

For my529 Use Only
my529 Master Account No
Date Received by my529
User Initials

Form 900 CSA Entity Authorized Signer Card

ABOUT THIS FORM

- Use this form to designate authorized signer(s) who, in addition to the Account Agent, may sign my529 paper forms on behalf of an entity administering a children's savings account (CSA). State and local governments, affiliated agencies, and 501(c)(3) organizations are entities that can open a children's savings account through my529.
- Before submitting this form, sign a CSA Agreement for the entity with my529 and designate its Account Agent using the Master Account Agreement (Form 105).

NEXT STEPS

2

• The information and signatures provided below will be used to validate future transactions submitted by the entity using my529 paper forms.

SUBMITTING THIS FORM

CSA Entity Information

- Please print clearly—preferably in capital letters, using black or blue ink.
- To ask questions about completing this form, contact my529 toll-free at 800.418.2551 on business days from 7 a.m. to 5 p.m. MT.
- Return this form to: my529, PO Box 145100, Salt Lake City, UT 84114-5100. For delivery by overnight carrier, send to: my529, Board of Higher Education Building, Gateway 2, 60 South 400 West, Salt Lake City, UT 84101-1284. You may also fax this form to 800.214.2956 or email it to csa@my529.org.

SA Entity Name	Taxpayer Identification Number	Program Name	
SA Entity Account Agent Name			
CSA Entity's Authorized Sign	ers		
Authorized Signer's Name (Last, First)	Title	Signature	
Authorized Signer's Name (Last, First)	Title	Signature	
Authorized Signer's Name (Last, First)	Title	Signature	
Authorized Signer's Name (Last, First)	Title	Signature	
Authorized Signer's Name (Last, First)	Title	Signature	

3 CSA Entity's Account Agent Signature Authorization (Required)

The Account Agrent who signed the Master Account Agreement (Form 105) must sign below.

By signing below, I certify and agree that the information and signatures provided above are true and correct and will be used to validate certain future transactions submitted on behalf of the entity. I also represent and warrant that the Authorized Signers above have the authority to sign on behalf of the CSA Entity listed above.

Required	>		
	Signature of the Entity's Account Agent	Name of the Entity's Account Agent (please print)	Date (mm/dd/yyyy)