

Trustee Certification of Trust



- Complete this **Trustee Certification of Trust** form to identify trustees when a trust Account is established with Alaska 529, when the identity and/or number of trustees has changed, or when the trustees aren't identified in the registration of Alaska 529 Account(s) identified in **Section 1** below. All continuing and new trustees must sign in **Section 4** and have their signatures notarized.
- If you open a new trust Account, you must also complete an **Account Application for an Entity Account** and attach a copy of the pages of the trust that show the name of the trust, the trust date, and a listing of all trustees, and the page(s) containing all signatures.
- For assistance in determining the conditions of your trust or the trust's authority, consult legal counsel. Alaska 529 will not provide legal advice on your trust.
- Type in your information and print out the completed form, or print clearly, preferably in capital letters and black ink. Mail the form to the mailing address listed. Do not staple.

Capitalized terms not otherwise defined on this form have the meanings set forth in the Plan Disclosure Document.



1-888-425-2752

Monday - Friday 7 a.m. to 6 p.m.
Alaska Time



Alaska529plan.com

Regular mailing address:

Alaska 529

PO Box 219865

Kansas City, MO 64121

Overnight mailing address:

Alaska 529

1001 E 101st Terrace, Suite 200

Kansas City, MO 64131

1. Trust Information

$$\square\square\square\square\square\square\square\square - \square\square$$

Account Number

[illegible]

Name of Trust (Provide the full, legal name of the trust.)

$$\boxed{}\boxed{}\boxed{} - \boxed{}\boxed{} - \boxed{}\boxed{}\boxed{}\boxed{}$$

Trust Tax ID Number

$$\boxed{}\boxed{} - \boxed{}\boxed{} - \boxed{}\boxed{}\boxed{}\boxed{}$$

Date of Trust Agreement (mm/dd/yyyy)

The trust is:

Revocable

Irrevocable

2. New Trustee Information

Important: Complete for all new trustees. Completing this section will add new trustees if a trust Account is being established or new trustees are being added to an existing Account. Unless removed in **Section 3**, all current trustees on record with Alaska 529 will remain. **If you need more space to list additional new trustees, print additional copies of this page.**

If a corporation or other business entity is appointed as trustee, please submit a letter of instruction that identifies the officers or other persons who are authorized to conduct transactions on Alaska 529 account(s) on behalf of the organization appointed as trustee.

A.

Trustee Name

Name of Individual (*first, middle initial, last*) or Organization

Social Security Number or Other Taxpayer ID Number

Date of Birth (*mm/dd/yyyy*)

Telephone Number

☐

Check this box if you want to receive duplicate statements.

Street Address

City

State

Zip Code

Trustee Name

Name of Individual (*first, middle initial, last*) or Organization

Social Security Number or Other Taxpayer ID Number

Date of Birth (*mm/dd/yyyy*)

Telephone Number

☐

Check this box if you want to receive duplicate statements.

Street Address

City

State

Zip Code

B.

Number of trustee signatures required to take action on behalf of the trust. **Note: If a specific number is not provided, all trustee signatures will be required for written requests, and telephone requests from a single trustee will not be accepted.**

A.

[illegible]

Reason for Departure

1

Attach a certified copy of the court order of guardianship or conservatorship of the trustee.

11

Attach a certified copy of the death certificate.

9

Attach one of the following options:

- A signed letter of resignation.
- A certified board resolution, certificate of incumbency, or other documentary evidence of the removal of the trustee.

B.

[illegible]

Reason for Departure

7

Attach a certified copy of the court order of guardianship or conservatorship of the trustee.

7

Attach a certified copy of the death certificate.

9

Choose one of the following options:

- Attach a signed letter of resignation.
- Provide a certified board resolution, certificate of incumbency, or other documentary evidence of the removal of the trustee.

4. Certification by All Trustees

All trustees (*continuing and new*) of the trust certify by signing below that:

- All trustees have signed this certification.
- There are no restrictions or limitations on our powers under the governing document of the trust identified in **Section 1** or applicable law to enter into securities transactions.
- The trust in **Section 1** has not been revoked, modified, or amended in any manner that would cause the statements contained in this certification to be incorrect.
- The trust in **Section 1** exists under applicable state laws.
- We, the trustees, have the authority under the trust in **Section 1** and applicable law to enter into transactions and issue instructions on behalf of the trust and agree that all transactions and instructions will be in full compliance with the trust.
- We, the trustees, jointly and severally, indemnify and hold harmless the State of Alaska, the Trustee, the University, the Board, the Plan, the Trust and any of the service providers to the Plan (including the Program Manager) and any affiliate, agency, representative, employee, official, officer, or agent of any of these entities, agents, subcontractors, successors, and assignees from any liability for effecting any transactions or acting upon any instructions should Alaska 529 act pursuant to the instructions given by, or reasonably believed to be given by, any individual(s) authorized to act on behalf of the trust named in **Section 1**.
- To help the federal government fight financial crimes, Alaska 529 is required to obtain, verify, and record information that identifies each person who opens an Account, in accordance with federal law and regulations. Identifying information includes your name, address, date of birth, and other information that will allow us to identify you. You acknowledge that if the Plan is unable to verify your identity after making a reasonable effort, the Plan may take action, including but not limited to, not opening your Account(s); restricting certain services; and closing and distributing your Account(s) at the current market value.
- We, the trustees, agree to inform Alaska 529, in writing, of any amendment to the trust or the trust agreement, any change in the composition of the trustees, or any other event that could alter the representations made in this agreement.
- If the trust was created under Will, the Will creating the trust has been probated with the appropriate court.
- Should only one person execute this certification, it shall be a representation that the signer is the sole trustee.

All continuing and new trustees must sign, date, and have their signatures notarized. There are two trustee signature sections that follow. If additional signatures are required, print additional copies of this page.

Name of Trustee (first, middle initial, last)

Signature of Trustee

Date (mm/dd/yyyy)

(Your signature must be notarized. We can't accept a signature guarantee in place of a notary's seal.)

) SS.:

This document was acknowledged before me on _____ (date) by _____ (name of trustee).

Signature of Notary Public

Date (mm/dd/yyyy)

Notary Public's Name (first, middle initial, last)

Date (mm/dd/yyyy)

Notary to Place Seal Here

Name of Trustee (first, middle initial, last)

Signature of Trustee

Date (mm/dd/yyyy)

(Your signature must be notarized. We can't accept a signature guarantee in place of a notary's seal.)

) SS.:

This document was acknowledged before me on _____ (date) by _____ (name of trustee).

Signature of Notary Public

Date (mm/dd/yyyy)

Notary Public's Name (first, middle initial, last)

Date (mm/dd/yyyy)

Notary to Place Seal Here

If you're setting up a new trust Account:

- **Attach this form** to the Account Application for an Entity Account when selecting a trust registration.
- **Include copies of the pages of the trust agreement** that contain the name and date of the trust and the name(s) of the initial grantor(s)/trustor(s) and trustee(s), as well as the names and signatures of the trustee(s). Do not include the entire trust document.

- **Incapacitated.** Attach a certified copy of the court order of guardianship or conservatorship of the trustee.
- **Deceased.** Attach a certified copy of the death certificate. If the deceased trustee's Social Security number is the tax ID number for the trust account, you must also update the trust tax identification number (TIN).
- **Resigning or being removed.** Attach a signed letter of resignation, a certified board resolution, Certificate of Appointment and Incumbency, or other documentary evidence of the removal of the trustee.

Allow two weeks for this Trustee Certification of Trust to be processed and for the trustees to receive confirmation of this request by mail.