



## TEXAS DEPARTMENT OF BANKING REQUEST LIST FOR TRUST EXAMINATION

(Insert entity name, city here)

The following is a list of documents that will be used in the examination of your institution. Only those items marked with an **X** are required to meet the planned scope of this examination. Examiners will need either: (1) a **copy** of a requested item for examination work papers; or, (2) **access** to the referenced information sometime during the onsite review, unless otherwise instructed. Requested copies should be available on the first day of the examination. For items to which access is requested, please provide the name and telephone extension of an employee who may be contacted for access. **Please provide a copy of this list identifying contacts.** Optional forms have been attached to the request schedule to facilitate transmittal of certain information. However, in all cases, if your institution has the requested information available in another format, examiners will use the internally generated document as long as the information can be readily verified and converted to the examination format.

The following dates are relevant for the purposes of this request:

<b>Examination Commencement Date:</b>	<b>(ECD)</b>	(Date)
<b>Account Trial Balance Date &amp; Audit Package:</b>	<b>(ATB)</b>	(Date)
<b>Financial Information Date:</b>	<b>(FID)</b>	(Date)
<b>Last Examination Date:</b>	<b>(LED)</b>	(Date)

DOCUMENTS ARE REQUESTED FROM THE AREAS MARKED WITH AN "X". Click on link to go to list.			
<a href="#">#1-General</a>	X	<a href="#">#4-Fiduciary Earnings</a>	X
<a href="#">#2-Fiduciary Management</a>	X	<a href="#">#5-Compliance</a>	X
<a href="#">#3-Operations, Internal Controls, and Audit</a>	X	<a href="#">#6-Fiduciary Asset Management</a>	X

# TEXAS DEPARTMENT OF BANKING TRUST EXAMINATION REQUEST LIST

#1- General Items				
<b>X</b>	<b>ITEM</b>	<b>AS OF</b>	<b>COPY OR ACCESS</b>	<b>CONTACT PERSON</b>
<b>X</b>	<b>1-A.</b> Detailed general ledger and income statement.	FID	Copy	
<b>X</b>	<b>1-B.</b> Officer's Questionnaire (Form attached - <b>MUST BE TYPEWRITTEN</b> )	FID	Signed Original	
<b>X</b>	<b>1-C.</b> Shareholders' minutes.	Since LED	Copy	
<b>X</b>	<b>1-D.</b> List of members of the Board of Directors ( <b>Form #1-D</b> )	Most Recent Info.	Copy	
<b>X</b>	<b>1-E.</b> Board of Directors minutes – (include copies of attachments)	Since LED	Copy	
<b>X</b>	<b>1-F.</b> Board meeting packet	Most Recent	Copy	
<b>X</b>	<b>1-G.</b> All policy and procedures manuals; disaster recovery plan, strategy plan and/or profit goals.	FID	Access	

**X**=Indicates information requested

**TEXAS DEPARTMENT OF BANKING  
TRUST EXAMINATION REQUEST LIST**

**Form#1-D  
Directors**

<b>Name Address City, State, Zip</b>	<b>Year of Birth</b>	<b>Net Worth (000's) (as/of)</b>	<b>Position &amp; Principal Business Affiliations</b>	<b>Year Elected to Board</b>	<b># of Shares Owned</b>	<b>Board Fees/ Benefits</b>

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<b>#2 – FIDUCIARY MANAGEMENT</b>				
<b>X</b>	<b>ITEM</b>	<b>AS OF</b>	<b>COPY OR ACCESS</b>	<b>CONTACT PERSON</b>
<b>X</b>	<b>2-A.</b> List of Executive officers (See Form # 2-A)	ECD	Copy	
<b>X</b>	<b>2-B.</b> List of trust committee members (See Form # 2-B)	ECD	Copy	
<b>X</b>	<b>2-C.</b> Trust Committee minutes. (Do not include attachments)	Since LED	Copy	
<b>X</b>	<b>2-D.</b> List of any other trust related committees and members (See Form # 2-C)	ECD	Copy	
<b>X</b>	<b>2-E.</b> Other Trust function-type committee minutes (Do not include attachments)			
<b>X</b>	<b>2-F.</b> Name of legal counsel utilized for fiduciary matters.	ECD	Copy	
<b>X</b>	<b>2-G.</b> Written statement from counsel on status of any fiduciary litigation against the company, any director, or management.	ECD	Copy	
<b>X</b>	<b>2-H.</b> Reports of identified fraud/defalcation on any fiduciary accounts.	ECD	Copy	
<b>X</b>	<b>2-I.</b> List of training attended by officers and employees in the last year.	ECD	Copy	
<b>X</b>	<b>2-J.</b> Business plan for fiduciary activities, including products and services development and marketing plans.	ECD	Copy	
<b>X</b>	<b>2-K.</b> Resumes of any fiduciary management officer elected since the last examination.	ECD	Copy	
<b>X</b>	<b>2-L.</b> List of corporate insurance policies.	Most	Copy	

**TEXAS DEPARTMENT OF BANKING  
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<b>#2 – FIDUCIARY MANAGEMENT</b>				
<b>X</b>	<b>ITEM</b>	<b>AS OF</b>	<b>COPY OR ACCESS</b>	<b>CONTACT PERSON</b>
	<b>(Form #2-L)</b>	Recent Info.		
<b>X</b>	<b>2-M.</b> Provide a list of own-bank/company pension plans or other employee benefit plans that are underfunded or the bank has liability.	Most Recent	Copy	
<b>X</b>	<b>2-N.</b> Fiduciary organizational chart.	Most Recent	Copy	

**X** = Indicates information requested

**Form#2-A**  
**Executive Officers**

Name & Title/ Time Devoted (% of week)	Date of Birth	Area of Responsibility	Year Joined Trust	Years in Current Position	Compensation Salary (S) Bonus (B) Other Benefits
TOTAL NUMBER OF OFFICERS LISTED ABOVE:		SUBTOTAL OF SALARIES FOR OFFICERS LISTED ABOVE:			
TOTAL OTHER STAFF EMPLOYEES AND JR. OFFICERS:		SUBTOTAL OF SALARIES FOR OTHER STAFF EMPLOYEES:			
		TOTAL SALARIES:			

**TEXAS DEPARTMENT OF BANKING  
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**Forms#2-B & #2-C  
Trust Committees**

<b>Name of Committee</b>  _____		<b>Principal Function of the Committee</b>	<b>No. of Meetings Since Last Examination _____ No. of Members _____</b>
<b>Names of Committee Members</b>	<b>Birth Year</b>	<b>Salary/Meeting Attendance Fee</b>	<b>Principal Business Interest(s)</b>

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**Form #2-L  
Schedule of Corporate Insurance Policies**

<b>Insurance Company/Selling Agent</b>	<b>Coverage</b>	<b>Amount</b>	<b>Deductible</b>	<b>CSV</b>	<b>Premium Payments</b>	<b>Expiration Date</b>

**CSV represents Cash Surrender Value**



# TEXAS DEPARTMENT OF BANKING

## TRUST EXAMINATION REQUEST LIST

<b>#3-OPERATIONS, INTERNAL CONTROLS, AND AUDITING</b>				
<b>X</b>	<b>ITEM</b>	<b>AS OF</b>	<b>COPY OR ACCESS</b>	<b>CONTACT PERSON</b>
<b>X</b>	<b>3-A.</b> External fiduciary audit report, management letter, and engagement letter.	Most Recent	Copy	
<b>X</b>	<b>3-B.</b> Internal fiduciary audit, audit program and audit schedule.	Most Recent	Copy	
<b>X</b>	<b>3-C.</b> Provide a confirmation from each institution holding assets and a reconciliation of the confirmations to total fiduciary assets. (Utilize either location code report for unit reconciliation or the master asset listing for the reconciliation of book value or cost.)	ATB	Copy	
<b>X</b>	<b>3-D.</b> List of all suspense accounts and reconciliation of each.	ATB	Copy	
<b>X</b>	<b>3-E.</b> List of large cash balances and fiduciary overdrafts. (The list should include the name, account number, amount, and date of occurrence.)	ATB	Copy	
<b>X</b>	<b>3-F.</b> Listing of all assets held in fiduciary accounts that are pledged or restricted.	ATB	Copy	
<b>X</b>	<b>3-G.</b> Reconcilements for the trust company's demand deposit account and/or operating accounts for fiduciary activities.	Last 3 Months	Access	
<b>X</b>	<b>3-H.</b> Copy of Audit Policy and list of Audit Committee members.	ECD	Copy	
<b>X</b>	<b>3-I.</b> Safekeeping agreements with banks or other financial institutions.	ECD	Copy	

**TEXAS DEPARTMENT OF BANKING  
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<b>#3-OPERATIONS, INTERNAL CONTROLS, AND AUDITING</b>				
<b>X</b>	<b>ITEM</b>	<b>AS OF</b>	<b>COPY OR ACCESS</b>	<b>CONTACT PERSON</b>
<b>X</b>	<p><b>3-J.</b> Order an “Audit Package” from your data processor which contains the following fiduciary reports at a minimum:</p> <p>(a) Trial balance by account type with totals for each type and overall totals at the end (e.g., personal, employee benefit, corporate, etc.) The list should include the name, account number, income cash, principal cash, and total investments per account.</p> <p>(b) Master property list, including name of asset, number of par/share/ units held, book value and market value with totals for each asset type and overall totals at the end. This list should be broken down by type of asset (cash, U. S. Gov't. municipals, equities, closely-held, real estate, oil and gas, unique, etc.) , if possible.</p> <p>(c) Provide a Holder's list of each asset. (The list should be in the same order and include the same assets and same information as the master property list.)</p> <p>(d) Account holdings by asset including account number, name, type of assets, listing of assets, number of par/share/units, book value and market</p>	ATB	Copy	

**TEXAS DEPARTMENT OF BANKING  
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<b>#3-OPERATIONS, INTERNAL CONTROLS, AND AUDITING</b>				
<b>X</b>	<b>ITEM</b>	<b>AS OF</b>	<b>COPY OR ACCESS</b>	<b>CONTACT PERSON</b>
	<p>value with totals. (Security Cross Reference including unique assets or Portfolio listing.)</p> <p>(e) List of assets by location code including same information as Holder's list but broken down by location (such as all assets held in the vault should be listed together consecutively and totaled).</p>			

**X** = Indicates information requested

# TEXAS DEPARTMENT OF BANKING TRUST EXAMINATION REQUEST LIST

<b>#4 – FIDUCIARY EARNINGS</b>				
<b>X</b>	<b>ITEM</b>	<b>AS OF</b>	<b>COPY OR ACCESS</b>	<b>CONTACT PERSON</b>
<b>X</b>	<b>4-A.</b> Fee schedules and date last approved	ECD	Copy	
<b>X</b>	<b>4-B.</b> List of fiduciary losses or charge-offs, including settlements, waivers or similar compromise actions since the last examination.	Since LED	Copy	
<b>X</b>	<b>4-C.</b> List prospective accounts and approximate dollar amounts.	Current	Copy	
<b>X</b>	<b>4-D.</b> Budget for current fiscal year ( <b>Trust Departments</b> ).	ECD	Copy	
<b>X</b>	<b>4-E.</b> Prior year detailed income/expense statement compared to budget ( <b>Trust Departments</b> ).	ECD	Copy	
<b>X</b>	<b>4-F.</b> Current year detailed income/expense statement compared to budget ( <b>Trust Departments</b> ).	ECD	Copy	
<b>X</b>	<b>4-G.</b> List of most significant fees generated from large accounts or relationships			

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**TEXAS DEPARTMENT OF BANKING  
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<b>#5 – COMPLIANCE</b>				
<b>X</b>	<b>ITEM</b>	<b>AS OF</b>	<b>COPY OR ACCESS</b>	<b>CONTACT PERSON</b>
<b>GENERAL</b>				
<b>X</b>	<b>5-A.</b> List of all related organizations, including affiliates, operating subsidiaries, etc. Detail the manner of affiliation, scope of activities of each affiliate, and any filed or threatened litigation affecting any or all affiliates. <b>(Form # 5-A attached)</b>	ECD	Copy	
<b>X</b>	<b>5-B.</b> List of all ongoing service arrangements, fee arrangements, lease payments, in-kind payments, and any other transfer of value with affiliates. List date of each agreement, terms, and amounts. <b>(Form # 5-B attached)</b>	Since LED	Copy	
<b>X</b>	<b>5-C.</b> All other agreements, guarantees, or hypothecations, between your institution and any related organization.	ECD	Copy	
<b>X</b>	<b>5-D.</b> Examination reports, financial information, audit reports, and regulatory filings, for all related organizations.	Most Recent	Access	
<b>X</b>	<b>5-E.</b> List of all fiduciary accounts holding stock or obligations of your institution or any affiliate. Detail account number/name, number of shares/debt balance and name of issuer, cost/market value, retention authority, and capacity.	FID	Copy	

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<b>#5 – COMPLIANCE</b>				
<b>X</b>	<b>ITEM</b>	<b>AS OF</b>	<b>COPY OR ACCESS</b>	<b>CONTACT PERSON</b>
<b>X</b>	<b>5-F.</b> Reports of officer's personal securities transactions. (transactions greater than \$10,000)	FID	Copy	
<b>X</b>	<b>5-G.</b> List of related interests of officers, directors, and principal shareholders.	ECD	Copy	
<b>X</b>	<b>5-H.</b> If a cash sweep is utilized, describe the sweep operation and provide a list of the investment vehicles utilized. (Provide a prospectus of each fund and any information regarding fee arrangements.)	Most Recent Info.	Copy	
<b>PERSONAL TRUSTS</b>				
<b>X</b>	<b>5-I.</b> List of all fiduciary accounts opened and closed.	Since LED	Copy	
<b>X</b>	<b>5-J.</b> List of all accounts in which a co-fiduciary relationship exists.	Most Recent	Copy	
<b>X</b>	<b>5-K.</b> List all estates, which have been under administration longer than 3 years.	Most Recent	Copy	
<b>EMPLOYEE BENEFIT TRUSTS</b>				
<b>X</b>	<b>5-L.</b> List of employee benefit trusts in which the trust company serves as plan administrator. (Include own-institution plans).	Most Recent	Copy	
<b>CORPORATE TRUST</b>				

# **TEXAS DEPARTMENT OF BANKING** **TRUST EXAMINATION REQUEST LIST**

	<p><b>5-M.</b> List of corporate trusts in default or that are currently “out-of-balance.”          (Indicate the date and nature of the default, current status, and describe the actions taken or to be taken to cure the default.)</p>	<p>Most Recent Info.</p>	<p>Copy</p>	
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**Form#5-A  
Related Organizations**

<b>Organization</b>	<b>Relationship to Bank/Trust Co.</b>	<b>Scope of Activities</b>	<b>Pending Litigation?</b>



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**Form #5-B  
Transactions with Related Organizations**

<b>Related Organization</b>	<b>Nature of Transaction</b>	<b>Date</b>	<b>\$ Amount</b>	<b>Terms</b>

## TEXAS DEPARTMENT OF BANKING TRUST EXAMINATION REQUEST LIST

<b>#6 – FIDUCIARY ASSET MANAGEMENT</b>				
<b>X</b>	<b>ITEM</b>	<b>AS OF</b>	<b>COPY OR ACCESS</b>	<b>CONTACT PERSON</b>
<b>X</b>	<b>6-A.</b> List of securities/equities approved for purchase, retention and/or sale. (Approved Buy/Sell List).	ECD	Copy	
<b>X</b>	<b>6-B.</b> Investment background of each member of the committee responsible for investment.	ECD	Copy	
<b>X</b>	<b>6-C.</b> List of investment services utilized for investment advice.	ECD	Copy	
<b>X</b>	<b>6-D.</b> List of brokers /dealers utilized and commissions paid in the last year.	ECD	Copy	
<b>X</b>	<b>6-E.</b> List of trading errors or complaints against any broker/dealer utilized.	ECD	Copy	
<b>X</b>	<b>6-F.</b> Copy of last audit of each Collective Investment Fund.	ECD	Copy	
<b>X</b>	<b>6-G.</b> Promotional materials on Collective Investment Funds.	ECD	Copy	
<b>X</b>	<b>6-H.</b> List of closely held business held in fiduciary accounts	ECD	Copy	
<b>X</b>	<b>6-I.</b> List of partnership interests held in fiduciary accounts.	ECD	Copy	
<b>X</b>	<b>6-J.</b> List of all holdings of equity securities which exceed five (5) percent of the issuer's total shares outstanding and specify the percentage held, include own-institution or affiliate stock.	ECD	Copy	

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<b>#6 – FIDUCIARY ASSET MANAGEMENT</b>				
<b>X</b>	<b>ITEM</b>	<b>AS OF</b>	<b>COPY OR ACCESS</b>	<b>CONTACT PERSON</b>
<b>X</b>	<b>6-K.</b> List of worthless assets held for closed accounts.	ECD	Copy	
<b>X</b>	<b>6-L.</b> List of past due loans held in trust accounts.	ECD	Copy	
<b>X</b>	<b>6-M.</b> List of liabilities payable from the fiduciary accounts.	ECD	Copy	

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