New York's 529 Advisor-Guided College Savings Program

Additional Contribution Form



- Complete this form to make additional contributions to an established New York's 529 Advisor-Guided College Savings Program ("Advisor-Guided Plan" or "Plan") Account by check or rollover.
- For your contribution to be invested, you must clearly print all required information and include a check payable to New York's 529
 Advisor-Guided College Savings Program for an amount matching the amount below.
- Type in the 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.
- Contributions will not be available for withdrawal for seven (7) business days.

Forms can be downloaded from our website at **www.ny529advisor.com**, or you can call us to order any form—or request assistance in completing this form—at **1.800.774.2108** any business day from 8 a.m. to 6 p.m. Eastern time.

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Account	Number (Inc.	ude your	Account	number	on you	ır check	k.)																
Name of	Account Ow	ner <i>(first,</i>	middle i	nitial, las	st)																		
Name of	Beneficiary	first, midd	lle initia	l, last)																			
A	Personal	check	. Impo	rtant: /	All ch	ecks r	nust l	be ma	ıde p	ayable	to N	ew \	Yorl	('s 5 2	9 Ad	viso	r-Gı	uided	l Coll	ege	Sav	vings	Pro
A	. —	check	. Impo	rtant: /	All ch	ecks r	nust I	be ma	ide p	ayable	to N	ew \	Yorl	c's 52	9 Ad	viso	r-Gı	uided	l Coll	ege	Sav	rings	Pro
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NOTE: If you wish to select more than 3 portfolios, please attach a separate piece of paper.

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В		nother 529 plan account, an E oom one of these options to your b		(ESA), or qualified U.S. savings bond to the Advisor-Guided Plan.	
		s, which could result in adverse t		rovide this documentation, the entire amo if you later make a non-qualified withdra	
		another qualified 529 plan or a eakdown of contributions and ea		ation from the distributing financial	
		qualified U.S. savings bonds - titution that shows the interest p		or IRS Form 1099-INT issued by the	
	\$,Contributions		\$		
2.	Dollar-cost averaging (O)	otional)			
		tomatically from one Portfolio to a		is feature, you authorize the Advisor-Guidene minimum exchange amount is \$100 per	
	However, if you make any of will be made on the day of day, the allocation will occuinstructions below. Stoppir	changes to your dollar-cost averag the month you specify below, or it on the next succeeding busines	ing selections, that will count f no day is specified, on the 15 s day and will continue until the eation instructions with respec	will not count as an Investment Exchange. as an Investment Exchange. The allocatio th of the month. If such day is not a busing dollar-cost averaging has completed pet to prior contributions still remaining in thatations.	ns ess r the
	Start Date:				
	Frequency: (Check one):	Monthly Quarterly Se	emi-annually Annually		
	Day of Allocation Excha	nge: (dd)			
	Stop Type:	Complete Portfolio Balan	ce		
	(Check one):	Specify Total Exchange A			
		Stop Date	[/vvvvl		

Note: Dollar-cost averaging instructions are continued on Page 3.

	\$ <u> </u>
From Investment Option	Amount* (\$100 minimum)
Important: This is the Portfolio to which your enclosed contribution will be allocate nstructions on file.	ed. This will not change future allocation
To the following Investment Options	
	\$
To Investment Option	Amount* (\$100 minimum per Portfolio)
	s
To Investment Option	Amount* (\$100 minimum per Portfolio)
	\$
To Investment Option	Amount* (\$100 minimum per Portfolio)
ning below, I hereby certify that:	
	s 529 Advisor-Guided College Savings Progr
ning below, I hereby certify that: e received the Disclosure Booklet and Tuition Savings Agreement of New York's closure Booklet"). I understand that by signing this form, I am agreeing to be be essure Booklet. I understand that the New York's 529 Advisor-Guided College Sand the Disclosure Booklet, and I agree I will be subject to the terms of those am let and this form shall be construed, governed, and interpreted in accordance we erstand that contributions to the Plan are not insured and that the investment respectively.	und by the avings Pro- endments vith the lav

Date (mm/dd/yyyy)

Signature of Account Owner (If the Account Owner is a minor, the designated parent or guardian must sign.)