it's debited from your bank account. Changes to, or the stopping of, recurring contributions must occur at least five business days before an AIP debit is scheduled to be deducted from your bank account.

Forms can be downloaded from our website at **nysaves.org**. Or you can call us toll-free to order any form—or get assistance in filling out this one—at 877-NYSAVES (877-697-2837) on business days from 8 a.m. to 9 p.m., Eastern time. Return this form and any other required documents in the enclosed postage-paid envelope, or mail to: New York's 529 College Savings Program Direct Plan, P.O. Box 55440, Boston, MA 02205-8323. For overnight delivery or registered mail, send to: New York's 529 College Savings Program Direct Plan, 95 Wells Avenue, Suite 155, Newton, MA 02459-3204.

1.	Account Information
	Account Number
	Name of Account Owner (first, middle initial, last)
	Daytime Telephone Number Evening Telephone Number
<b>0</b>	Name of Beneficiary (first, middle initial, last)
4	<b>Options</b> (Complete A, B, or both.)  Recurring contributions or electronic bank transfer (EBT) may not be collected for seven business days.
	<b>A. Recurring contributions (also known as automatic investment plan or AIP).</b> Transfer money from your bank account to your <i>Direct Plan</i> account on a set schedule.
	Add this option to my account. (Provide your debit information on the next page and your bank information in <b>Section 3</b> .)
	Change my investment amount and/or debit (withdrawal) date. (Provide the new information on the next page.)



REMEMBER TO SIGN IN SECTION 4.

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## 4. Signature—YOU MUST SIGN BELOW

- I certify that the information provided herein is true and complete in all respects. I understand that all changes made on this form replace any previous instruction.
- For an electronic money-transfer option (for example, recurring contribution or automatic investment plan), I authorize the *Direct Plan* and Ascensus Broker Dealer Services, LLC, and its affiliates, acting upon my instructions, to pay amounts representing redemptions made by me or to secure payment of amounts invested by me by initiating credit or debit entries to my account at the designated bank. I authorize the bank to accept any such credits or debits to my account without responsibility for their correctness. I acknowledge that ACH transactions involving my account must comply with U.S. law. I understand that this authorization may be terminated by me at any time by notifying the *Direct Plan*, Ascensus Broker Dealer Services, LLC; and the bank, and that the termination request will be effective as soon as the *Direct Plan* and Ascensus Broker Dealer Services, LLC, have had a reasonable amount of time to act upon it. I understand and agree that all transaction requests placed for my account are my sole responsibility and are at my sole risk. I agree that the *Direct Plan*, Ascensus Broker Dealer Services, LLC, and their respective affiliates will not be liable for any loss, cost, or expense to me when they act upon instructions reasonably believed to be genuine. I certify that I have authority to transact on the bank account identified by me in **Section 3** and I confirm that the registration on such bank account and my account in New York's 529 College Savings Program *Direct Plan* meet the requirements set forth above.

	requirements set forth above.	
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	Signature of Account Owner	Date (month, day, year)