



# NextGen 529™

## Change of Participant Form



**INSTRUCTIONS:** Complete this form if you would like to transfer all of your assets from your NextGen 529 Select or Direct Series Account ("NextGen 529 Account"), listed below, to a new Participant.

Upon the change of Participant on a NextGen 529 Account, the new Participant assumes all rights of ownership described in the applicable Select or Direct Series NextGen 529 Program Description, including but not limited to the ability to change investments, change the Designated Beneficiary and direct withdrawals from the NextGen 529 Account.

This form may be used only to change the Participant on the account. If the new Participant wishes to change the Designated Beneficiary, the new Participant must complete a Change of Designated Beneficiary form in addition to this form. To obtain a Change of Designated Beneficiary form, log in to your account at [merrilledge.com](http://merrilledge.com) or contact a Merrill Edge Self-Directed Service Associate at **877.653.4732**.

**For NextGen 529 Direct Series accounts only:** Prior to submitting this form, the new Participant must open a new NextGen 529 Account at [merrilledge.com](http://merrilledge.com). Please be advised that Merrill Edge® requires a new account be established for the new Participant before the change can be completed. In order to open a new account, visit [merrilledge.com](http://merrilledge.com) or complete a NextGen 529 Direct Series Application and include it with the completed Change of Participant form.

**For NextGen 529 Select Series accounts only:** A new Select Series account application completed and signed by the new Participant must be submitted with this form.

### 1. CURRENT PARTICIPANT INFORMATION

\_\_\_\_\_  
Name (Last/First/M.I.) or Name of Custodianship/Trust/Corporation

\_\_\_\_\_  
Date of birth (month/day/year)

\_\_\_\_\_  
Street address (no P.O. box)

\_\_\_\_\_  
Social Security number

\_\_\_\_\_  
City State ZIP code

\_\_\_\_\_  
Current NextGen 529 Account number

### 2. NEW PARTICIPANT INFORMATION

\_\_\_\_\_  
Name (Last/First/M.I.) or Name of Custodianship/Trust/Corporation

\_\_\_\_\_  
Date of birth (month/day/year)

\_\_\_\_\_  
Street address (no P.O. box).

\_\_\_\_\_  
Social Security number

\_\_\_\_\_  
City State ZIP code

\_\_\_\_\_  
New participant phone number

\_\_\_\_\_  
Mailing address (if different from street address)

\_\_\_\_\_  
New NextGen 529 Direct Account number

**Note: If a new account has been established online via [merrilledge.com](http://merrilledge.com), please indicate the new NextGen 529 Direct Account number here.**

\_\_\_\_\_  
City State ZIP code

### 3. CURRENT PARTICIPANT SIGNATURE

I certify that the instructions and information provided herein are true and correct and comply with the applicable Select or Direct Series NextGen 529 Select or Direct Series Program Description and Participation Agreement.

By signing below, I acknowledge that I understand the consequences of this transfer and agree that this transfer is irrevocable and transfers all rights, title, interest and power (including the power to use the NextGen 529 assets for any purpose) over the NextGen 529 Account and its assets to the new Participant designated herein.

\_\_\_\_\_  
Signature of current participant

\_\_\_\_\_  
Date

#### 4. NEW PARTICIPANT SIGNATURE

I have established a NextGen 529 Select or Direct Series Account, and consent and agree to all the terms and conditions of the applicable Select or Direct Series NextGen 529 Plan Participation Agreement, which is incorporated herein by reference. I acknowledge that I have read the applicable Select or Direct Series NextGen 529 Select or Direct Program Description, the Participation Agreement and Bank of America Privacy Policy, and will retain a copy of each for my records. If I have a Merrill Lynch central asset account, I further acknowledge and agree that the Participation Agreement will govern all aspects of the NextGen 529 Account, including all contributions to my NextGen 529 Account.

BY SIGNING BELOW, I ACKNOWLEDGE: (1) THAT I AM IN RECEIPT OF A COPY OF THE APPLICABLE SELECT OR DIRECT SERIES NEXTGEN 529 PROGRAM DESCRIPTION AND PARTICIPATION AGREEMENT AND ANY SUPPLEMENT(S) AND (2) THAT IN ACCORDANCE WITH PARAGRAPH 23 OF THE PARTICIPATION AGREEMENT (ON THE LAST PAGE(S) OF THE PROGRAM DESCRIPTION AND PARTICIPATION AGREEMENT ), I AM AGREEING IN ADVANCE TO ARBITRATE ANY CONTROVERSIES WHICH MAY ARISE WITH THE PROGRAM MANAGER:

\_\_\_\_\_  
Signature of new participant

\_\_\_\_\_  
Date

**NOTE: CONTRIBUTIONS TO, OR WITHDRAWALS FROM, THIS PROGRAM MAY BE TREATED LESS FAVORABLY FOR STATE INCOME TAX AND OTHER PURPOSES THAN CONTRIBUTIONS TO A SECTION 529 PROGRAM OFFERED BY THE STATE IN WHICH THE INVESTOR RESIDES OR PAYS TAXES.**

#### PLEASE FOLLOW THESE MAILING INSTRUCTIONS TO AVOID DELAYS IN PROCESSING

Merrill Edge will process the Change of Participant request upon receipt of this completed form and verification that, if this form is being submitted for a NextGen 529 Direct Series account, a new account has been established for the new Participant.

Return to:

Merrill Edge/Service and Operations

MSC NJ2-140-02-13

P.O. Box 1501

Pennington, NJ 08534



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