

Important information about this form:

- Use a **Rollover Form** to transfer assets from this STABLE account to another eligible Beneficiary.
- An IRS Form 1099-QA is filed when a withdrawal is made from the STABLE account.
- Please send in copies of a Death Certificate and either a Letter of Testamentary or a Small Estates Affidavit to the individual providing the notarization acknowledgement.
- Type or print clearly in black ink, and do not staple the pages or copies of documents included with this form.

Need help?

Give us a call Monday – Friday from 9am – 8pm ET at **1-800-439-1653**

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

Mail the form to:

STABLE Account Plan
PO Box 534425
Pittsburgh, PA 15253-4425

Overnight Mail:

STABLE Account Plan
Attention: 534425
500 Ross Street, 154-0520
Pittsburgh, PA 15262

Fax:

844-745-9612

1 STABLE account information

Name of the Beneficiary on the STABLE account (First and last)

____ _ - ____ _ - ____ _
Beneficiary's Social Security or Taxpayer Identification Number

S T - ____ _ - ____ _
STABLE account number

2 Executor information

Name (First and last)

____ / ____ / ____
Date of birth (mm/dd/yyyy)

____ _ - ____ _ - ____ _
Social Security or Taxpayer Identification Number

5 A notarization acknowledgement is required for the death of a Beneficiary

Please provide 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.

Keep in mind that:

- You're providing the following information as underwritten certification that your signature is genuine.
- You can get a notarization acknowledgement from an authorized officer of a bank, broker, or other qualified financial institution. You may be required to provide proof of your authority to act on behalf of the STABLE account.

Only sign if you are in the presence of an authorized notary providing the notarization acknowledgement.

I certify that the information provided herein is true and complete in all respects, and that I have read and understand, consent, and agree to all the terms and conditions of the **Plan Disclosure Statement & Participation Agreement**.

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

set my hand this _____ day of _____, 20____.

Day (#) Month Year

Signature of Executor

State of _____, County of _____

This instrument was acknowledged before me

physical presence online notarization

on _____
Date (mm/dd/yyyy)

by _____
Name of person (First and last)

My term expires: _____
Date (mm/dd/yyyy)

Notary Public (Seal)

Signature of Notary Public