## WEB 2016 Schedule VACS

2601000 Rev. 06/16

## Supplemental Contributions Schedule for the Virginia College Savings Plan<sup>sM</sup>



		Č	college Savings	s Plans™		
Name	e(s) as shown on Virginia	return		_		Your SSN
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	neral Instruction		4 - f	41 6: \ /::-:	- O-llana O-viana Di	SM () (iii500SM)
	this Schedule if you a additional Schedules		t of your retund to mo	re than five Virginia	a College Savings Pi	an <sup>sм</sup> (Virginia529 <sup>sм</sup> ) accounts.
contr Virgii acco	ributed to that progra nia529 account numb unt. See the instruct Program Type Co	m. For contributions to ber. Contact your financtions for more details.  des: 1 = Virginia: 2 = Virginia:	o Virginia529 inVEST sial advisor to obtain t For information on V 529 inVEST <sup>SM</sup> 529 prePAID <sup>SM</sup>	rsm, Virginia529 pr he proper account irginia529 visit ww 3 = Colleç 4 = Colleç	ePAID <sup>SM</sup> , and Colleg number and routing w.Virginia529.com. geWealth® geAmerica®	unt number, and the amount geWealth® accounts, use your number for a CollegeAmerica®
	r the total contribution or Form 763, Line 32.		ia529 accounts on S	chequie VAC, Line	e 6 and on Form 76	0, Line 32; Form 760PY, Line
Sav	vings Program I	nformation				<b>Contribution Amount</b>
1.	Program Type B	eneficiary's Last Name				
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	Account Number	contact your financial advis	eor)	Routing Number	legeAmerica® Only)	
	(i or conege / interior )	Contact your initiation duvic		(Required for Con	logo/inched Only)	
2.	Program Type B	eneficiary's Last Name				
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	(For College America*,	contact your financial advis	001)	(Required for Con	legeAmerica® Only)	
3.	Program Type Beneficiary's Last Name					
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	Account Number			Routing Number		
	(For College America®,	contact your financial advis	sor)	(Required for Col	legeAmerica® Only)	
4.	Program Type B	eneficiary's Last Name				
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	(For College America®, contact your financial advisor)		sor)	(Required for Col	legeAmerica® Only)	
	Drogram Time	onoficiony's Last Name				
5.	Program Type B	eneficiary's Last Name				
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**6. Total Amount.** Add the Contribution Amount from Lines 1 through 5 and enter the total here. Include this amount in the total reported on Schedule VAC.

(For College America®, contact your financial advisor)

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		. 00

(Required for CollegeAmerica® Only)