

|                            |  |   |
|----------------------------|--|---|
| <b>Schedule<br/>OR-529</b> | <b>Oregon 529 College Savings Plan<br/>Direct Deposit for Form 40 Filers</b> | Tax year<br><div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> |
| Last name                  | First name and initial   | Social Security number (SSN)  |
| Spouse's/RDP's last name   | Spouse's/RDP's first name and initial  | Spouse's/RDP's SSN  |

Would you like to deposit all or a portion of your refund into an Oregon 529 College Savings Plan account? If so, follow the instructions below.

**Requirements**

- To make this choice, you must have an open Oregon 529 College Savings Plan account. For more information, see contact information below.
- Deposits must be a minimum of \$25 per account.
- If your refund is used to pay a debt you owe or the amount you elect to deposit exceeds your available refund, your deposit will be cancelled. Any remaining refund will be refunded by paper check or direct deposit.

**Instructions**

You may deposit all or a portion of your refund in up to four accounts. Complete all the fields below for each account.

- Select the account manager—Oregon College Savings Plan or MFS 529 Savings Plan;
- Enter the four-digit portfolio number (for more information on portfolio options, contact your account manager);
- Enter the nine or ten-digit account number;
- Enter the amount to be deposited; and
- Total the amounts to be deposited.

---

69a. Check one:  Oregon College Savings Plan    **or**     MFS 529 Savings Plan

• Portfolio No.     • Account No.     • Amount \$  .00

---

69b. Check one:  Oregon College Savings Plan    **or**     MFS 529 Savings Plan

• Portfolio No.     • Account No.     • Amount \$  .00

---

69c. Check one:  Oregon College Savings Plan    **or**     MFS 529 Savings Plan

• Portfolio No.     • Account No.     • Amount \$  .00

---

69d. Check one:  Oregon College Savings Plan    **or**     MFS 529 Savings Plan

• Portfolio No.     • Account No.     • Amount \$  .00

---

Add lines 69a–69d and enter the total on line 69 of Form 40. **Total**    \$  .00

**Contact information**

|  |   |   |
|--|---|---|
| <p><i>Oregon 529 College Savings Network</i><br/>www.oregon529network.com<br/>Phone: 503-373-1903<br/>Email: college.savings@ost.state.or.us</p> | <p><i>Oregon College Savings Plan</i><br/>www.oregoncollegesavings.com/<br/>Phone: 1-866-772-8464</p> | <p><i>MFS 529 Savings Plan</i><br/>https://annex.mfs.com/subs/oregon/index.html<br/>Phone: 1-866-529-1637</p> |
|--|---|---|

**—YOU MUST INCLUDE THIS SCHEDULE WITH YOUR OREGON INCOME TAX RETURN—**