

Give the Gift of Education

Print and complete this form in its entirety. Be sure to include the top half with your Virginia529 contribution and present the bottom half to the beneficiary.

Beneficiary's name: _____

Beneficiary's date of birth: _____

Virginia529 account # (optional): _____

Account owner's name/address (optional): _____

Contributor's name: _____ Phone: (____) _____

Please print and provide as much information as possible to ensure that your contribution is applied accurately.

Only account owners may control how assets are invested and used and only Virginia529 account owners may claim any Virginia state income tax benefits. For more information on the programs offered by Virginia529, including disclosure materials, please visit Virginia529.com or call 1-888-567-0540. The completion of this form is not to be interpreted as a contract of any kind and does not establish a 529 account.

Virginia529SM

Virginia529.com | Toll-Free 1-888-567-0540

Prepaid529 accounts

Make check payable to Prepaid529
Mail to: Prepaid529
P.O. Box 719232
Philadelphia, PA 19171-9232

Invest529 accounts (not Tuition Track)

Make check payable to Invest529
Mail to: Virginia529/Invest529
P.O. Box 719226
Philadelphia, PA 19171-9226

Invest529 Tuition Track accounts

Make check payable to Tuition Track Portfolio
Mail to: Tuition Track Portfolio
P.O. Box 716485
Philadelphia, PA 19171-6485



Congratulations on your new baby!

To:

From:

Amount:

Message:

Virginia529SM

Virginia529.com | Toll-Free 1-888-567-0540

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