



The Tulalip Tribes
Per Capita Minors Trust
Request for Final Distribution

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

I. Beneficiary Information

1. Name of Beneficiary: _____
2. Address of Beneficiary: _____

3. Phone Number: _____
4. Enrollment Number: _____
5. Social Security Number: _____
6. Date of Birth: _____
7. Age 18-20 Age 21+

II. High School or GED Program Information (If under 21 years of age)

1. School/Program Name: _____
2. School/Program Address: _____

3. School/Program Phone Number: _____
4. High School or GED Graduation Date: _____

III. Representation

I request that the funds remaining in my trust be distributed to me and that my trust be terminated. 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-one (21) years. I agree that the Tulalip Tribe 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 understand 10% of my distribution will be withheld if it is between \$10,000 - \$18,925 and 15% of my distribution will be withheld if it is between \$18,925 and \$46,250 for federal income tax unless I make an election on the trust's tax withholding form for a greater percentage. I further understand that I am responsible for the underpayment of taxes, if any, on this distribution. I hereby certify that my statements in this final distribution request form are complete and true.

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

Signature of Beneficiary

Date

NOTARY

Sign and attested before me on _____ by _____.

Notary Signature

Appt. Exp.

(SEAL)

<p>Documentation Attach a copy of a completed Form W-9. Attach a copy of your diploma and transcript</p>	<p>Enrollment Department Approval _____ Enrollment Signature _____ Date</p>
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DIRECT DEPOSIT The Tulalip Tribes Per Capita Minors Trust Request for Final Distribution

*NOTE - Only use this form to have your cash payment direct deposited to your personal bank account as an ACH transfer. 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: _____

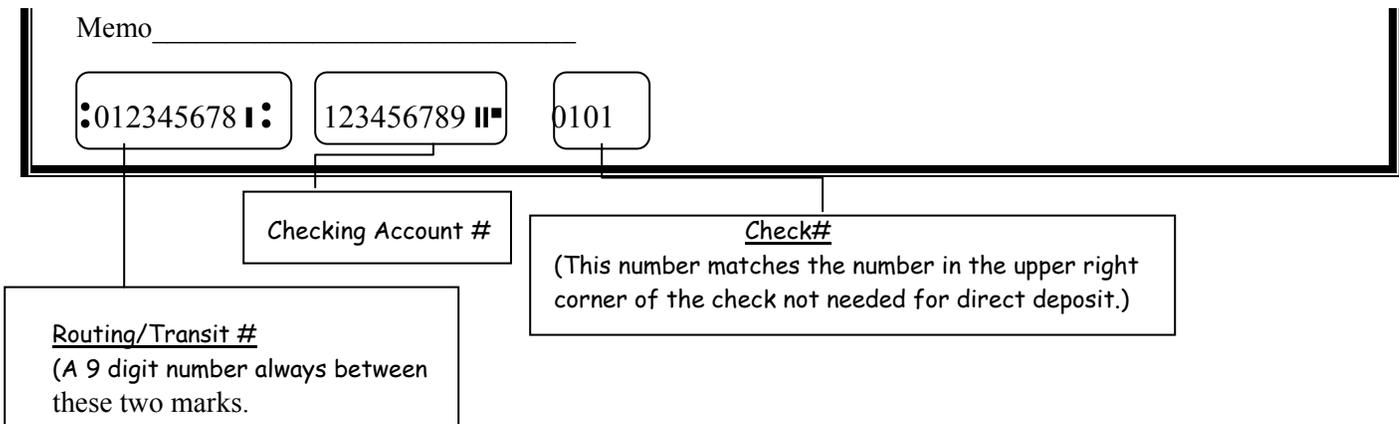
ABA/Routing/Transit # _____ Account Number: _____

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 AST, 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:





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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 your distribution balance for FIT, unless you make a different election below:

<u>Between \$10,000 and \$18,925</u>	<u>Over \$18,925 and Under \$46,250</u>
10% withheld	15% withheld

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
OR
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,