Information Needed to create a MI-ABLE Account

REQUIRED:

Registration:

- Create Your Account
  - Beneficiary social security number
  - Full Name
  - Address
  - Email Address
  - Date of birth

Enrollment- Step 1

- Beneficiary must select one of the below items to confirm eligibility
  - Eligibility Status
  - Eligibility Disability
  - Physician Diagnosis
  - Physician First Name
  - Physician Last Name
  - Physician Address
  - Date of Diagnosis

Enrollment – Step 2 Contributions

- Contribution (One time, Reoccurring)
  - Bank Name
  - Bank Routing Number
  - Bank Account Number
  - Transfer Method
  - Amount
  - Frequency of contribution (once or recurring)
  - For recurring contributions: Start and end date

Enrollment- Step 3

- Review and confirm all information

OPTIONAL:

Registration:

- OPTIONAL- Add an Account Administrator (not required unless beneficiary is a minor)
  - Account Administrator social security number
  - Full Name
  - Date of Birth
  - Country
  - Primary Address
  - Phone Number
  - Email Address

Enrollment- Step 1

- OPTIONAL - Public Donation Profile
  - Beneficiary Photo
  - Beneficiary Short Bio

- OPTIONAL - Authorized Signer other than beneficiary
  - Authorized Signer Name
  - Authorized Signer SSN
  - Authorized Signer DOB

Enrollment – Step 2

- OPTIONAL- Select Investment Allocations

For questions about the MI-ABLE program or to enroll (after Nov. 1) visit www.michigan.gov/MIAble