OMB Number: 3064-0143 Expiration Date: 09/30/2023

## Federal Deposit Insurance Corporation DECLARATION FOR IRA/KEOGH DEPOSIT

## PRIVACY ACT STATEMENT

The Federal Deposit Insurance Act (12 U.S.C. §§ 1819, 1821, and 1822) and 12 C.F.R. Part 330 authorize the collection of this information. The purpose for collecting this information is to support the determination of deposit insurance coverage and/or the payment of deposit insurance on deposits of the closed financial institution. Furnishing this information is voluntary but failure to provide the requested information in whole or in part may delay or prevent the determination of deposit insurance coverage and/or the payment of deposit insurance on deposits of the closed financial institution. The information provided by individuals is protected by the Privacy Act, 5 U.S.C. 552a. The information may be furnished to third parties, including law enforcement authorities, as authorized by law, or used according to any of the other routine uses described in the FDIC Insured Financial Institution Liquidation Records (FDIC-30-64-0013) System of Records. A complete copy of this System of Records is available at <a href="www.fdic.gov/about/privacy/index.html">www.fdic.gov/about/privacy/index.html</a>. If you have questions or concerns about the collection or use of the information, you may contact the FDIC's Chief Privacy Officer at <a href="mailto:Privacy@fdic.gov">Privacy@fdic.gov</a>.

## PAPER REDUCTION ACT NOTICE

The information collected is required for the determination of insured deposits when a financial institution closes in accordance with the FDIC's deposit insurance regulations. Public reporting burden for this collection of information is estimated to average 1/2 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Paperwork Reduction Act Clearance Officer, Legal Division, Federal Deposit Insurance Corporation, 550 17<sup>th</sup> Street, N.W., Washington, D.C. 20429, and the Office of Management and Budget, Paperwork Reduction Project (3064-0143), Washington, D.C. 20503. Any agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

NOTE: THE PENALTY FOR KNOWINGLY MAKING OR INVITING RELIANCE ON ANY FALSE, FORGED, OR COUNTERFEIT STATEMENT, DOCUMENT OR THING FOR THE PURPOSE OF INFLUENCING IN ANY WAY THE ACTION OF THE FEDERAL DEPOSIT INSURANCE CORPORATION IS A FINE OF NOT MORE THAN \$1,000,000 OR IMPRISONMENT FOR NOT MORE THAN THIRTY YEARS, OR BOTH (18 U.S.C. § 1007).

Page down to access form 7200/11

FDIC 7200/11 (1-22) Page 1 of 2

OMB Number: 3064-0143 Expiration Date: 09/30/2023

## Federal Deposit Insurance Corporation DECLARATION FOR IRA/KEOGH DEPOSIT

**INSTRUCTIONS:** The Depositor/Representative completes Section II of this form and an Federal Deposit Insurance Corporation (FDIC) representative completes Section I. The FDIC will provide the Depositor ID (ID is an internal, system-generated identifier). Select the Attach File icon to attach supporting and required documents to form. Submit forms electronically or by mail to the Claims Department at 600 North Pearl Street, Suite 700, Dallas, TX 75201. (Include all supporting documents at the same time). For questions, contact Depositor Claims Agent at 972-761-2112 or at Depositorservices@fdic.gov.

| SECTION I - FINANCIAL INSTITUTION   |  |   |
|---|--|---|
| 1. Name   |  | 2. Closing Date   |
| 3. Account Number   | 4. Depositor ID                        |   |
| SECTION II - DECLARATION  |  |   |
| 5. The deposit referenced above (the "Account") was n   | made in connection with the followi    | ng type of retirement plan (Select all that   |
| apply):   |  |   |
| An individual retirement account (IRA) described  | l in section 408(a) of the Internal Re | ev <mark>enue Code of 1986</mark> (26 U.S.C. 408(a)).   |
| An eligible deferred compensation plan described  | d in section 457 of the Internal Rev   | venue Code of 1986 (26 U.S.C. 457).   |
| An individual account plan defined in section 3(3-<br>or a plan described in section 401(d) of the Interr<br>beneficiaries have the right to direct the investmen | nal Revenue Code of 1986 (26 U.S       | S.C. 401(d)) for which participants or  |
| 6. The trustee or administrator of the retirement plan(s  | i) identified in item 1 is (are)       |   |
| (Name of bank or other qualified person). Documer   | ntary evidence reflecting the author   | rity of the tr <mark>uste</mark> e or ad <mark>mi</mark> nist <mark>rato</mark> r to serve in |
| this capacity is attached hereto. (Attach IRS determ  | nination letter or other appropriate   | evidence.)  |
| 8. The owner of the Account is  |  |   |
|   | e of Owner)                            |   |
| 9. The relationship between the trustee or administrate attached hereto. (Attach the IRA or Keogh or other attach a sufficient number of pages to establish that  | agreement(s) in effect on the closi    | ng date. If the agreement is very lengthy,  |
| 10. This declaration is made to induce the Federal Dep  | posit Insurance Corporation to pay     | insurance covering the Account to the exten   |
| that the Account is covered by insurance.   |  | -   |
| 11. This declaration, under penalty of perjury, is execu  | ited nursuant to 28 LLS C 8 1746       |   |
| I declare under penalty of perjury that the foregoing   |  |   |
| (Trustee or Administrator Name)   | (Truste                                | ee or Administrator Signature)  |

FDIC 7200/11 (1-22) Page 2 of 2