

P.O. Box 198801 Nashville, TN 37219 615-741-1502 (local) 1-855-386-7827 (toll-free) 615-401-6816 (fax) E-mail: TN.STARS@tn.gov

Website: www.tnstars.com



Employee Payroll Deduction Form

Instructions

Complete this form to establish, change or delete payroll deduction instructions on your existing TN Stars College Savings 529 Programaccount (s). If you do not have an account, attach a completed application (one per beneficiary) or open an account online at www.tnstars.com. Before completing this form, check with your payroll department regarding the availability of this service. Your payroll department must complete an Employer Authorization Payroll Deduction form before you can begin payroll deduction.

Print clearly in all **CAPITAL LETTERS** using blue or black ink. Please color in circles completely. Once completed, retain a copy for your records. Your Human Resources Department will send a copy to the TN Stars College Savings 529 Program.

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1. Employee / Company Infor	mation	
Employee's Name (first, middle initial, last)		Employee's Social Security Number
Company Name		Company's EIN
Company Contact		Company's Phone Number
2. Payroll Deduction Information	on	
 Establish a New Payroll Deduction Cancel Existing Deduction Change Allocation Percentage Change Deduction Amount 	paycheck eac deduction per in to your Elected received. If yo	Indicate the amount to be deducted from your the pay period. The mimimum investment is \$25 per expression period. This amount will be invested according Investment Allocation on file at the time the assets are under a restablishing a new account, the assets will be ding to your instructions on the Account Application.
Account Number	Beneficiary's Name	Percentage of Deduction to be Allocated to Each Account (full % only)
		0.00%
		0.00%
		0.00%
Total		100.00%
3. Authorized Signature		
Please sign exactly as your name app	pears on your plan acc	count.
Employee's Signature		Date
TR-0434		RDA-2516