

Return this Form to:

Bright Directions College Savings Program P.O. Box 82623 Lincoln, NE 68501 Overnight Mail:

Bright Directions College Savings Program 1248 O Street, Suite 200 Lincoln, NE 68508

If you have questions, please call us at **866.722.7283**, Monday–Friday, 7a.m. to 7 p.m. (Central).

You can also fax the completed form to us at 402.323.1797.

### Illinois Residents

**Existing Bright Directions Account Owners:** Use this form to claim your Illinois First Steps \$50 seed deposit or visit <a href="mailto:BrightDirections.com/FirstSteps">BrightDirections.com/FirstSteps</a> to submit your claim electronically.

**New Account Owners:** A Bright Directions account is required to claim the \$50 seed deposit. If you have not yet opened a Bright Directions account for your eligible child, please visit with your financial professional to complete your enrollment. You may claim the Illinois First Steps \$50 seed deposit during the enrollment process.

### **Eligibility:**

The Illinois First Steps \$50 seed deposit can be claimed if:

- 1. The designated Beneficiary was <u>born or adopted on or after January 1, 2023</u> and is under the age of ten (10) years; and
- 2. The Account Owner is the parent or legal guardian of the child named as Beneficiary; and
- 3. The Account Owner was a resident of Illinois at the time of birth or adoption of the Beneficiary; and
- 4. The seed deposit was not previously claimed.

1.	Account Number		
	Bright Directions Account Number:		
2.	Account Owner Information		
	Account Owner Name (First, M.I., Last):		
	Date of Birth: Social Security Number or Individual Tax Identification Number:		
	Address at the time of birth or adoption:		
	Phone #: Email address:		

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## **Beneficiary Information**

Beneficiary Name (First, M.I., Last):				
Date of Birth:				
Was the Beneficiary born in Illinois?				
☐ Yes, Illinois Birth Record Number (if available):				
$\square$ No, please include a copy of the birth certificate or adoption papers with this form.				
Account Owner's Relationship to the Beneficiary:				
☐ Parent				
Legal Guardian, if claiming as a legal guardian please include a copy of the current Letters of Guardianship with this form.				

The information submitted on this Illinois First Steps Claim Form will be verified against birth records and information from the Illinois Department of Public Health and Illinois Department of Revenue records. Only one Illinois First Steps \$50 seed deposit may be claimed per eligible child. If the Claim is verified the \$50 seed deposit will be made within 60-90 days following the end of the current quarter. The funds will be held in an omnibus account owned and managed by the Illinois State Treasurer.

4.

# **Claim Certification & Signature**

#### ILLINOIS FIRST STEPS \$50 SEED DEPOSIT, I certify that:

I am the parent or legal guardian of Beneficiary named above; I was a resident of Illinois at the time of birth or adoption of the Beneficiary; the Beneficiary was born or adopted on or after January 1, 2023 and is under ten (10) years of age; and I understand that only one \$50 seed deposit can be claimed for each Beneficiary.

I understand that the \$50 seed deposit will be held in an omnibus Bright Directions Account owned and managed by the Illinois State Treasurer and neither I nor any successor Account Owner will have control or access to the funds.

I understand that the seed deposit funds, if validly claimed by the Beneficiary's tenth birthday, may be used by a Beneficiary who is a resident of Illinois for qualified higher education expenses as defined by Illinois (does not include K-12 expenses) after the Beneficiary has completed secondary education or has reached the age of 18.

Signature and Date Required				
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	Signature	Date		
	Print Name Here			



Northern Trust Securities, Inc.



