

Certificate of Trust

INSURER: FIDELITY & GUARANTY LIFE INSURANCE COMPANY

Certificate of Trust Irrevocable Trust

The undersigned trustee (herein “the Trustee”), being first duly sworn on oath, hereby certifies the following:

- 1. This Certificate of Trust relates to _____ (herein the “Trust”).
- 2. The date of execution of the Trust is _____,
- 3. If previously revocable, the date the Trust became irrevocable is _____.
- 4. The name of the Settlor/Grantor is _____
- 5. The name and address of each Trustee empowered to act under the Trust instrument at time of execution of this Certificate of Trust is:

- 6. The Trust has not been terminated or revoked. The Trustee has no actual knowledge of any facts indicating the Trust is invalid.
- 7. The Trustee is authorized by the Trust and applicable law to invest Trust assets in annuities and the Trustee deems purchase of the proposed annuity to be prudent.
- 8. The purpose of the trust is _____. An annuity meets the purpose of the trust because _____. (Attach additional pages as necessary.)
- 9. If the trust is established to qualify for any governmental program or benefits, including but not limited to Medicaid or Veterans Administration benefits, or is established as a Special Needs or Supplemental Needs Trust in accordance with federal laws, the Trustee affirms the purchase of the annuity is at the recommendation of a qualified lawyer familiar with the Trust’s purpose and provisions.
- 10. **The Trustee has determined as an exercise of fiduciary powers that the purchase of the annuity being applied for is suitable for the Trust and its beneficiaries given the terms, purposes, and all facts and circumstances of the Trust. The Trustee understands an annuity is a long term savings vehicle that provides limited access to principal during the annuity’s surrender period.**
- 11. The annuity beneficiary is the Trust or Trustee, or the annuity beneficiary/beneficiaries is the same as the Trust beneficiary/beneficiaries, or the Trustee has determined the annuity beneficiary/beneficiaries is/are otherwise consistent with the terms and purposes of the Trust and being chosen in a manner consistent with the Trustee’s fiduciary duties.
- 12. Statements contained in this document are true and correct to the best of the Trustee’s knowledge. Trustee understands that the issuer of the annuity Fidelity & Guaranty Life Insurance Company is relying on statements and representations contained herein.

Dated: _____, 201__
Trustee

Signed and sworn to before me on _____, 201__, by _____

(signature of notarial officer)

[stamp]

Title (and Rank): _____
My Commission expires:_____