IAdvisor 529 Plan Letter of Instruction Form

Complete this form to issue instructions of changes to your IAdvisor 529 Plan account. These instructions include, but are not limited to, removing stop debit, "alive and well" letter, or a successor owner wishing to relinquish their rights during a transfer due to death. You must complete section 1 of this form and any other sections as applicable. Before mailing this form, confirm that you are returning all 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.iadvisor529.com**.



CURRENT ACCOUNT INFORMATION AND MAILING ADDRESS Name of Account Owner or Custodian as currently registered (first, middle initial, last) Social Security/taxpayer ID number Complete this section with current account information. If trust, name of trustee(s) (first, middle initial, last) Date of trust (mm/dd/yyyy) ZIP code U.S. residential street address City State U.S. mailing address (if different than U.S. residential street address) City ZIP code State E-mail address Daytime phone Evening phone To help ensure timely and accurate processing Name of designated Beneficiary (first, middle initial, last) Social Security/taxpayer ID number of this form, please print clearly. Option and account number Option and account number Option and account number Option and 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. **EXPLANATION OF WHAT IS REQUESTED**

3 MEDALLION SIGNATURE GUARANTEE (REQUIRED)

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**.

	Medallion Signature Guarantee*
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Signature of current Account Owner, Custodian, trustee, partner, officer, or personal representative	
Print name Date	

4 Mailing Instructions

REGULAR MAIL

IAdvisor 529 Plan c/o Voya Investment Management PO Box 534469 Pittsburgh, PA 15253-4469

OVERNIGHT/COURIER

IAdvisor 529 Plan Attention: 534469 500 Ross Street 154-0520 Pittsburgh, PA 15262

IAdvisor 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 IAdvisor 529 Plan. Shares in the Program are distributed by Voya Investments Distributor, LLC, Member FINRA/SIPC.

