



# The Sahtu Trust

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Tulita Financial Corporation

## Sahtu Trust Capital Distribution Forms

### BENEFICIARY INFORMATION

Full Name: \_\_\_\_\_ Enrolment Registry # \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_ Social Insurance Number: \_\_\_\_\_  
**(19 and Over)**

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 State/Prov: \_\_\_\_\_

Tel: \_\_\_\_\_ E: Mail: \_\_\_\_\_

### Children Information (the applicant above will be entrusted with the child's subsidy)

Children Full Name: \_\_\_\_\_ Enrolment Registry # \_\_\_\_\_

Children Full Name: \_\_\_\_\_ Enrolment Registry # \_\_\_\_\_

Children Full Name: \_\_\_\_\_ Enrolment Registry # \_\_\_\_\_

Children Full Name: \_\_\_\_\_ Enrolment Registry # \_\_\_\_\_

Please Check, if applicable

- I, (we) authorize the Sahtu Trust to make a Capital Distribution payment to myself (the applicant) and on behalf of my children, if applicable.
- All Payments to "individual Beneficiaries" shall be considered as income under the Income Tax Act and the Trustee (SSI) shall issue appropriate tax slips for this payment year end of December 31, 2022, in which I will receive a T3 slip and must report it on my 2022 Federal income tax return.
- I also accept that I am the legal/guardian for the above children noted can legally sign on their behalf.
- I, authorize Sahtu Trust to release a cheque in the amount of **\$500.00** on or after December 19<sup>th</sup>, 2022, Capital Distribution Payment.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of witness: \_\_\_\_\_ Date: \_\_\_\_\_

Dated this day \_\_\_\_\_ of \_\_\_\_\_, 20\_\_\_\_\_.