

Accumulator® Series Beneficiary Continuation Option (BCO) Trustee Certification Form

Under Proposed Treasury Regulations §1.401(a)(9)-4 Q&A 5 (2002)

Trustee: Please complete and return this form if a Qualifying Trust is the beneficiary of the Accumulator® Series Contract, the Trust's beneficiaries are individuals, and the Trust wants to elect BCO. Please note that Required Minimum Distribution payments will be made to the Trust. The Trust's *BCO Interest* cannot be subdivided even if the Trust has multiple individual beneficiaries. **The certification must be provided no later than October 31st of the calendar year following the year of the deceased IRA Owner's death.** For Assistance Call (800) 789-7771.

Name of Deceased _____ Date of Death _____

Name of Trust which is death beneficiary under the Deceased's IRA certificate/contract _____

Please List All Beneficiaries of the Trust and Their Respective Interests in the Trust; Use Additional Sheets If You Need More Space

1. _____
 Name of Beneficiary _____ Relationship to Deceased _____ Date of Birth _____

 Type of interest in Trust _____ % of interest in Trust _____
 (e.g.: income vs. remainder; primary vs. contingent; conditions of entitlement)

2. _____
 Name of Beneficiary _____ Relationship to Deceased _____ Date of Birth _____

 Type of interest in Trust _____ % of interest in Trust _____
 (e.g.: income vs. remainder; primary vs. contingent; conditions of entitlement)

3. _____
 Name of Beneficiary _____ Relationship to Deceased _____ Date of Birth _____

 Type of interest in Trust _____ % of interest in Trust _____
 (e.g.: income vs. remainder; primary vs. contingent; conditions of entitlement)

4. _____
 Name of Beneficiary _____ Relationship to Deceased _____ Date of Birth _____

 Type of interest in Trust _____ % of interest in Trust _____
 (e.g.: income vs. remainder; primary vs. contingent; conditions of entitlement)

Certification

* Note: The date you insert below cannot be later than September 30th of the calendar year following the calendar year the deceased IRA Owner died.

_____ is the death beneficiary of deceased's IRA contract # _____.

Name of Trust

I certify that, as of _____ [insert date]*, to the best of my knowledge, this list of Trust beneficiaries is correct and complete. All of the Trust beneficiaries are individuals. I have attached a certification letter from the attorney for the Trust confirming the conditions that must be met for the Trust to be eligible to receive payments of Beneficiary Continuation Option (BCO) Interest.

 Name of Trustee _____ Signature of Trustee _____ Date _____

 Name of Trustee _____ Signature of Trustee _____ Date _____

 Name of Trustee _____ Signature of Trustee _____ Date _____

Mail To

Mail completed "*BCO Trustee Certification*" form together with the "*Inherited IRA BCO election*" form and the "*Claim to Annuity Benefits*" form to:

Express Mail:

AXA Equitable Life Insurance Company
Accumulator® Processing Office
500 Plaza Drive, 6th Floor
Secaucus, NJ 07094

Regular Mail:

AXA Equitable Life Insurance Company
Accumulator® Processing Office
P.O. Box 1547
Secaucus, NJ 07096-1547

For Assistance Call 800-789-7771.

Sample Attorney Letter

This, or a similar letter, must accompany any claim in which a Trust is the death beneficiary and elects the Beneficiary Continuation Option (BCO). The letter must be written on the letterhead of the attorney signing below.

To the Accumulator Processing Office

RE: _____
(Name of Trust)

Dear Processing Office:

_____ (henceforth called "the Trust") is the death beneficiary
(Name Of Trust)
of IRA contract # _____ owned by _____ who died on
_____. The Trust would like to elect the Beneficiary Continuation Option under the above contract, which would permit it to receive the minimum distribution payments required after death of the deceased. In order to elect this option, I understand that all beneficiaries of the Trust must be individuals. I also understand that you require the Trust to meet the requirements of Treasury Regulations §1.401(a)(9)-4 Q&A 5 (2002).

Therefore, I confirm that, as of the decedent's death, all of the following are true:

1. The Trust is a valid trust under the laws of the State of _____, or would be but for the fact that there is no corpus.
2. The Trust is irrevocable per section _____ of the Trust Instrument.
3. The beneficiaries of the Trust are identifiable from the Trust Instrument as of the date the beneficiaries are determined under the Treasury Regulations [per section _____ of the Trust Instrument]. This date cannot be later than September 30th of the calendar year following the calendar year of the deceased IRA Owner's death. (The members of a class of beneficiaries capable of expansion or contraction will be treated as being identifiable if it is possible, as of the date the beneficiaries are determined, to identify the class member with the shortest life expectancy.)
4. [Pick which of the two sentences below applies.]

[I am providing a copy of the Trust Instrument to you with this letter and have indicated the applicable sections of the Trust Instrument.]

[I sent a copy of the Trust Instrument to you on _____. I have indicated the applicable sections of the Trust Instrument in this letter.]

Sincerely,

Attorney's Name, Esq.

This letter must be provided no later than October 31st of the calendar year following the calendar year of the deceased IRA Owner's death.