



## Client Connect Series Change Information Form

### Important information about this form:

#### Use this form to:

- Change information such as an Account name (due to marriage, divorce or legal name change), or correct a date of birth or Social Security Number (**Step 3**), or update an address, telephone number, email address (**Step 4**), on a NextGen 529 Account.
- Add, change or remove a Successor Participant/Account Owner (**Step 5**) on a NextGen 529 Plan Account.
- Change a Successor Custodian (**Step 6**) on a NextGen 529 Plan UGMA/UTMA Account.
- Before completing this form, please make sure that the Participant/Account Owner's information is correct by checking your Account online at [NextGenforME.com](https://NextGenforME.com).
- Use black ink to type or print clearly, and do not staple the sheets together.

#### Need help?

Give us a call Monday – Friday  
from 8am-8pm ET at

**1-833-336-4529**  
**(1-833-33NG529)**

Individuals with speech or hearing disabilities may dial 711 to access Telecommunications Relay Service (TRS) from a telephone or TTY.

#### Mail the form to:

NextGen 529  
PO Box 534457  
Pittsburgh, PA 15253-4457

#### Overnight Mail:

NextGen 529  
Attention: 534457  
500 Ross Street, 154-0520  
Pittsburgh, PA 15262

#### Fax:

1-844-751-0017

### 1 Current NextGen 529 Account information

\_\_\_\_\_  
**Name of Participant/Account Owner** (First and Last)

\_\_\_\_\_  
**Participant/Account Owner's Last 4 Digits of Social Security or Taxpayer Identification Number**

\_\_\_\_\_  
**Telephone Number** (In case we have a question about your account. If you are updating your phone number, enter the number you have on file in this section and the new number in **Step 4**)

\_\_\_\_\_  
**Email of Participant/Account Owner**

\_\_\_\_\_  
**Designated Beneficiary Name** (First and Last)

\_\_\_\_\_  
**Designated Beneficiary's Last 4 Digits of Social Security or Taxpayer Identification Number**

## 2 Account updates or changes

Please identify up to three NextGen 529 account number(s) and check the box(es) to indicate for whom you plan to update or change information. To list more than three accounts, please use additional forms.

\_\_\_\_\_  
Current NextGen 529 Account Number

☐ Participant Only    ☐ Designated Beneficiary Only    ☐ Participant and Designated Beneficiary

\_\_\_\_\_  
Current NextGen 529 Account Number

☐ Participant Only    ☐ Designated Beneficiary Only    ☐ Participant and Designated Beneficiary

\_\_\_\_\_  
Current NextGen 529 Account Number

☐ Participant Only    ☐ Designated Beneficiary Only    ☐ Participant and Designated Beneficiary

## 3 Updated name or corrected date of birth and/or Social Security Number

Please print the name, date of birth, and/or Social Security Number exactly as you would like it to appear on the NextGen 529 account(s) you identified in **Step 2**. You must attach a copy of legal documentation for each changed item.

\_\_\_\_\_  
Name Change (First and Last) or Name of Participant/Account Owner or Designated Beneficiary

\_\_\_\_\_  
Corrected Social Security or Taxpayer Identification Number (attach copy of Social Security card)

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Corrected Date of Birth (MM/DD/YYYY) (attach copy of birth certificate)

Use a paper clip to attach a copy of one of the following to this form: Social Security card to correct SSN or the new name; birth certificate if correcting date of birth; official marriage certificate; the first page, last page, and pertinent provision of the divorce decree setting for the restoration of the former name; or signed court order approving the change.

## 4 Updated street address, phone number, and/or email address

Please print the information exactly as you would like it to appear on the NextGen 529 account(s) you identified in **Step 2**.

### Permanent residential address

No PO Boxes are accepted for a residential address.

\_\_\_\_\_  
**Street Address 1**

\_\_\_\_\_  
**Street Address 2**

\_\_\_\_\_  
**City**

\_\_\_\_\_  
**State**

\_\_\_\_\_  
**ZIP Code**

\_\_\_\_\_  
**Telephone Number**

\_\_\_\_\_  
**Email Address**

### Mailing address

If different from permanent address.

\_\_\_\_\_  
**Street Address 1**

\_\_\_\_\_  
**Street Address 2**

\_\_\_\_\_  
**City**

\_\_\_\_\_  
**State**

\_\_\_\_\_  
**ZIP Code**

**Is this mailing address a seasonal address?**

- ☐ **Yes** Please enter the End Date upon which mailing address will revert back to previous mailing address.

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
**End Date** (MM/DD/YYYY)

**5 Manage Successor Participant/Account Owner information (non-custodial)**

- Fill out this form to add, change or remove a Successor Participant/Account Owner from the NextGen Client Connect Plan account.
- The role of the Successor Participant/Account Owner does not apply to UGMA/UTMA accounts. To manage the role of Successor Custodian, please go to **Step 6**.
- A trust must already be established if you want to designate the trust as the Successor Participant/Account Owner.
- The Successor Participant/Account Owner is eligible to assume all rights, title, and interest if the Account Owner dies or becomes incapacitated.
- The Successor Participant/Account Owner must be at least 18 years old.
- A new account is required to be established for new ownership.
- Review the **NextGen 529 Client Connect Series Program Description and Participation Agreement** for details about Successor Participants.

**Manage Successor Participant/Owner information**

- ☐ Add a Successor Participant/Account Owner (Complete information below)
- ☐ Change the Successor Participant/Account Owner (Complete information below)
- ☐ Remove the Successor Participant/Account Owner

**NEW Successor Participant/Owner information**

Fill out this step to add or change a Successor Participant/Account Owner for this account. The Successor Participant/Account Owner must be at least 18 years old.

\_\_\_\_\_  
**Name** (First and Last)

\_\_\_ \_\_\_ / \_\_\_ \_\_\_ / \_\_\_ \_\_\_ \_\_\_ \_\_\_

**Date of birth** (MM/DD/YYYY)

\_\_\_ \_\_\_ \_\_\_ - \_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_ \_\_\_

**Social Security or Taxpayer Identification Number**

**6 Manage Successor Custodian information**

- Fill out this section to add, change or remove a new Successor Custodian on the NextGen 529 Plan UGMA/UTMA Select Series Account.
- The role of the Successor Participant/Account Owner does not apply to UGMA/UTMA custody accounts. See **Step 5** to manage Successor Participant/Account Owner information on non-custodial Accounts.
- The Successor Custodian manages the account on behalf of the minor until they reach the age of majority, at which point the Custodian transfers control of the Account to the Beneficiary, who then becomes the Account Owner.
- Review the **NextGen 529 Client Select Series Program Description and Participation Agreement** for details about UGMA/UTMA custody accounts.

**Manage Successor Custodian** (Choose one and complete the information below)

- ☐ Add a Successor Custodian
- ☐ Change the Successor Custodian
- ☐ Remove the Successor Custodian

\_\_\_\_\_  
**Name** (First and Last)

\_\_\_ / \_\_\_ / \_\_\_  
Date of birth (MM/DD/YYYY)

\_\_\_\_\_  
**Social Security or Taxpayer Identification Number**

\_\_\_\_\_  
**Phone Number**

## 7 Sign the form

By signing this form, I authorize the change(s) and acknowledge the following:

- I certify that I am the Participant/Account Owner, or I have the authority to act for the Participant/Account Owner on the NextGen 529 Client Connect Series Account, or
- I certify that I am the Custodian of the NextGen 529 Plan Client Connect Series UGMA/UTMA Account and I have the authority to act on behalf of the Beneficiary.
- I have received, read and understand the **NextGen 529 Client Connect Series Program Description and Participation Agreement**.
- I certify that all of the information provided by me on this form is, and all information provided by me in the future will be, true, complete and correct.
- I have checked that the Participant/Account Owner information on file for the NextGen 529 account is correct.
- By signing below, I am agreeing to the terms and conditions set forth below and in the **NextGen 529 Client Connect Series Program Description and Participation Agreement**. I understand and agree that those documents govern all aspects of this account and are incorporated herein by reference.

\_\_\_\_\_  
Signature of Participant/Account Owner or Custodian

\_\_\_\_\_  
Date (MM/DD/YYYY)

Vestwell State Savings, LLC ("Vestwell") is the program manager, The Bank of New York Mellon is the program custodian, BlackRock Advisors, LLC is the program investment manager, and Northern Lights Distributors, LLC is the Client Connect Series distributor.

**Investment products are not FDIC insured, are not bank guaranteed, and may lose value.**



**Program Manager**



*NextGen (logo) and NextGen 529* are registered trademarks of the Finance Authority of Maine.

© 2024 Finance Authority of Maine.