

Iowa Advisor 529 Plan Change of Registration/Advisor Form



Complete this form to make changes to the account registration, including name change for the Account Owner or Beneficiary, changing the Account Owner or Beneficiary, changing the Financial Advisor, and changing or establishing the Successor Account Owner/Custodian on your Iowa Advisor 529 Plan account. You must complete section 1 of this form and any other sections as applicable. Before mailing this form, confirm that you are returning all six pages. If you would like help completing this application, contact your financial advisor or call **1-800-774-5127**. Information is also available online at **www.iowaadvisor529.com**.

1 CURRENT ACCOUNT INFORMATION AND MAILING ADDRESS

Complete this section with current account information.

To help ensure timely and accurate processing of this form, please print clearly.

Name of Account Owner or Custodian as currently registered (first, middle initial, last)		Social Security/taxpayer ID number	
If trust, name of trustee(s) (first, middle initial, last)		Date of trust (mm/dd/yyyy)	
U.S. residential street address	City	State	ZIP code
U.S. mailing address (if different than U.S. residential street address)	City	State	ZIP code
E-mail address	Daytime phone	Evening phone	
Name of designated Beneficiary (first, middle initial, last)		Social Security/taxpayer ID number	
Account number	Account number		
Account number	Account number		

Note: If the address above is different than the address currently listed on our records, we will update all accounts for the Account Owner, Custodian, or entity. All future correspondence will be sent to the new address until you advise us otherwise. The Beneficiary address, if provided in section 4 of this form, will be updated on accounts for which the same Account Owner, Custodian, or entity is authorized. **Distributions to a new address will require your signature to be Medallion Guaranteed if requested within 30 days of the address change.**

2 NAME CHANGE FOR ACCOUNT OWNER, CUSTODIAN, OR BENEFICIARY

If the name of someone on the account has changed, you can update our records here. Check the box next to the individual whose name requires updating, and then write the old and new names here. You will need to sign with both names on the following page.

- Account Owner Custodian Beneficiary

Former name (first, middle initial, last)	x
_____	Signature in former name for Account Owner or Custodian (or signature of Account Owner or Custodian for a Beneficiary name change)
New name (first, middle initial, last)	x
_____	Signature in new name (for an Account Owner or Custodian name change only)
Social Security/taxpayer ID number	Date
_____	_____

Medallion Signature Guarantee*

Note: A Medallion Signature Guarantee is required for name changes to Account Owner and Custodian, but not Beneficiary. See page 2 of this form for information on how to obtain a Medallion Signature Guarantee.

Complete this section to transfer ownership of all or a portion of an existing 529 plan account to a new account owner. The Account Owner must have their signatures Medallion Guaranteed on this completed form. An Account Application, completed by the new Account Owner, is also required unless you are transferring to an existing 529 plan account.

Transfer amount:

Full balance or Partial balance \$ _____

Note: If the amount requested is greater than the balance in the account, the entire account balance will be transferred.

Transfer ownership to:

Name of new Account Owner

Fund and account number (if transferring to an existing account) or write "New account" if new. An Account Application is required if you are **not** transferring to an existing account.

I understand that by transferring ownership to the individual or entity indicated, I am relinquishing all ownership rights to the transferred assets.

X _____
Signature of current Account Owner, Custodian, or Trustee/Executor

Print name

Date

X _____
Signature of Co-Trustee or Co-Executor (if applicable)

Print name

Date

Medallion Signature Guarantee*

Medallion Signature Guarantee*

To complete this request, signatures must be Medallion Guaranteed.

*A Medallion Signature Guarantee may be obtained from any eligible guarantor institution, as defined by the Securities and Exchange Commission. These institutions include banks, savings associations, credit unions, and brokerage firms that participate in the Medallion Program. The bar coded stamp with the words "MEDALLION GUARANTEED" must be stamped near the signatures being guaranteed. The guarantee must appear with the name of the guarantor institution and the signature of an individual authorized on behalf of the guarantor institution. Note that a Notary Public stamp or seal is not acceptable.

A change of Beneficiary is not allowed on an UGMA/UTMA account.

New Beneficiary Information

The new Beneficiary must be a "member of the family" of the current designated Beneficiary, as defined by Section 529 of the Internal Revenue Code. If the new designated Beneficiary is NOT a "member of the family," you must instead complete an Iowa Advisor 529 Plan Withdrawal Request Form and an Iowa Advisor 529 Plan new Account Application, as the transaction will be considered a non qualified withdrawal that is subject to income tax and a 10% additional tax on earnings.

Name of designated Beneficiary (first, middle initial, last) _____
Social Security/taxpayer ID number

U.S. residential street address _____
City _____
State _____
ZIP code

Relationship to Account Owner _____
Date of birth (mm/dd/yyyy)

Citizenship: U.S. Citizen Resident alien (Nonresident aliens are not eligible to participate in the Program.)

Investment Selection

Indicate below if you would like to change your current Investment Option(s).

Note: If no amount is indicated below or the current account is less than the amount requested, the entire balance will be transferred to the new Beneficiary.

Before choosing your Investment Option(s), see the Program Description and Participation Agreement (available at www.iowaadvisor529.com) for more information and a complete and up-to-date list of Investment Options.

Refer to the "Important Information about Account Options" section on page 4 for further details about future investments into the new account.

Choose only one of the following three Investment Strategies

With the exception of Single Fund Investment Options, only one option may be selected for an account.

1 ■ Age-Based Investment

Contributions will be allocated to the appropriate Age-Based Option corresponding to your Beneficiary's current age unless you indicate a hypothetical age upon which contributions will be invested. Age-Based Options are designed for college savings and may not be appropriate for K-12 time horizons.

Iowa Advisor 529 Age-Based Option

I wish to invest in the Age-Based Option that corresponds to:

Beneficiary's current age Hypothetical age: _____

2 ■ Static Allocation Investments ■ Select only one option below

- Iowa Advisor 529 Aggressive Option Iowa Advisor 529 Conservative Option
- Iowa Advisor 529 Growth Option Iowa Advisor 529 Ultra-Conservative Option
- Iowa Advisor 529 Moderate Option

3 ■ Single Fund Investments ■ You may select multiple options below

Select your Investment Option(s) below and write the amount of your initial investment next to each Option in which you choose to invest.

- \$ _____ Voya Government Money Market Option \$ _____ Voya Multi-Mgr. Mid Cap Value Option
- \$ _____ Voya Intermediate Bond Option \$ _____ Voya Short Term Bond Option
- \$ _____ Voya International Index Option \$ _____ Voya Small Company Option
- \$ _____ Voya Large Cap Growth Option \$ _____ Voya U.S. Stock Index Option
- \$ _____ Voya Large Cap Value Option \$ _____ VY BlackRock Inflation Protected Bond Opt.
- \$ _____ Voya MidCap Opportunities Option \$ _____ VY Clarion Global Real Estate Option
- \$ _____ Voya Multi-Mgr. International Equity Opt.

Total Amount Invested in the Single Fund Investment Options \$ _____

If no Option is chosen, the Investment Option for the new Beneficiary will be the same as the current Beneficiary.

You have the flexibility to purchase an Option that is more or less aggressive than that of the Option which corresponds to the Beneficiary's age at the time of purchase, by indicating a "hypothetical age" for the Beneficiary at right.

Important Information about Account Options

New Account Established

By changing the designated Beneficiary or by selecting a new Investment Option, you are electing to open a new account, which will have a new account number. Your current account will be closed to new investments unless you are transferring only a portion of the balance.

Future Automatic Investment Plan (AIP) Contributions (\$50 minimum)

Moving entire current account balance

If you are opening only one new account and have an active AIP, it will be suspended on your current account and automatically established on your new account. Any AIP in process will be purchased into the new account. If opening multiple accounts, a new AIP will not be established on the new accounts unless instructed below. Complete an Iowa Advisor 529 Plan Account Maintenance Form if the current account does not have an AIP or you wish to update your bank information.

Start an AIP of \$ _____ on all new accounts. Only existing active banking information will be used.

Moving only a portion of the current account balance

Any active AIP will remain on the current account and a new AIP will not be established on the new account unless instructed below. If opening multiple accounts, complete an Iowa Advisor 529 Plan Account Maintenance Form if the current account does not have an AIP or you wish to update your bank information.

Move entire AIP to the new account and suspend on my current account.

Change the dollar amount on the current account to \$ _____ and start an AIP on the new account for \$ _____. Only existing active banking information will be used.

Change of Beneficiary Signatures

By signing this form, I hereby elect to change the Beneficiary on my Iowa Advisor 529 Plan account. I certify that the account will be used to provide funds for the qualified higher education expenses of the designated Beneficiary. I have received and have read and agree to the terms set forth in the Program Description and Participation Agreement and will retain a copy of this document for my records. I have had the opportunity to consult with a financial and/or legal advisor before signing this application. I understand that my account will be subject to a \$25 annual maintenance fee for each account selected unless qualifying for a waiver as disclosed in the Program Description and Participation Agreement.

I acknowledge that I am required to provide certain personal information, which will be used to verify my identity, as well as that of the designated Beneficiary, and that my account may not be opened if I do not provide this information. I further acknowledge that the Program Manager reserves the right to close my account, or take other reasonable steps, if it is unable to verify my identity. I represent that I am of legal age and have legal capacity to make this purchase.

I certify that the information I have provided on this application—and all future information I will provide with respect to my Iowa Advisor 529 Plan account—is true, complete, and correct. I authorize the Program Manager and Iowa Advisor 529 Plan to open and maintain the account(s) based on this information.

x

Signature of Account Owner, Custodian, or Trustee/Executor

Print name

Date

x

Signature of Co-Trustee or Co-Executor (if applicable)

Print name

Date

5 REQUEST CHANGE OF FINANCIAL ADVISOR INFORMATION

Complete this section to update the current financial advisor information or to change the advisor-of-record to another financial advisor within the same broker/dealer on certain 529 plan accounts.

Include additional account numbers on a separate sheet or request the Advisor-of-record by Rep. ID form from the Program Manager.

- My address/area office has changed. I have included my new information below. Please update all accounts under my Rep ID.
- I have taken over as advisor-of-record only on the specific account numbers listed below.

Account number	Account number
Account number	Account number

New or Updated Financial Advisor Information

Name of financial advisor (first, last)	Name of dealer		
Rep. number	Branch number		
U.S. street address	City	State	Zip code
Daytime phone	Fax number		
x Signature of new financial advisor	Print name	Date	
x Signature of Account Owner, Custodian, or Trustee/Executor	Print name	Date	

6 DESIGNATION OF SUCCESSOR ACCOUNT OWNER

Complete this section to designate a successor Account Owner for an Iowa Advisor 529 Plan account.

Name of successor Account Owner (first, middle initial, last)	Social Security/taxpayer ID number	Date of birth (mm/dd/yyyy) <i>Must be 18 or older</i>	
U.S. residential street address	City	State	Zip code
Daytime phone	Evening phone		

In the event of my incapacity or death, I hereby designate the individual named above to act as successor Account Owner for the account referenced on this form.

x Signature of current Account Owner	Print name	Date
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7 DESIGNATION OF SUCCESSOR CUSTODIAN

Complete this section to designate a successor Custodian for an Iowa Advisor 529 Plan Uniform Gifts/ Transfer to Minors Act (UGMA/UTMA) account.

Name of minor (first, middle initial, last) Minor's Social Security/taxpayer ID Minor's date of birth (mm/dd/yyyy)

Account number

Name of designated successor Custodian (first, middle initial, last) Social Security/taxpayer ID number

U.S. residential street address City State Zip code

Daytime phone Evening phone

In the event of my incapacity or death, I hereby designate the individual named above to act as successor Custodian for the minor on the account referenced on this form.

x _____
Signature of current Custodian Print name Date

8 MAILING INSTRUCTIONS

REGULAR MAIL

Iowa Advisor 529 Plan
c/o Voya Investment Management
PO Box 9659
Providence, RI 02940-9659

OVERNIGHT/COURIER

Iowa Advisor 529 Plan
c/o Voya Investment Management
4400 Computer Drive
Westborough, MA 01581-1722

Iowa Advisor 529 Plan is a part of the Iowa Educational Savings Plan Trust, a state-sponsored 529 college savings plan administered by the State of Iowa, for which the Treasurer of the State of Iowa serves as the Trustee. Voya Investment Management Co. LLC provides investment management and administrative services for the Iowa Advisor 529 Plan. Shares in the Program are distributed by Voya Investments Distributor, LLC, Member FINRA/SIPC.

