



529 EDUCATION SAVINGS PLAN

# USAA® 529 Distinguished Valor Matching Grant Program Matching Grant Program Application

Applications will be accepted each calendar year beginning January 1 and must be postmarked by December 15.

Before completing this Distinguished Valor Matching Grant Program Application, read the eligibility requirements found in the Plan Description and Participation Agreement, and any supplements distributed from time to time (together, the Plan Description and Participation Agreement).

- **Sections 1 - 4** must be completed by the USAA 529 Education Savings Plan Account Owner, who must sign and date this application. You must also submit: A copy of one of the required documents listed in section 3.
- You must complete and submit a separate Distinguished Valor Matching Grant Program Application for each designated beneficiary on whose behalf you are requesting a matching grant.
- Your application will be considered incomplete if it is not appropriately signed, or if the required documents are not enclosed.

Mail this form along with required documentation to:  
**USAA 529 Education Savings Plan**  
 P.O. Box 55354  
 Boston, MA 02205-5354

For overnight delivery or registered mail, send to:  
**USAA 529 Education Savings Plan**  
 95 Wells Ave., Suite 155  
 Newton, MA 02459-3204

For questions about the USAA 529 Education Savings Plan or the Distinguished Valor Matching Grant Program, call 1-800-235-8396 or visit [www.vcm.com/matchinggrant](http://www.vcm.com/matchinggrant).

## 1. Account Information

**Note:** A USAA 529 Education Savings Plan Enrollment Application must accompany the Distinguished Valor Matching Grant Program Application if there is no current 529 plan account.

USAA 529 Education Savings Plan Account Number (from your Statement)

Account Owner First Name  MI  Last Name

Is the Account Owner a Resident of Nevada?  Yes  No

## 2. Designated Beneficiary Information (required)

This information is required in order to establish your Distinguished Valor Matching Grant Program account. The designated beneficiary's Social Security number or Taxpayer Identification number on your USAA 529 Education Savings Plan account must match your designated beneficiary's Social Security number or Taxpayer Identification number you submit on this Distinguished Valor Matching Grant Program Application.

Designated Beneficiary First Name  MI  Last Name

Social Security Number  Date of Birth (mm - dd - yyyy)

Is Designated Beneficiary a Resident of Nevada?  Yes  No

## 3. Applicant Information

Please indicate the appropriate required documentation:

- Active-Duty Orders
- DD-214 or DD-215 (updated discharge)

**Note:** Do not send originals, because we will not return any documents to you.

Will the Designated Beneficiary be under the age of 13 on December 31 of this year?

Yes  No

Is your household adjusted gross income less than \$150,000 for the prior tax year?

Yes  No

For questions about the Distinguished Valor Matching Grant Program, call 1-800-235-8396, Monday - Friday from 7:30 a.m. to 8:00 p.m. CST and Saturday from 8:00 a.m. to 5:00 p.m. CST or visit [www.vcm.com](http://www.vcm.com)



**4. ACCOUNT AUTHORIZATION AND SIGNATURE (REQUIRED)**

By signing below I certify that:

- I agree to the terms regarding the Distinguished Valor Matching Grant Program as described in the Plan Description and Participation Agreement.
- I understand that the matching grant account and any applicable earnings are controlled by the USAA 529 Education Savings Plan, until I submit a request in good order for a qualified withdrawal to an eligible educational institution as described in the Plan Description and Participation Agreement.
- I certify that the information I have provided is true, complete, and accurate, and I consent to and authorize the use of my private data.
- If I am submitting private data belonging to another individual, I certify that I am providing such private data with the knowledge and permission of such individual(s).

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_  
Date

**X**

\_\_\_\_\_  
Account Owner Signature

**IMPORTANT INFORMATION:** Read the Distinguished Valor Matching Grant Program in the Plan Description and Participation Agreement carefully to determine the necessary documents that should accompany this application. This document will be considered not in good order if it is incomplete, it is not appropriately signed, or if the required copy of your Active Duty Orders or required documentation is not enclosed.

**FOR OFFICE USE ONLY:**

Eligible       Not Eligible

Match Amount: \_\_\_\_\_

State Authorization: \_\_\_\_\_

Interests in the USAA 529 Education Savings Plan™ (Plan) are municipal fund securities issued by the Nevada College Savings Trust Fund (Trust). The value of an investment in the Plan will vary with market conditions. The Plan is administered by the Nevada State Treasurer, Zach Conine. Victory Capital Management Inc. (Victory Capital) provides investment management services, and Victory Capital Services, Inc. markets and distributes the Plan. Ascensus Broker Dealer Services, Inc. serves as the Program Manager as well as effects account owner transactions in the Plan. Interests in the Plan are not guaranteed by the Trust, the Plan, the state of Nevada, the Board or any other governmental entities, or any USAA, Victory Capital or Ascensus entities and you could lose money.

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