NEST 529 ADVISOR PLAN

NEST Advisor College Savings Plan

Account Features Form

- Use this form to add, change, or delete an Automatic Investment Plan (AIP), Electronic Fund Transfer (EFT), Systematic Withdrawal Program (SWP), Systematic Exchange Program (SEP), and banking information to your NEST Advisor College Savings Plan (NEST Advisor Plan) Account.
- Type in your information and print out the completed form, or print clearly, preferably in capital letters and black ink. Mail the form to the address listed. Do not staple.

Forms can be downloaded from our website at **www.NEST529Advisor.com,** or you can call us to order any form — or request assistance in completing this form — at **1.888.659.6378** any business day from 8 a.m. to 8 p.m. Central time.

1.888.659.6378
8 a.m. to 8 p.m. Central time M-F

www.NEST529Advisor.com

clientservice@NEST529Advisor.com

Regular mailing address:
NEST Advisor College Savings Plan
P.O. Box 30277
Omaha, NE 68103-1377

Overnight mailing address:
NEST Advisor College Savings Plan
920 Main Street, Suite 900
Kansas City, MO 64105

1. Current Account Owner information

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☐☐☐☐☐☐☐☐☐ — ☐☐
☐☐☐☐☐☐☐☐☐ — ☐☐

Account Number(s) *(To list more than 3 Accounts, use a separate sheet.)*

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Name of Account Owner *(first, middle initial, last)*

☐☐☐ — ☐☐☐ — ☐☐☐☐

Telephone Number *(In case we have a question about your Account.)*

2. Features to add, update, or delete *(Check all that apply.)*

☐ Automatic Investment Plan/Electronic Fund Transfer — **Complete Section 3 and Section 4**
☐ Bank information — **Section 4**
☐ Systematic Withdrawal Program — **Section 5**
☐ Systematic Exchange Program — **Section 6**

NEST ADV ACCT FEAT

3. Automatic Investment Plan (AIP)/Electronic Fund Transfer (EFT)

- Complete this section to add, change, or delete an automatic investment from your bank account, or to add, change, or delete contributions by electronic transfer from a bank.
- You can add, change, or delete an AIP and EFT by accessing your Account online at **www.NEST529Advisor.com.**
- Account Owners, and others can each contribute to a NEST Advisor Plan Account through AIP. To add additional AIP instructions or multiple bank accounts, complete and include **Section 3A** and **Section 4** for each.
- Contributions by AIP or EFT will be unavailable for distribution for 5 business days.
- Your transfer will be allocated according to the existing allocation percentages.

A. ☐ **AIP.** You can transfer money from your bank account to the NEST Advisor Plan Account on a set schedule. *(Check all that apply.)*

☐ Add this option to my Account. *(Provide the information below and in **Section 4.**)*

☐ Change my investment amount, frequency, and/or debit date. *(Provide the new amount and/or debit date below.)*
Note: If you wish to skip a scheduled AIP, please call **1.888.659.6378**.

☐ Change my bank account information. *(Provide the information in **Section 4.**)*

☐ Delete this option.

Amount of Debit: ☐ $50 ☐ $100 ☐ $150 ☐ $250 ☐ Other **$** ☐,☐☐☐.**0 0**
Amount

Frequency *(Check One.)***:** ☐ Monthly ☐ Quarterly (Every three months.) **OR** ☐ Custom (Check the months below that you would like your AIP to occur.)

☐ January ☐ February ☐ March ☐ April ☐ May ☐ June

☐ July ☐ August ☐ September ☐ October ☐ November ☐ December

Day of Month:* ☐☐

*The NEST Advisor Plan must receive instructions at least 3 business days prior to the day of the month specified; otherwise, debits from your bank account will begin the following month on the day specified. Please review your quarterly statements for details of these transactions. If the date is not specified, this option will begin the month following the receipt of this request, on the 10th day of the month.

☐ **Annual Increase.** You may increase your AIP contribution automatically on an annual basis. Your contribution will be adjusted each year in the month that you specify by the amount indicated.

Amount of increase: **$** ☐,☐☐☐.**0 0**

Month:** ☐☐☐☐☐☐☐☐☐☐☐☐

** The month in which your AIP contribution will be increased. The first increase will occur at the first instance of the month selected.

B. ☐ **EFT.** Add, change, or delete bank information for future electronic transfers. We will keep your bank instructions on file for future EFT contributions. You can transfer funds from your bank account to your NEST Advisor Plan Account at any time simply by calling us, or by requesting a transfer online. The Plan may place a limit on the total dollar amount per day you may contribute to an account by EFT.

☐ Add ☐ Delete ☐ Change my bank account information *(Provide the information in **Section 4**.)*

4. Bank information

- Complete this section if you are adding an AIP or EFT option to your Account or if you are changing your bank account information.
- AIP and EFT can be made only through accounts held by a U.S. bank, savings and loan association, or credit union that is a member of the Automated Clearing House (ACH) network. Money market mutual funds and cash management accounts offered through non-bank financial companies cannot be used.

☐ **Important:** Please check the box to confirm that your ACH transactions will not involve a bank or other financial services company, including any branch or office thereof, located outside the territorial jurisdiction of the United States.

Bank Name

Bank Routing Number

Bank Account Number

Account Type: *(Check One.)* ☐ Checking ☐ Savings

Names on Bank Account

Name *(first, middle initial, last)*

Name *(first, middle initial, last)*

If you are not the bank account owner the named bank account owner(s) must authorize this AIP and/or EFT service by signing here:

SIGNATURE

Signature

Date *(mm/dd/yyyy)*

SIGNATURE

Signature

Date *(mm/dd/yyyy)*

Note: The routing number is usually located in the bottom left corner of your checks. You can also ask your bank for the routing number.

5. Systematic Withdrawal Program (SWP) *(Optional)*

- Complete this section to establish periodic withdrawals from your NEST Advisor Plan Account.
- SWPs can be established for Qualified Distributions only. We are required to file IRS Form 1099-Q annually for distributions taken from your NEST Advisor Plan Account. You can have up to two SWPs on your Account.
- If the balance on the Investment Option is less than the SWP amount specified, the SWP instructions will be stopped.

Important: Your withdrawal will be held if a contribution is not on deposit for 5 business days, or 10 business days if the address to which you have requested the withdrawal to be sent has changed, or if the Account Owner has been changed within 10 business days. The withdrawal will be released when the specified waiting period has been satisfied.

A. Activate the SWP for my NEST Advisor Plan Account.

Frequency *(Check One.)*: ☐ Monthly ☐ Quarterly ☐ Semi-Annually ☐ Annually

Start Date:* ☐☐ – ☐☐ – ☐☐☐☐
Date *(mm/dd/yyyy)*

End Date *(Optional)*: ☐☐ – ☐☐ – ☐☐☐☐
Date *(mm/dd/yyyy)*

*The first systematic withdrawal will occur on the start date indicated above if received within three business days of that date; otherwise, the systematic withdrawal will begin the following month. The withdrawal date may occur from the first day of a given month through day 28 of that month. If the date falls on a weekend or holiday, it will be processed on the following business day.

I authorize the NEST Advisor Plan to withdraw from the following Investment Option(s)

Investment Option	Dollar Amount
	$ ☐,☐☐☐.00
	$ ☐,☐☐☐.00
	$ ☐,☐☐☐.00

B. SWP Recipient.

☐ Account Owner *(Address on record.)*

☐ Beneficiary *(Address on record.)*

☐ Eligible college or university *(Provide school address below.)*

Name of School *(Complete only if the distribution is to be sent directly to the school.)*

Department/Office/Contact Name

Beneficiary's Student ID

Mailing Address

City State Zip Code

6. Systematic Exchange Program (SEP) *(Optional)*

The Systematic Exchange Program allows you to exchange from one Investment Option to one or more other Investment Options within your Account on a pre-scheduled basis.

- To start a Systematic Exchange Program you must designate a minimum of $2,500 to be exchanged from one Investment Option to one or more other Investment Options on a pre-scheduled basis. The Exchange From Investment Option must have a minimum of $2,500 in assets to start the Systematic Exchange.
- You must designate a minimum of $200 for each monthly or quarterly scheduled exchange.
- Creating a Systematic Exchange using money that is already invested in your Account will count towards your twice per calendar year investment change limit.
- Creating a Systematic Exchange with new money contributed to your Account will NOT count towards your twice per calendar year investment change limit. To start a Systematic Exchange using new money you must mail a contribution check with this completed Form to the Plan.
- If you make any changes to or cancel an established Systematic Exchange Program it will count towards your twice per calendar year investment change limit.

Account Number: ☐☐☐☐☐☐☐☐☐ — ☐☐

Beneficiary Name: _____ _____
First Last

Frequency *(Check One.)*: ☐ Monthly ☐ Quarterly (3 months from the start date)

Day of Month:* ☐☐

*The first systematic exchange will occur on the day of the month indicated above if received within three business days of that date; otherwise, the systematic exchange will begin the following month. If a date is not specified, the exchange will take place on the 10th day of the month.

Exchange From Investment Option: _____

Exchange To Investment Option per Exchange Period:

_____ $ ☐,☐☐☐.00
Investment Option — Dollar Amount (*$200 Minimum*)

_____ $ ☐,☐☐☐.00
Investment Option — Dollar Amount (*$200 Minimum*)

_____ $ ☐,☐☐☐.00
Investment Option — Dollar Amount (*$200 Minimum*)

Stop Type *(Select one)*:

☐ **Stop Date:** ☐☐ — ☐☐ — ☐☐☐☐
Date *(mm/dd/yyyy)*

☐ **Exchange Amount:** $ ☐,☐☐☐.00

☐ **When Complete Balance of the "Exchange from" Investment Option is depleted.**

By completing this section and signing this Form, I authorize the NEST Advisor Plan to process the periodic exchanges as indicated. I understand that making changes to an established Systematic Exchange Program will count towards my twice per calendar year investment option change limit.

7. Signature — YOU MUST SIGN BELOW

- I certify that I have read and understand, consent, and agree to all the terms and conditions of the NEST Advisor 529 College Savings Plan Program Disclosure Statement and Participation Agreement as they relate to adding, deleting, or changing financial features.
- By signing below, I authorize the Program Manager or its designee to add, delete, or change financial features according to the instructions above. I understand that if I have changed the Account Owner or address to my Account within the last 10 business days, this form must be medallion signature guaranteed below.
- If I have added or changed banking information in **Section 4**, I certify that I have authority to transact on the bank account so indicated or that the account owners of such bank account have authorized me to institute this AIP and/or EFT service from their account on their behalf.
- If the Account is owned by an entity or trust, I certify that I am authorized to act on its behalf in making this request. If the Account is a minor-owned Account or is funded with UGMA/UTMA assets, I further certify that I am the parent/guardian/custodian of the Account identified in **Section 1**.
- I certify that the information provided herein is true and complete in all respects. I understand that all changes made on this form supersede all my previous designations.
- If I have chosen the AIP or EFT option, I authorize the Program Manager and its designees, upon telephone or online request, to pay amounts representing redemptions made by me or to secure payment of amounts invested by me, by initiating credit or debit entries to my account at the bank named in **Section 4**. I authorize the bank to accept any such credits or debits to my account without responsibility to their correctness. I acknowledge that the origination of ACH transactions involving my bank account must comply with U.S. law. I further agree that neither the Nebraska Educational Savings Plan Trust, the NEST Advisor Plan, the State of Nebraska, the Nebraska State Treasurer, nor the Program Manager or its authorized agents or any of their affiliates will not incur any loss, liability, cost, or expense for acting upon my telephone or online request. I understand that this authorization may be terminated by me at any time by notifying the Program Manager and the bank by telephone or in writing, and that the termination request will be effective as soon as the Program Manager and the bank have had a reasonable amount of time to act upon it. I certify that I have authority to transact on the bank account identified by me in **Section 4**.

SIGNATURE

Signature of Account Owner

☐☐ – ☐☐ – ☐☐☐☐

Date *(mm/dd/yyyy)*

Nebraska Educational Savings Plan Trust, Issuer. Nebraska State Treasurer, Trustee. Nebraska Investment Council, Investment Oversight. First National Bank of Omaha, Program Manager. First National Capital Markets, Inc. Primary Distributor, Member FINRA, SIPC. First National Capital Markets and First National Bank of Omaha are affiliates.

Nebraska State Treasurer, Trustee

First National Bank Omaha

Program Manager