



Client Select Series Change Information Form

Important information about this form:

- Use this form to change an account address, telephone number, email address, or name (due to marriage, divorce or legal name change) or correct a date of birth or Social Security Number on a NextGen 529 account.
- Also use this form to authorize or revoke authority for your Financial Professional to act on your account(s) on your behalf.
- Carefully read the NextGen 529 Client Select Series Program Description and Participation Agreement before completing this form.
- Before completing this form, please make sure that the Participant/ Account Owner's information is correct by checking your account online at NextGenforME.com.

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:
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 Section 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 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 Financial Professional Authority

To Elect Financial Professional Authority, please read and check box below before signing the form.

I authorize the NextGen 529 Plan and its agents, Vestwell State Savings, LLC, the Program Manager, and The Bank of New York Mellon, the Program Custodian, to provide my Financial Intermediary with complete access to my account information and the ability to execute transactions (investment of contributions, withdrawals, exchanges among investment options) in my account on my behalf by telephone, mail, and through the Program's secure website. I understand and acknowledge that such transaction authority is not limited to my Financial Professional but extends to anyone authorized by my Financial Intermediary firm to execute such transactions on my behalf. I understand that certain changes to my account information (e.g., name of account owner, name of Designated Beneficiary, bank account information) will still require my signature on the applicable form. I understand and agree that the NextGen 529 Plan, the State of Maine, FAME, the Program Manager, the Program Custodian, BlackRock Inc. and their respective agents, employees and affiliates will not have any liability for any losses I may incur as a result of the acts or omissions of my Financial Intermediary or Financial Professional. To Revoke Financial Professional Authority, please read and check box below before signing the form:

If a Participant grants such authorization, none of FAME, the State of Maine, the Program Manager, the Program Custodian, the Select Series Distributor, the Investment Manager, American Century Investment Management, Inc., Franklin Templeton Investments, Lord Abbett & Co. LLC, Massachusetts Financial Services Company, Neuberger Berman Investment Advisers LLC or New York Life Investment Management LLC or any other organization will be liable for any consequences related to your Financial Intermediary's acts or omissions pursuant to the authorization.

To Revoke Financial Professional Authority, please read and check the box below before signing and submitting the form.

I revoke the authorization previously provided to NextGen 529 Plan and its agents, Vestwell State Savings, LLC, the Program Manager, and the Bank of New York Mellon, the Program Custodian to provide my Financial Professional with complete access to my account and to transact business in the account by telephone, email, and through the Program's secure website on my behalf. I understand and agree that the NextGen 529 Plan, the State of Maine, FAME, the Program Manager, the Program Custodian, BlackRock Inc. and their respective agents, employees and affiliates will not have any liability for any losses I may incur as a result of the acts or omissions of my Broker-Dealer Representative. (See the Program Description and Participation Agreement for details.)

6 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.
- I have received, read and understand the NextGen 529 Client Select 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 Select 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/Authorized
Representative of Entity

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 BlackRock Investments, LLC, Member FINRA, is the program distributor and underwriter.

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

 **Vestwell**
Program Manager

**FAME**
FINANCE AUTHORITY OF MAINE
Program Administrator

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