

Important information about this form:

- Fill out this form to set up, remove, or replace recurring monthly withdrawals from your Oregon College Savings Plan account.
- You must have an open account to use this form. If you need to sign up, go online to www.OregonCollegeSavings.com or use an **Enrollment Form** before completing this form.
- We are required to file an IRS Form 1099-Q when you make a withdrawal from your account.
- Withdrawals may have tax consequences depending on how the distribution is used. You should consult your tax advisor.
- Keep any receipts for eligible expenses once the money from this account is used.
- A notary signature is required withdrawal requests; (i) for an Entity Account or an Account for which the individual completing the form is acting in a legal capacity as a representative of the Account Owner or (ii) if you recently changed your banking information, and wish to bypass a 10-day hold period for withdrawals or (iii) if you recently updated your address, and wish to bypass a 15-day hold period for withdrawals. **(Step 9)**.
- Make sure you use black ink. Type or print clearly in capital letters.

Need help?

Give us a call Monday – Friday
from 6am – 5pm PT at

1-866-772-8464

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

Mail the form to:

Oregon College Savings Plan
P.O. Box 534440
Pittsburgh, PA 15253- 4440

Overnight Mail:

Oregon College Savings Plan
Attention: 534440
500 Ross Street, 154-0520
Pittsburgh, PA 15262

Fax

833-286-8172

1 Account information

Name of Account Owner (First and last)

____ - ____ - ____
Account Owner's Social Security or
Taxpayer Identification Number

Account number (May be 12 or 13 digits)

2 Instructions

- Stop all monthly withdrawals from this account (skip to **Step 8**)
- Replace all monthly withdrawals from this account (complete **Steps 3, 4, 5, and 8**)
- Create a new monthly withdrawal from this account (complete **Steps 3, 4, 5, and 8**)

3 Monthly withdrawal setup

Tell us how much you want to withdraw from your account each month. There's a \$5 minimum withdrawal for each portfolio. Please clearly print the portfolio name, code and amount you'd like to withdraw below. Reference the **Portfolio Options Appendix** at the end of this form for a list of all portfolio names and codes.

_____	_____	\$ _____ , _____ . _____
Code	Portfolio name	Amount
_____	_____	\$ _____ , _____ . _____
Code	Portfolio name	Amount
_____	_____	\$ _____ , _____ . _____
Code	Portfolio name	Amount
_____	_____	\$ _____ , _____ . _____
Code	Portfolio name	Amount
_____	_____	\$ _____ , _____ . _____
Code	Portfolio name	Amount
_____	\$ _____ , _____ . _____	
Withdrawal Day (1 – 28)*	Total withdrawal amount	

If you don't pick a date, we'll automatically make your withdrawal on the 1st of every month.

* A note on when withdrawals will be deducted from your account: If the Withdrawal Day you've selected falls on a regular business day, your withdrawal will be deducted from your account the same day. If the Withdrawal Day you've selected falls on a weekend or a holiday, the withdrawal will be deducted from your account on the next Business Day. The withdrawn amount should reach your bank account within 2-5 business days.

4 Payee Information

- Account Owner/Custodian
This will be the tax responsible party who will receive Form 1099-Q form.
- Beneficiary
This will be the tax responsible party who will receive Form 1099-Q form.
- Check to eligible Educational Institution or School (Continue to **Step 7**)
The Beneficiary will be the tax responsible party who will receive Form 1099-Q form.
Please note: There is a \$2.50 fee for withdrawals issued by check.

5 Delivery Information

- Deposit into bank account (Continue to **Step 6**)
- Check sent to mailing address listed on account (Continue to **Step 8**)

6 Bank account information

Attach a voided check or copy of your bank statement showing the name, address, last 4 digits of the account number and complete the bank information below. (Please do not staple, use a paper clip for the check).

What type of documentation are you including to verify this bank account?

- Voided check
- Bank statement

Bank account type Checking Savings

Name on bank account

The Account Owner/Custodian or Beneficiary must own the bank account connected to the Plan account.

Bank account holder signature

(If different from Plan Account Owner/Custodian)




Bank name

Bank routing number

Bank account number

Need help?

You can find your bank information on the bottom of one of your checks here:

		
Routing Number	Account Number	

7 Eligible Educational Institution or School information

Only fill this information out if you are making a withdrawal to an eligible educational institution.

Please confirm the mailing instructions with your school before submitting this form for payment and provide a student ID, if required by the school.

Eligible Educational Institution or School name

Student name, ID or other identifying information (Will only appear on the check)

Institution or School mailing address 1

Institution or School mailing address 2

City

State

____-____-____
ZIP Code

8 Sign the form

By signing this form, you're confirming that the information provided is accurate, and true and that you agree and certify that:

- If I selected Stop all monthly withdrawals from this account, or Replace all monthly withdrawals from this account:
 - I understand that all currently active monthly withdrawals from this account will be cancelled.
 - I understand that my request will become effective once processed by the Plan and that the Plan must receive my request at least 1 business day before I want it to become effective.
- If I selected Create a new monthly withdrawal from this account, or Replace all monthly withdrawals from this account:
 - I understand this authorizes the Plan to initiate recurring withdrawals from my Plan accounts, and either to: (i) make recurring deposits to my bank account, or (ii) send checks to my address on the Withdrawal Day each month for the total withdrawal amount.*
 - I understand that if there is not enough money in my account to complete the recurring withdrawal or if the withdrawal amount is greater than 95% of my account balance, it will fail.
 - I may cancel these recurring monthly withdrawals by using this form.
- I certify that I am the Account Owner, or I have the authority to act as the Account Owner. If I am an individual acting in a legal capacity as a representative of the Account Owner, or an Entity Account Owner, a notarization acknowledgement appears on the next page.

**Signature of Account Owner/Custodian/Authorized Representative
of Entity**

Date (mm/dd/yyyy)

* A note on when withdrawals will be deducted from your account: If the Withdrawal Day you've selected falls on a regular business day, your withdrawal will be deducted from your account the same day. If the Withdrawal Day you've selected falls on a weekend or a holiday, the withdrawal will be deducted from your account on the next Business Day. The withdrawn amount should reach your bank account within 2-5 business days.

9 Notarization acknowledgement (optional)

Keep in mind that:

- You're providing the following information as underwritten certification that your signature is genuine.
- You cannot guarantee your own signature. You may be required to provide proof of your authority to act on behalf of the Account.

Only sign if you are in the presence of a notary public or other officer providing notarization.

The undersigned has read the foregoing in its entirety before signing. IN WITNESS WHEREOF, I have hereunto

set my hand this _____ day of _____, 20____.

Day (#) Month Year

Signature of Beneficiary or Authorized Legal Representative

State of _____, County of _____

This instrument was acknowledged before me

physical presence online notarization

on _____
Date (mm/dd/yyyy)

by _____
Name of person (First and last)

My term expires: _____
Date (mm/dd/yyyy)

Notary Public (Seal)

Signature of Notary Public

Appendix – Oregon College Savings Plan Portfolio Options

For descriptions and details about all of these portfolio options, please go online to www.OregonCollegeSavings.com or see the **Plan Disclosure Booklet** for important information including descriptions, details, and risks about the investment options before making a decision.

College Enrollment Year

Code	Portfolio Name
ORC42	Enrollment Year 2042
ORC41	Enrollment Year 2041
ORC40	Enrollment Year 2040
ORC39	Enrollment Year 2039
ORC38	Enrollment Year 2038
ORC37	Enrollment Year 2037
ORC36	Enrollment Year 2036
ORC35	Enrollment Year 2035
ORC34	Enrollment Year 2034
ORC33	Enrollment Year 2033
ORC32	Enrollment Year 2032
ORC31	Enrollment Year 2031
ORC30	Enrollment Year 2030
ORC29	Enrollment Year 2029
ORC28	Enrollment Year 2028
ORC27	Enrollment Year 2027
ORC26	Enrollment Year 2026
ORC25	Enrollment Year 2025
ORC24	Enrollment Year 2024
ORC23	Enrollment Year 2023
ORC22	Enrollment Year 2022
ORC21	Enrollment Year 2021
ORC20	Enrollment Year 2020
ORC19	Enrollment Year 2019
ORC18	Enrollment Year 2018

Static Portfolios

Code	Portfolio Name
ORCCO	Target Risk – Conservative
ORCMO	Target Risk – Moderate
ORCAG	Target Risk – Aggressive
ORCDU	Diversified U.S. Equity
ORCDI	Diversified International Equity
ORCDF	Diversified Fixed Income
ORCIN	Diversified Inflation Protection
ORCBI	Balanced Index
ORCSC	Social Choice Balanced
ORCSF	Short-Term Fixed Income Index
ORCUE	U.S. Equity Index
ORCIE	International Equity Index
ORCFI	Fixed Income Index
ORCXX	FDIC-Insured Option

The investment information on this page has been provided by Sellwood Consulting, the investment advisor for the Oregon College Savings Plan. Before you make a decision, review the Plan Disclosure Booklet to learn about the important details and risks of each investment option.