# IONESTAR 529 PLAN® Financial Advisor Change Form



### INSTRUCTIONS

Questions? Please call **800-445-GRAD** (**4723**), option #4, Monday through Friday from 8am to 6pm Central Time.

Use this Form to change the financial advisor on the account or update the information on the account.

Section 1 is to be completed and signed by the financial advisor.

The Account Owner must sign Section 2 to ensure the proper signatures have been obtained to effect the changes requested.

This Form can be submitted via fax to **402-431-4452** or mailed to:

LoneStar 529 Plan P.O. Box 405010 Cincinnati, OH 45240

## 1 | FINANCIAL ADVISOR INFORMATION

You must designate a financial advisor for your account. A financial advisor is any individual or entity that is appropriately licensed and who has entered into an agreement with the plan distributor to distribute interests in the plan. This term may include brokers, and financial intermediaries, such as investment advisors or banks.

- O Check here if you are changing or adding the financial advisor and provide the new information below. Your new financial advisor must be eligible to sell the Unit Class specified on your LoneStar 529 Plan account.
- O Check here if you are not assigning a new financial advisor but are changing/correcting information for your current financial advisor.

| Advisor's Firm Number                                | Branch Number | Advisor ID Number/CRD Number |                        |  |  |  |  |
|--|---------------|------------------------------|------------------------|--|--|--|--|
| Financial Advisor Name (first, middle initial, last) |               |                              |                        |  |  |  |  |
| Dealer/Firm Name                                     |               |                              |                        |  |  |  |  |
| Branch/Office Street Address                         |               |                              |                        |  |  |  |  |
| Branch/Office City                                   |               | Branch/Office State          | Branch/Office Zip Code |  |  |  |  |
| Phone Number   | Fax Number    |                              |                        |  |  |  |  |
| Phone Number   | Fax NUMDer    |                              |                        |  |  |  |  |

Email address

#### Please select only one of the following:

- O I am a Financial Advisor that is compensated through commissions and will select Class A units for my client.
- O I am a Registered Investment Advisor (RIA) or other Investment Advisor Representative (IAR) whose fees are assessed separately and not from the clients account and will utilize Class RIA units for my clients.

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Signature of Financial Advisor

Date

Please indicate the LoneStar 529 Plan® accounts to which changes will apply (please print clearly).

Please list all account numbers to which changes listed should apply. If there are more accounts than fit in the spaces below, please attach an additional list of account numbers. Refer below for signature requirements.

| Owner first name | Middle initial | Last name      |
|------------------|----------------|----------------|
| Account number   |                | Account number |
| Account number   |                | Account number |
| Account number   |                | Account number |

By naming a financial advisor on the form, I understand that my financial advisor will receive confirmations and, upon request of my financial advisor, quarterly statements and tax forms.

I understand the type of financial advisor I have listed on my account and how they are compensated, and I authorize the change.

| Signature | of Acco | ount Ov | vner |
|-----------|---------|---------|------|

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Date

The LoneStar 529 Plan<sup>®</sup> ("Plan") is administered by the Texas Prepaid Higher Education Tuition Board ("Board"). Orion Advisor Solutions, Inc. ("Orion") is the manager of the Plan, which is distributed by Northern Lights Distributors, LLC and maintained by Ultimus Fund Solutions, LLC, neither of which are affiliated with Orion. The Plan and the Board do not provide legal, financial, or tax advice and you should consult a legal, financial, or tax advisor before participating.

Non-residents of Texas should consider whether their home state, or the beneficiary's home state, offers its residents any tax or other state benefits such as financial aid, scholarship funds, and protection from creditors that are only available for participants in that state's plan.

Estimated total asset-based fees are available on the Allocation Worksheet at LoneStar529.com/Allocation-Worksheet and are published in the Plan Description and Savings Trust Agreement, which is reviewed annually. Fees are subject to change.

An account could lose money including the principal invested. No part of an account is a deposit or obligation of, or is guaranteed or insured by, the Board, the state of Texas, or any agency or agent thereof. Interests in the Plan have not been registered with or approved by the SEC or any state. Investors should carefully consider the investment objectives, risks, fees, charges, and expenses associated with municipal fund securities. The Board may suspend, modify, or terminate the Plan or change investment approaches, offerings, and/or underlying investment funds at any time and without the consent of account owners or beneficiaries. The Plan Description and Savings Trust Agreement contain this and other important information about the Plan and may be obtained by visiting LoneStar529.com or calling 800-445-GRAD (4723), option 4. Investors should read the Plan Description and Savings Trust Agreement, and all other Plan documents carefully before investing.

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