

Use this form to update a Virginia529SM Account upon the death of a trustee. **Please provide this completed form to the best of your knowledge and a copy of the trustee's death certificate.** If you have any questions, please contact Customer Service at 1-888-567-0540.

Please allow up to thirty (30) days for changes to be made following receipt of all required documents noted above. Our Program Operations Team will review the information and documentation submitted with this form and contact you if we have questions or need additional information.

SECTION 1 | Contact Information

Your Full Legal Name

Phone Number

Street Address

City, State, Zip Code

Email Address

Relationship to Trustee

SECTION 2 | Existing Trust Information

Virginia529 will contact the co-trustee or successor trustee (if applicable) to obtain a copy of the trust documents if they are not on file.

Trustee Full Legal Name

Trustee Social Security Number (SSN)

Virginia529 Account Number(s)

Tax Identification Number (TIN) of Trust (if different than trustee SSN)

Name of Trust

Co-Trustee Full Legal Name

Co-Trustee Social Security Number

Tax Identification Number of Trust (if the decedent's SSN was previously used)

SECTION 3 | Contact Information for Successor Trustee(s)*

*If applicable

Virginia529 may request additional information from trustees in order to complete identification verification processes.

Successor Trustee Full Legal Name

Successor Trustee Social Security Number (SSN)

New Tax Identification Number (TIN) of Trust (if the decedent's SSN was previously used)

Successor Trustee Street Address

Successor Trustee City, State, Zip Code

Successor Trustee Email Address

Successor Trustee Phone Number

Successor Trustee 2 Full Legal Name

Successor Trustee 2 Social Security Number

Successor Trustee 2 Street Address

Successor Trustee 2 City, State, Zip Code

Successor Trustee 2 Email Address

Successor Trustee 2 Phone Number