

ANNUAL CERTIFICATION
FOR AN EXEMPT PRIVATE TRUST COMPANY
(Title 6 O.S. § 1741)



OKLAHOMA STATE BANKING DEPARTMENT
2900 N. LINCOLN BLVD.
OKLAHOMA CITY, OKLAHOMA 73105

Name of Applicant _____

Address (Main Office) _____
Street City State Zip

Date _____

REQUESTS FOR ADDITIONAL INFORMATION OR OTHER COMMUNICATIONS ABOUT THIS APPLICATION SHOULD BE DIRECTED TO:

Name _____ Title _____

Address _____
Street City State Zip

Telephone No. () _____ Fax No. () _____

E-mail Address _____

In the space below, list the exemptions that have been approved for the trust company. Identify the law to which the exemption applies, the requirements of the law, and the exemption available to the trust company (including any conditions imposed in connection with the approval of the exemption).

Example: **Statutory Citation** **Statutory Requirement** **Exemption and Conditions**
 Title 6 O.S. § 714(A) *quarterly board meetings* *semi-annual board meetings*

<u>Statutory Citation</u>	<u>Statutory Requirement</u>	<u>Exemption and Conditions</u>
1. _____ _____	_____	_____
2. _____ _____	_____	_____
3. _____ _____	_____	_____
4. _____ _____	_____	_____
5. _____ _____	_____	_____
6. _____ _____	_____	_____
7. _____ _____	_____	_____
8. _____ _____	_____	_____
9. _____ _____	_____	_____

By signing below, I hereby certify that:

1. The trust company does not transact business with the general public (as described in Title 6 O.S. § 1740.B.1);
2. The trust company has not violated, and is currently complying with, any conditions and limitations imposed on any and all exemptions approved pursuant to Title 6 O.S. §§ 1740 and 1741;
3. The street mailing address identified in this certification is the true and correct mailing address of the trust company, is not a U.S. Postal Service post office box or a private mail box or mail drop; and
4. The trust company has paid all applicable franchise taxes due the Oklahoma Tax Commission.

Name of Authorized Officer (Please Print)

Title

Signature

State of _____)
County of _____) ss

Signed and sworn before the undersigned on _____ by the above-named authorized officer.

My Commission Expires: _____
Notary Public

My Commission Number: _____

[seal]

Applicable Fee. Title 6 O.S. § 1741.B.2 states that the annual certification must be accompanied by a fee equal to that imposed by the Banking Department for registration statements. Banking Board Rule 85:0-3-21 sets the fee for registration statements at \$500. Please include the \$500 fee along with this certification.

Return to: Oklahoma State Banking Department, 2900 N. Lincoln Blvd., Oklahoma City, Oklahoma 73105.