



Page 2 of 2 • Use UPPERCASE letters. • Use blue or black ink. • Print actual size (100%). • Don't submit photocopies or use staples.

Part 2: Oregon College Savings Plan Account Creation Election.

Taxpayer email

[Grid for taxpayer email]

Beneficiary first name

[Grid for beneficiary first name]

Initial

[Grid for beneficiary initial]

Beneficiary last name

[Grid for beneficiary last name]

Beneficiary Social Security number (SSN)

[Grid for beneficiary SSN]

Beneficiary date of birth (MM/DD/YYYY)

[Grid for beneficiary date of birth]

Relationship code (see instructions)

[Grid for relationship code]

Beneficiary address (no PO Box)

[Grid for beneficiary address]

City

[Grid for beneficiary city]

State

[Grid for beneficiary state]

ZIP code

[Grid for beneficiary ZIP code]

Election. I have completed all of the fields in Part 2 of this form for the purpose of establishing an Oregon College Savings Plan account for the beneficiary named above, and I authorize the Department of Revenue to release this information to the Oregon Treasury Savings Network for this express purpose.

Taxpayer signature

X

[Signature line]

Date (MM/DD/YYYY)

[Grid for taxpayer date]

— You must include this schedule with your Oregon income tax return —

