

## WEALTH ADVISERS PROFESSIONAL LIABILITY Trustee Supplement

1. Name of Trustee: \_\_\_\_\_
2. Name of Trust: \_\_\_\_\_

Date of Appointment	Trust Assets	Annual Trust Income	# of Trust Beneficiaries	Type of Trust
	\$	\$		

3. Is there a written Trust Agreement or other engagement letter clearly specifying the duties and authorities of the trustee in place? Yes  No
- a. If "NO", please explain: \_\_\_\_\_

4. Which services do **you** render to the Trust:
- a. Bill Payment     b. Bookkeeping     c. Tax Return Prep     d. Other
- i. If "OTHER", describe: \_\_\_\_\_

5. Are Trustee revenues included in the total gross revenues stated in the application? Yes  No
- a. If "NO", explain: \_\_\_\_\_

6. The fee arrangement for the Trust is determined by:
- a. Trust Agreement     b. Direct Billing to Trust     c. Other
- i. If "OTHER", describe: \_\_\_\_\_

7. Does the Trustee engage in any of the following activities (if "YES", please describe, below):
- a. Delegation of any Trustee duties to others?
- i. Yes     No
- b. Employment (other than **professional services**) by the Trust of **you** or **your** associates?
- i. Yes     No
- c. Use of Trust funds as loans to the Trustee, **your** owners, or **your** employees?
- i. Yes     No
- d. Use of Trust funds to invest in entities in which the Trustee, **you**, or a related individual have an interest or management role?
- i. Yes     No
- e. Description: \_\_\_\_\_

8. Do **you** have discretionary authority to make individual securities investments on behalf of the Trust (if "YES", please describe):
- a. Yes  No
- b. Description: \_\_\_\_\_
9. Do **you** employ the services of a professional money manager or investment adviser? (if "NO", please describe):
- a. Yes  No
- b. Description: \_\_\_\_\_
10. If applicable, are all investment goals and portfolio composition described in the Trust Agreement (if "NO", please describe):
- a. Yes  No
- b. Description: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_