

Important information about this form:

- Fill out this form to change the Account Owner for VT529 Account.
- If the banking information connected to the VT529 Account needs to be updated because of an Account Owner change, go to www.vt529.org to Manage Bank Information online and follow the instructions. Please note that ACH Withdrawals may only be made to the Account Owner.
- A notarization acknowledgement (Step 7) is required to change the Account Owner.
- If the resigning Account Owner is deceased:
 - You must submit a certified copy of a Death Certificate and either a
 Letter of Testamentary or a Small Estates Affidavit to the individual
 providing the notarization acknowledgement.
 - Please submit copies of the Death Certificate and either a Letter of Testamentary or a Small Estates Affidavit with this form.
- A new account number will be assigned to the VT529 Account if you are changing the Account Owner.
- Use black ink to type or print clearly, and do not staple the sheets together.
- A complete list of forms is available at www.vt529.org/forms.

Need help?

Give us a call Monday – Friday from 9am - 8pm ET at 1-800-637-5860

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

Mail the form to:

VT529 P.O. Box 534482 Pittsburgh, PA 15253-4482

Overnight Mail:

VT529 Attention: 534482 500 Ross Street, 154-0520

Pittsburgh, PA 15262





1	Resigning Account Owner's information			
	Please provide the resigning Account Owner's information.			
	Name of resigning Account Owner (First and last)			
	//			
	Date of birth (mm/dd/yyyy)			
	7 7			
	Account number			
2	Reason for change			
	(Select one)			
	Divorce decree of resigning Account Owner			
	Death or incapacitation of resigning Account Owner			
	Transfer to the designated Beneficiary (For UTMA/UGMA accounts, the Beneficiary must have reached the age of majority*)			
	Other:			

^{*} The age of majority for most states is 18, with the following exceptions: Alabama (19), Mississippi (21), Nebraska (19).





529.org	
New Account Owner information	
Please provide the new Account Owner's information to tra	nsfer the ownership of the account.
Who are you transferring ownership to? (Select one)	
The Beneficiary (who has reached the age of majority	(*) (Move on to Step 4)
An Entity (Please include an Entity Enrollment Form v	with this form and move on to Step 4)
Another individual (Fill out the information below)	
Name (First and last)	
/ /	
How does the new Account Owner identify? As sl	ne As he Choose not to identify
Relationship of the new Account Owner to the resignin	g Account Owner
Child Spouse Grandchild	Other relative Non-relative
Residential address	
No PO Boxes are accepted for a residential address.	

State

ZIP Code



City



	Use the new Account Owner's residential address as the mailing address (Leave address information below blank)				
Stree	et address 1	Street ad	Street address 2		
City		 State			
Cho	ose how you want to receive statements Send digital tax forms, account informa		the accounts you manage (Select one		
Choo	•	tion and quarterly state	the accounts you manage (Select one) ements by email		
Choo	Send digital tax forms, account information (Please answer Step 4A below) Send digital quarterly statements and account information (Please answer Step 4A below)	tion and quarterly state ccount information by cormation and tax forms	the accounts you manage (Select one) ements by email email, but send tax forms by U.S. mail*		

 $^{^{\}star}$ All documents sent by U.S. mail will be mailed to the account's mailing address.









Verify Account Owner's identity

The new Account Owner must provide identification to prove their identity.

How to provide identification

Acceptable ID Documentation

Option A

Option B

Include a copy of a Department of Motor Vehicles State ID

Include a copy of both your Social Security card and your birth certificate

To help the government fight the funding of terrorism and money laundering, federal law requires us to obtain certain personal information: your name, address, date of birth, and Social Security number or taxpayer identification number and other information that will allow us to verify your identity. If we are unable to verify your identity, we may have to close your account or take other steps we think are necessary.







Sign the form

By signing this form, you're confirming the information you've provided is true for the change of the Account Owner.

- I have received, read and understand the Plan Disclosure Booklet.
- If the resigning Account Owner is deceased, I will submit copy of a Death Certificate and either a Letter of Testamentary or a Small Estates Affidavit with this form instead of a signature.
- By signing below, I am agreeing to the terms and conditions set forth below and in the Plan Disclosure
 Booklet. I understand and agree that those documents govern all aspects of this account and are
 incorporated herein by reference.
- I will retain a copy of the **Plan Disclosure Booklet** for my records. I understand that the Plan may, from time to time, amend the **Plan Disclosure Booklet**, and I understand and agree that I will be subject to the terms of those amendments.
- I certify that all of the information provided by me on this **Change Account Owner Form** is, and all information provided by me in the future will be, true, complete and correct and I authorize the Plan to open this account based upon this information.
- I understand that at any time the value of any account(s) to which I make contributions may be more or less than the amounts I contributed to such account(s).

Signature of resigning Account Owner (unless deceased)	Date (mm/dd/yyyy)
Signature of new Account Owner	Date (mm/dd/yyyy)







Notarization acknowledgement

If the resigning account owner is deceased, please provide a certified copy of a Death Certificate and the original Certificate of Domicile, and Letter of Testamentary with this form.

Keep in mind that:

- You're providing the following information as underwritten certification that your signature is genuine.
- You cannot guarantee your own signature. You may be required to provide proof of your authority to act on behalf of the Account.

Only sign if you are in the presence of a notary public or other officer providing notarization.

The undersigned has read the foregoing in its entirety before signing. IN WITNESS WHEREOF, I have hereunto

set my hand this day of Day (#) Month	, 20 Year
Signature of resigning Account Owner	
State of	, County of
This instrument was acknowledged before me	
physical presence online notarization	Notary Public (Seal)
on Date (mm/dd/yyyy)	
by	
My term expires:	
Signature of Notary Public	

