

MINOR'S PER CAPITA TRUST **INVESTMENT ELECTION FORM**

•			
Minor's Full Name:			Roll#:
Date of Birth:			
Federal law requires the Tulalip Tribes to protect gaming revenues. The Tulalip Tribes has establish			
There are two (2) investment options. You must enrollment period in February or new accounts. T			ection once per year, during the
In order to make a change in the year of 2021 by February 28, 2021. Mailing Address: Enr. Scan/E-mail rtopaum@tulaliptribes-nsn.gov			
NOTE Only fill out this form	if you want	to make chang	es or if you want to
selection pool $\# 1$. Pool $\# 2$ is the de	fault option if yo	ou do not respond y	our investment options will be
Pool #2.			
Please make your election by checking	<u>the box of your c</u>	<u>choice:</u>	
A. Pool #1 – Conserva	tive Investmer	nt:	
The Conservative Investment Pool op (deposited per capita funds), while pra little additional return.	tion is an investment	option with the primary	
		funda in Daal #1	Componentino
☐ Please deposit my child/ward's per capita funds in Pool #1, Conservative			
Investment.			
Default - B. Pool #2 – Balar	iced Portfolio:		
The Balanced Portfolio option is an age based investment strategy with diversified portfolios (a mix of			
stocks and bonds) becoming increasingly more conservative as the age group nears the distribution age of 18,			
subject to Trust provisions. There will be three age groups:			
Balanced #1 (Ages 15 and Older) (10% Stocks, 90% Bonds & Money Market)			
Balanced #2 (Ages 10 - 14) (50% Stocks, 50% Bonds & Money Market)			
Balanced #3 (Ages 0 - 9) (65% Stocks, 35% Bonds & Money Market)			
If you elect Pool #2, the age of your child will determine which of the three portfolios their funds will be invested			
in. (Example: an 11 year old will be in the #2 Age Group, until the child reaches 15, when it will automatically			
shift to the # 1 Age group).			
single to the willinge group.			
Please deposit my child/war	d's per capita	funds in Pool #2	, Balanced Portfolio.
LEGAL Custodial Parent or Guardian must	sign:		
Mathan			
Mother:	Sian Name:		Data
Print Name: (Authorized Parent or Guardian)	Sign Name.		Date
Father:			
Print Name:	Sign Name:		Date:
Print Name: (Authorized Parent or Guardian)	<i>C</i>		
Guardian:			_
Print Name: (Authorized Parent or Guardian)	Sign Name:		Date:
(Authorized Parent or Guardian)			

Received By:		Date:	
Entered: Date		Date:	
Uploaded: Date	<u>:</u>		