

3 Allocation Instructions for Future Contributions

Complete this section to establish or modify Allocation Instructions for future contributions as indicated below.

- Use a whole percentage next to each Investment Option below. The TOTAL of all allocations must equal 100%.
- The Program will apply these allocation instructions to future Automatic Contribution Plan (ACP) contributions.
- These allocation instructions will not apply to payroll deduction contributions, if any.
- You can change your Allocation Instructions online, by telephone or by form at any time.

<i>Investment Option Name (Investment Option Code)</i>	<i>Whole Percentage (per Investment Option)</i>	<i>Check if new Investment Option²</i>
Managed Allocation Option	%	<input type="checkbox"/> New Option
Active Equity Option (1970)	%	<input type="checkbox"/> New Option
Equity Index Option (1969)	%	<input type="checkbox"/> New Option
Balanced Option (2006)	%	<input type="checkbox"/> New Option
Fixed Income Option (1971)	%	<input type="checkbox"/> New Option
Guaranteed Option (1819)	%	<input type="checkbox"/> New Option
TOTAL	100%	

4 Add, Change or Revoke Contingent Account Owner Information *(for Individual Accounts only)*

An Individual Account Owner can add, change or revoke Contingent Account Owner information by mailing this completed form to the Program. The Successor Account Owner, the person who will become Account Owner in the event of death of the current Account Owner, may reside outside the United States, but must have a Social Security Number or Taxpayer Identification Number. If designating a trust, the trust must be established at the time the Successor Owner is named.

Note: a Contingent Account Owner cannot be named for a Uniform Gifts to Minors Act (UGMA) or Uniform Transfers to Minors Act (UTMA) account, or any entity account.

Please check the appropriate box:

<input type="checkbox"/> Add a Contingent Account Owner for the first time	<input type="checkbox"/> Change an Existing Contingent Account Owner Designation	<input type="checkbox"/> Revoke a Contingent Account Owner Designation
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New Contingent Account Owner Information (Provide this information to add or change a Contingent Account Owner.)

Name (First, MI, Last, Suffix) or Name of Trust (Foreign trusts are not eligible).

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Social Security Number or Taxpayer ID Number

Gender (M/F)

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Date of Birth (mm-dd-yyyy)

² If a new Investment Option is opened, a different option number will be assigned and new investment coupons will accompany your confirmation statement. You can also use the Additional Contribution by Mail form to contribute by check at any time.

5 Signature and Authorization *(This section must be signed for these changes to take effect.)*

By signing below, it is my intention to change the Account Owner, Beneficiary and/or Contingent Account Owner information as indicated on this Form.

If I have designated a Contingent Account Owner, then I understand that this form, rather than a will or codicil, should be used to change or revoke my Contingent Account Owner designation. In addition, I understand that ownership of my Account cannot be transferred to my designated Contingent Account Owner unless that individual is eligible to be an Account Owner as described in the *Disclosure Booklet*, and upon submission of an acceptable proof of death and a new *Account Application*. I will notify my Contingent Account Owner of his/her status.

I certify that I am the Account Owner, or I have the authority to act as the Account Owner. (If I am an authorized representative of the Account Owner, including an Entity Account Owner, a Signature Validation Program (SVP) Stamp appears below).

Signature of Account Owner, Custodian or Authorized Representative of an Individual or Entity Account Owner

Date

IMPORTANT INFORMATION

A Signature Validation Program (SVP) Stamp is required for all Entity Accounts and may be required if you are the Authorized Representative of an Individual Account. You may be required to provide proof of your authority to act on behalf of this Account to your bank or broker before a signature validation stamp will be provided. This stamp is also required if you intend to withdraw funds within 30 days of any address change.

Note: The SVP stamp is not required if a Program Power of Attorney Form is on file for an Individual Account, or if a Program Power of Attorney Form accompanies this form.

GUARANTOR TO AFFIX STAMP HERE

Mail this form to:

Kentucky Education Savings Plan Trust
P.O. Box 8100
Boston, MA 02266-8100

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