



Corporate Plan Employee Direct Deposit Form

COLLEGE SAVINGS PROGRAM
BY COLLEGEINVEST®

This form should be used only by employees of a corporation that has a signed Corporate Authorization Agreement with Scholars Choice. If you have not yet established a Scholars Choice account for any account listed in Section 3, a completed New Account Application must be attached to this form. Employers should refer to page 2 of this form. Return this form to your financial professional.

1. Account Owner/Employee Information

Account Owner/Employee Name (First, Middle Initial and Last)

Account Owner/Employee's Social Security Number or TIN¹

2. Employer Information

Employer Name

Employer EIN² (from Financial Professional)

Employer Contact Name

Employer Phone Number

Employer Address

City

State

ZIP Code

3. Instructions

Enter all information for each account for which you want to deposit a percent of the amount deducted from your paycheck as indicated below. If you are adding or changing an allocation for any one account, you must list all accounts for which you continue to want a deposit, as these instructions will supersede all previous instructions.

Total amount to be deducted from paycheck:

\$.00

Requested Action (Check One)			If Account is Already Established	If Account is NOT Already Established		% Allocation (of total amount deducted from paycheck)
New	Modify	Cancel	Fund and Account Number	Investment Option	Beneficiary Name	
						%
						%
						%
						%
TOTAL ALLOCATION						100%

4. Signature

I hereby authorize my employer or its designee to establish, modify or cancel my contributions via direct deposit as indicated above and to remit such amounts to my Scholars Choice Account(s). I understand that amounts I contribute via direct deposit will not reduce my taxable income. I understand that instructions will be processed as soon as administratively feasible and will continue until I provide the Program Manager with an updated Corporate Plan Employee Direct Deposit Form requesting to modify or cancel such instructions. I understand that neither QS Legg Mason Global Asset Allocation, LLC, Legg Mason Investor Services, LLC nor the State of Colorado or CollegeInvest is responsible for any losses resulting from my employer's failure to timely and accurately process my contributions via direct deposit. I understand that the Program has the right to initiate adjustments to my account for any deposit made in error.

I understand that investments in Scholars Choice are not insured by the FDIC or any other government agency and are not deposits or other obligations of any depository institution. Investments are not guaranteed by the State of Colorado, CollegeInvest, QS Legg Mason Global Asset Allocation, LLC, Legg Mason Investor Services, LLC, or Legg Mason, Inc. or its affiliates, and are subject to investment risks, including loss of principal amount invested.

Signature of Account Owner/Employee or Responsible Individual

Date



¹ Taxpayer Identification Number

² Employer Identification Number

EMPLOYER DIRECT DEPOSIT INSTRUCTIONS

When completing the ACH/Automated Clearing House direct deposit electronic transfer, the transmittal must be coded for CHECKING. Please transmit funds to:

BNY Mellon, N.A.

ABA Number:

0 1 1 0 0 1 2 3 4

DDA Number:

The DDA (account number) is a 17-digit field. The first four digits indicate the Program's deposit account number at BNY Mellon (pre-filled below). The next nine digits must be the employee's Social Security Number or TIN¹ without dashes. The last four digits indicate an allocation requirement within the BNY Mellon system.

6 6 8 0 9 9 9 9

← Account Owner/Employee's Social Security Number or TIN¹ →

FINANCIAL PROFESSIONAL INSTRUCTIONS

- Enter employer's EIN² in Section 2.
- If this request is to initiate or cancel direct deposit or to change the allocations, give this form to BOTH the employer and Scholars Choice. (Scholars Choice Processing Fax Number: 508-599-4157)
- If this request is to stop direct deposit, give this form only to the employer.

REGULAR MAIL:

Scholars Choice College Savings Program
P.O. Box 9680
Providence, RI 02940-9680

OVERNIGHT MAIL:

Scholars Choice College Savings Program
4400 Computer Drive
Westborough, MA 01581

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