



The Tulalip Tribes Per Capita Minors Trust Request for Distribution

Tulalip Enrollment
6406 Marine Dr.
Tulalip, WA 98271
360-716-4300

I. Beneficiary Information

1. Name: _____
2. Address: _____

3. Phone number: _____
4. Email address: _____
5. Roll number: _____
6. SS number: _____
7. Date of birth: _____
8. Age 18-21 Age 22+

II. High School or GED Program information (If under 22 years of age)

1. School/Program name: _____
2. School/Program address: _____

3. School/Program phone number: _____
4. High School/GED graduation date: _____

III. Representation

- I am requesting _____ of 4 Distributions
 _____ of 2 Early Releases of my _____ Distributions (only apply if within 6 months of next distribution)
 Must include:
 1.) Letter requesting Early Release
 2.) Proof of need: Housing Rental Deposit, Eviction Notice, Automotive Needs, Taxes to be paid, Outstanding Fines, Medical Condition
- Lump sum
 Must include:
 1.) Letter requesting Lump sum
 2.) Proof of need: Purchase of Home/Land, School Expenses, Medical Bills, Medical Care, Business Start Up, Private Trust
- COVID-19 Draw of \$ _____ Maximum \$10,000

I understand I can apply for funds annually in the same month as the first distribution. If I am approved for an early release distribution, it will not change the distribution month for following distributions.

I represent that I have either (1) reached the age of eighteen (18) years and have graduated from high school or a GED program or (2) I have reached the age of twenty-two (22) years. I agree that the Tulalip Tribes has the authority to have access to my school records in order to verify any information concerning my completion of GED or High school diploma.

I hereby certify that my statements in this distribution request are complete and true.

I understand that if I provide false documents, I will be prosecuted according to Tribal Law.

****MUST SIGN BEFORE A NOTARY PUBLIC****

Signature of Beneficiary

Date

NOTARY

Sign and attested before me on _____ by _____.

Notary Signature

Appt. Exp.

(SEAL)

Official Use****

Documentation:
Attach a copy of your diploma, transcript and proof of completion of financial education.

Early Release or lump sum payment: Letter requesting why the funds are needs and documentation proof.

- Distribution _____ of 4.
 - Early Release of _____ Distribution.
 - 1 time Distribution.
 - Completed A Financial Class.
 - COVID-19 Draw
- Enrollment Department Approval

Enrollment Signature

Date



DIRECT DEPOSIT The Tulalip Tribes Per Capita Minors Trust Request for Distribution

*NOTE - Only use this form to have your cash payment direct deposited to your personal bank account as an ACH transfer. You must attach a copy of your Tribal Membership ID and a voided check, deposit slip or letter from your bank verifying your account number.

If requesting a check to be send, do not fill out!!

Account Information

Your name as it appears on the account: _____

Account Type: _____ Checking OR _____ Savings

Social Security Number: _____

Bank Name/City/State: _____

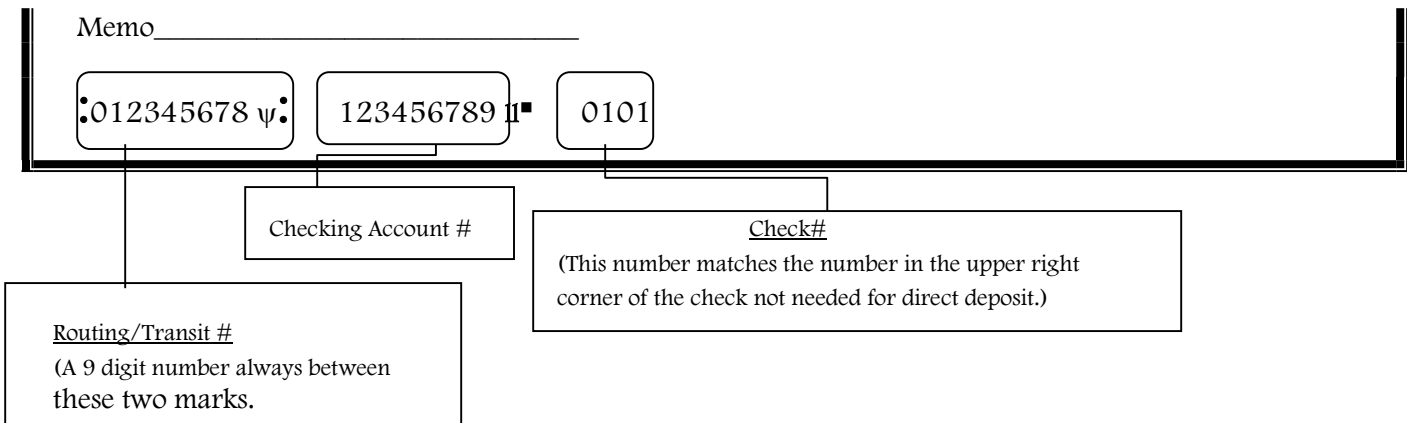
ABA/Routing/Transit # _____ Account Number: _____

NOTE: When completing this form, it is recommended that you contact your financial institution to confirm the routing and account numbers to be used for an ACH transfer. To view the location of these numbers as they typically appear on a check, please refer to the example below.

Authorization: I hereby authorize Matrix, the trustee for the Tulalip Tribes Per Capita Minors Trust, to deposit my cash payment to the financial institution account identified above.

Your Signature: _____ Date: _____

Example of Routing and Account numbers as they typically appear on a check:





Tulalip Enrollment
360-716-4300

The Tulalip Tribes Per Capita Minors Trust Federal Income Tax Withholding Election

Generally, the distribution(s) you receive from the Trust are subject to Federal Income Tax (FIT).

The following percentage will be withheld from the taxable amount of your distribution balance for FIT, unless you make a different election below:

\$12,200 - \$21,900	10% withheld
\$21,901 - \$51,675	12% withheld
\$51,676- \$96,400	22% withheld
Over \$96,400	24%

Election

Please withhold the following percentage of my Trust distribution: _____%
(If you elect less than the percentage required above, your election will not apply.)

Representation

I understand that I am responsible for the Federal Income Tax on my Trust distribution. I further understand that this election must be returned before the Trust distribution is made; otherwise, there will be withholding taken, dependent upon the amount of my distribution. Finally, I understand that I will be responsible for paying my Federal Income Tax and I may be responsible for filing an income tax return (and I will need to file a return for any potential refund of tax overpayment).

Signature of Beneficiary

Date

Caution. *There are penalties for not paying enough federal income tax during the year, either through withholding or estimated tax payments. Please see IRS Pub. 505 for an explanation of your estimated tax requirements and description of penalties in detail. You may be able to avoid quarterly estimated tax payments by having enough tax withheld from your distribution.*

Statement. *By January 31 of next year, the trust will furnish a statement to you on Form 1099-MISC, showing the total amount of your distribution and the total federal income tax withheld.*

Request for Taxpayer Identification Number and Certification

Give form to the
requester. Do not
send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)	
Business name, if different from above	
Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ ----- <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code	
List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number
OF
Employer identification number

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,