



The Vanguard 529 College Savings Plan

Account Information Change Form

- You can change your mailing address, phone number, email address, successor account owner, or interested party by accessing your account online at vanguard.com.
- Complete this form to change the account owner name, mailing address, phone number, email address, successor account owner, or interested party information on your account.
- If you are changing your name, your former signature and new signature must be guaranteed in Section 7 by an authorized officer of a bank, broker, or other qualified financial institution.
- Print clearly, preferably in capital letters and black ink.

Forms can be downloaded from our website at vanguard.com/serviceforms. Or you can call us to order any form at **866-734-4530** on business days from 8 a.m. to 9 p.m., Eastern time. Return this form in the enclosed postage-paid envelope, or mail to **The Vanguard 529 College Savings Plan, P.O. Box 55111, Boston, MA 02205-5111**. For overnight delivery or registered mail, send to **The Vanguard 529 College Savings Plan, 140 Kendrick Street, Building C, Floor 3, Suite C320, Needham, MA 02494**.

1. Account owner information

To list more than three accounts, use a separate sheet.

Account number	
Account number	
Account number	
Name of account owner or trust <i>first, middle initial, last</i>	
Last four digits of Social Security number or other taxpayer ID number	
Daytime phone <i>area code, number, extension</i> ☐ Mobile	Evening phone <i>area code, number, extension</i> ☐ Mobile

2. Information to be updated

☐ Account owner—Complete Section 3
☐ Successor account owner—Complete Section 4
☐ Interested party—Complete Section 5

Remember to sign in Section 6.



3. Updated existing account owner information *if applicable*

- If you are changing your contact information, provide the new information exactly as you would like it to appear on your account in The Vanguard 529 College Savings Plan.
- If you are changing your name, you must obtain a signature guarantee in **Section 7**.

New legal name of existing account owner <i>first, middle initial, last</i>		
Email address		
Daytime phone <i>area code, number, extension</i>	Evening phone <i>area code, number, extension</i>	
☐ Mobile	☐ Mobile	
Permanent street address or APO/FPO <i>A P.O. box or rural route number is not acceptable.</i>		
City	State	Zip
Account mailing address if different from above <i>used both as the account's address of record and for all account mailings</i>		
City	State	Zip

4. Successor account owner information *if applicable*

Complete this section to designate an individual to assume control of your account when you die, or to replace or remove your current successor account owner. You can have only one successor account owner per account, and he or she must be a U.S. citizen or resident alien.

Check one

☐ Add ☐ Change ☐ Remove

Name of successor account owner <i>first, middle initial, last</i>	
Birth date <i>mm/dd/yyyy</i>	

5. Interested party information *if applicable*

Complete this section if you want additional persons to receive a quarterly statement on the account or if you are changing interested party information on your account. To add or change information for more than one interested party, use a separate sheet.

Check one

☐ Add ☐ Replace ☐ Change current information ☐ Remove

Name of interested party <i>first, middle initial, last</i>		
Mailing address		
City	State	Zip
Phone <i>area code, number, extension</i>	Relationship	

6. Signature

The account owner must sign below. However, if you are changing your name, skip this section and complete Section 7 instead.

I certify that the information provided in this form is true and complete in all respects.

Signature of account owner X	Today's date <i>mm dd yyyy</i> M M - D D - Y Y Y Y
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7. One-and-the-same signature guarantee—required for name changes only

- If you are changing your name, your former signature and your new signature must be guaranteed by an authorized officer of a bank, broker, or other qualified financial institution. *A notary public cannot provide a signature guarantee, and you cannot guarantee your own signature.*
- Do not sign below until you are in the presence of the authorized officer providing the one-and-the-same signature guarantee.

I certify that the information provided herein is true and complete in all respects.

Former signature of account owner X	Today's date <i>mm dd yyyy</i> M M - D D - Y Y Y Y
New signature of account owner X	Today's date <i>mm dd yyyy</i> M M - D D - Y Y Y Y

Signature of guarantor X	Today's date <i>mm dd yyyy</i> M M - D D - Y Y Y Y
Authorized officer's title	Authorized officer to place stamp here
Name of institution	

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