



# Trust Instrument Certification

## INSTRUCTIONS

Before TCDRS makes payments to a trust that is named as a beneficiary, this form must be completed by the trustee(s) of the trust.

**The undersigned trustee(s) under penalty of perjury, each hereby certify to the following:**

### Member/Retiree Information:

TCDRS Member's Full Name (person who created trust) \_\_\_\_\_

TCDRS Member's Social Security Number \_\_\_\_\_

### Trust Information:

Official Name of Trust: \_\_\_\_\_

Date Trust Instrument was completed: \_\_\_\_\_

Trust Tax ID number (if applicable): \_\_\_\_\_

Trust Grantor (individual whose assets are put in trust account): \_\_\_\_\_

### Trustee(s) Information:

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

### Contingent Trustee Information (if one named in trust):

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

### Beneficiary(ies) of the Trust:

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Relationship to Member/Retiree: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Relationship to Member/Retiree: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_



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### Trustee Power Information:

- 1. Do the trust powers include at the least all of the powers granted to a trustee by Subchapter A, Chapter 113, Texas Property Code? (If unsure, consult your legal counsel.)  Yes  No

If no, list one or more powers of the trust in the trust instrument.

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- 2. Is the trust revocable or irrevocable?  Revocable  Irrevocable
- 3. Is more than one trustee required to authenticate the trust or sign for the trust?  Yes  No

If yes, you must clarify. For example, list each co-trustee who is authorized to act individually for the trust. Or, if two or more co-trustees are required in order to exercise the powers of the trustee, please explain.

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I hereby certify that, as of the date I sign this document, the above information correctly reflects all information included within the trust document and that the trust exists and is a valid trust under applicable state law. I further certify that the trust has not been revoked, modified, or amended in any manner that would cause the representation contained in this document to be incorrect.

Signature of Trustee: \_\_\_\_\_ Date \_\_\_\_\_

If more than one Trustee, signatures of all trustees as required by the terms of the Trust to bind the Trust:

Signature of Trustee: \_\_\_\_\_ Date \_\_\_\_\_

Signature of Trustee: \_\_\_\_\_ Date \_\_\_\_\_