

## Change of Designated Beneficiary Form

**Return this Form to:**

CollegeCounts 529 Fund  
P.O. Box 85290  
Lincoln, NE 68501

**Overnight Mail:**

CollegeCounts 529 Fund  
3560 South 48th Street  
Lincoln, NE 68506

If you have questions, please call us at **866.529.2228**, Monday–Friday, 7 a.m. to 7 p.m. (Central).

### 1. Current Account Information

Account Number: \_\_\_\_\_

Account Owner Name (First, M.I., Last): \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Evening Phone Number: \_\_\_\_\_

Name of Current Beneficiary (First, M.I., Last): \_\_\_\_\_

### 2. New Beneficiary

Legal Name (First, M.I., Last): \_\_\_\_\_

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

Date of Birth (MM/DD/YYYY): \_\_\_\_\_

Gender:  Male  Female

Street Address (no P.O. Boxes): \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Relationship to Current Beneficiary: \_\_\_\_\_

Check this box if the new Designated Beneficiary is not a "Member of the Family" (defined below) of the current Designated Beneficiary.

As the Account Owner, you may change the Designated Beneficiary at any time without adverse income-tax consequences if the new Designated Beneficiary is a Member of the Family of the current Designated Beneficiary. If the new Designated Beneficiary is not a Member of the Family of the current Designated Beneficiary, the change is treated as a withdrawal that is subject to federal and state income taxes and a 10% federal penalty tax.

**Member of the Family**—IRS Publication 970 provides the following definition:

**Members of the beneficiary's family.** For these purposes, the beneficiary's family includes the beneficiary's spouse and the following other relatives of the beneficiary.

1. Son, daughter, stepchild, foster child, adopted child, or a descendant of any of them
2. Brother, sister, stepbrother, or stepsister
3. Father or mother or ancestor of either
4. Stepfather or stepmother
5. Son or daughter of a brother or sister
6. Brother or sister of father or mother
7. Son-in-law, daughter-in-law, father-in-law, mother-in-law, brother-in-law, or sister-in-law
8. The spouse of any individual listed above
9. First cousin

### 3. Investment Portfolio Selection (Check A or B)

**A. No change to current investment selections.** If you are currently invested in an Age-Based Portfolio and the new Designated Beneficiary is in a different age-band than the current Designated Beneficiary, the Account will be invested in the age-band of the new Designated Beneficiary.

**B. Yes, I want to change the investment selection as follows:** (Check only one box: 1, 2, or 3)

**1. Age-Based Portfolios** (If you've checked box 1, **select one** of the following)

Aggressive Portfolio    Moderate Portfolio    Conservative Portfolio

**2. Target Portfolios** (If you've checked box 2, **select one** of the following)

Fund 100    Fund 80    Fund 60    Fund 40    Fund 20    Fixed Income Fund

**3. Individual Fund Portfolios** (If you've checked box 3, **select any** of the following [must total 100%, only whole percentages allowed])

#### Bank Savings

\_\_\_\_\_ % Bank Savings 529 Portfolio

#### Money Market

\_\_\_\_\_ % Vanguard Cash Reserves Federal Money Market 529 Portfolio

#### Fixed Income

\_\_\_\_\_ % PIMCO Short-Term 529 Portfolio

\_\_\_\_\_ % Vanguard Short-Term Bond Index 529 Portfolio

\_\_\_\_\_ % Vanguard Total Bond Market Index 529 Portfolio

\_\_\_\_\_ % Fidelity Advisor Investment Grade Bond 529 Portfolio

\_\_\_\_\_ % PGIM Total Return Bond 529 Portfolio

\_\_\_\_\_ % Vanguard Short-Term Inflation-Protected Securities Index 529 Portfolio

\_\_\_\_\_ % Vanguard Inflation-Protected Securities 529 Portfolio

#### Balanced

\_\_\_\_\_ % T. Rowe Price Balanced 529 Portfolio

#### Real Estate

\_\_\_\_\_ % Vanguard Real Estate Index 529 Portfolio

#### Domestic (U.S.) Equity

##### Large-Cap

\_\_\_\_\_ % Vanguard Value Index 529 Portfolio

\_\_\_\_\_ % DFA U.S. Large Cap Value 529 Portfolio

\_\_\_\_\_ % Vanguard 500 Index 529 Portfolio

\_\_\_\_\_ % Vanguard Total Stock Market Index 529 Portfolio

\_\_\_\_\_ % Vanguard Growth Index 529 Portfolio

\_\_\_\_\_ % T. Rowe Price Large-Cap Growth 529 Portfolio

##### Mid-Cap

\_\_\_\_\_ % Vanguard Mid-Cap Index 529 Portfolio

\_\_\_\_\_ % Vanguard Extended Market Index 529 Portfolio

##### Small-Cap

\_\_\_\_\_ % Vanguard Small-Cap Value Index 529 Portfolio

\_\_\_\_\_ % DFA U.S. Small Cap Value 529 Portfolio

\_\_\_\_\_ % Vanguard Small-Cap Index 529 Portfolio

\_\_\_\_\_ % Vanguard Small-Cap Growth Index 529 Portfolio

\_\_\_\_\_ % Vanguard Explorer 529 Portfolio

#### International Equity

\_\_\_\_\_ % Vanguard Total International Stock Index 529 Portfolio

\_\_\_\_\_ % Dodge & Cox International Stock 529 Portfolio

## 4. Authorization

By signing below, I certify that I am the Account Owner of the Account indicated on this form and that the information contained herein is true, complete, and correct. **This designation will replace the Designated Beneficiary currently named on the Account.**

I acknowledge that neither the principal contributed to an Account, nor earnings thereon, are guaranteed or insured by the Federal Deposit Insurance Corporation (except the Bank Savings 529 Portfolio underlying investment) or any other governmental agency; are not guaranteed or insured by the State of Alabama, the State Treasurer of Alabama, the Board or Union Bank & Trust Company, or the FDIC; and are subject to investment risk, including loss of principal.

### Signature and Date Required

X

\_\_\_\_\_  
Signature of Account Owner or Trustee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name Here

\_\_\_\_\_  
Title (if other than an individual)



Offered by the  
State of Alabama

UBT 529 Services a Division of

**UBT**  
Union Bank & Trust  
Program Manager