

SMITH COLLEGE
Student Financial Services
College Hall
Northampton, MA 01063

Trust Information Request

Student _____ Smith ID # or SS#: _____
Name of Trust: _____

1. Who established the trust? _____
 1a. Relationship to student: _____
2. Date trust established: _____
3. Name of the trustee: _____
4. List the beneficiaries _____
5. Total current value of the trust? \$ _____
6. Student and/or parent share of trust: \$ _____ (_____ %)
7. Type of Trust: ___Living ___Testamentary ___ Irrevocable ___Revocable
8. What are the terms governing distribution of the principal of the trust?
9. What property funds the trust? _____
10. **Attach copies of the terms of the trust and the trust's latest 1041.**

Student signature: _____ **Date:** _____

Person completing the form:

Print name: _____

Signature: _____ **Date:** _____