

# SLOVAK CATHOLIC SOKOL

*A tradition of providing sound financial protection and benefits to our members*

## INDEMNIFICATION AGREEMENT - (VERIFICATION OF TRUST FORM NON-NATURAL PERSON)

- Required with Application for Annuity if annuity is owned by a trust that qualifies under 72(u) of the Internal Revenue Code.
- Required with a Member Service Request Form (MSRF 0511) if ownership is changed to or from a trust.
- Required for a Beneficial Owner Death.

Owner's Name \_\_\_\_\_ Phone Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Annuitant's Name \_\_\_\_\_ Contract Number \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  TIN \_\_\_\_\_ - \_\_\_\_\_

### Ownership by Trust

I, \_\_\_\_\_, having the title/position \_\_\_\_\_

with \_\_\_\_\_, a trust (hereinafter referred to as "Entity") do hereby certify that the Entity is qualified to act as Owner of the above-referenced annuity contract as agent for the Beneficial Owner(s) and to maintain the tax-deferred status of the above-referenced annuity under Section 72(u) of the Internal Revenue Code, as amended.

Beneficial Owner's Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Beneficial Owner's Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

### Change of Ownership/Beneficial Owner Death

From: \_\_\_\_\_ To: \_\_\_\_\_

I, \_\_\_\_\_, having the title/position \_\_\_\_\_

with \_\_\_\_\_, a trust (hereinafter referred to as "Entity") do hereby certify that the Beneficial Owner designation on the Change of Ownership for the above-referenced annuity contract is accurate for the purpose of Section 72(u) of the Internal Revenue Code, as amended. I further understand that if the Beneficial Owner of the contract changes due to the ownership change, tax reporting will be issued. **Beneficial Owner Designation:**

Beneficial Owner's Name \_\_\_\_\_ Current Owner Relationship \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Beneficial Owner's Name \_\_\_\_\_ Current Owner Relationship \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

- The beneficial Owner Designation must be completed with the name(s) of the person(s) who have the personal use of the Trust Funds during their lifetime (not administrative use, such as Trustee). We recommend that you consult your qualified tax professional to be sure that these persons qualify as Beneficial Owners.
- For death of Owner purposes, if a trust uses the SSN of an individual for tax purposes, that individual is a Beneficial Owner of the trust and the death of that individual may trigger Owner death regulations.
- If this form is being completed due to death of a Beneficial Owner, it must be completed with the name(s) of the Beneficial Owner(s) immediately prior to the reported death.

### Entity Statement

1. The Entity hereby represents that the statements and answers contained above are full, complete and true.
2. The Entity agrees to hold Slovak Catholic Sokol, subsidiaries, affiliates, agents and employees harmless and indemnify Slovak Catholic Sokol from any and all claims, causes of action, or expenses including legal expenses, related to the representations contained in this agreement.
3. In consideration of the reliance on the foregoing, Slovak Catholic Sokol agrees to issue the above-referenced annuity to the entity as Owner, or process the changes of ownership.

**IN WITNESS WHEREOF**, the parties have caused this agreement to be duly executed on their behalf as of the date first written above.

First Trustee: Signature \_\_\_\_\_ Print \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Second Trustee: Signature \_\_\_\_\_ Print \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_