



# 2025 Youth Development Fund

**All applications must include the following information:**

- 1. Completed Application**
- 2. Copy of Updated Youth Tribal Card**
- 3. Proof of household income for all adults living in the home** (Most recent check stub, tax forms, or W-2, etc.). Income guidelines are based on 300% of the 2025 HHS Poverty Guidelines (See application for more details).
- 4. Invoice/receipt**, registration, or brochure/literature with organization's name and address with cost or receipt of payment. (Check will be made payable to the organization unless receipt of payment is provided.)
- 5. Form W-9**, must be filled out for the company being paid or to the person being paid.
- 6. Please submit ALL documentation to:** youthdevelopmentfund@saulttribe.net or to the address below.

## Categories:

- Sport registration fees
- Sports equipment
- Music, dance, and theatre lessons
- Instrument purchase and rental
- Language lessons
- Camps (sports, band, art, academic)
- Educational, cultural, and class trips
- Testing fees
- Driver's education
- Senior pictures
- School supplies and book deposits (school clothes NOT included)
- Regalia and youth drum

Qualifying categories for funding are based on the Tribal Strategic Directions of the Medicine Wheel: Academic/intellectual, physical, emotional, and cultural/spiritual.

## Applicant Qualifications:

- Must be tribal youth ages 0 through 12th grade living within the seven-county service area (Alger, Chippewa, Delta, Luce, Mackinac, Marquette, and Schoolcraft counties).
- Applicants may receive funding up to \$250.00 per calendar year (Jan 1 - Dec 31, 2025).

**PLEASE NOTE: Approvals, denials, and requests for more information are sent via email. After submitting your request, please make sure to check your email for updates. Applications submitted without supporting documents will drastically increase the time frame for processing.**

If application is submitted by a third party on behalf of the applicant, all future correspondence regarding application status, missing documents, etc. will go directly to the applicant unless permission is granted by applicant to Sault Tribe Education to work with third party.

Education Department  
2 Ice Circle Drive  
Sault Ste. Marie, MI 49783  
[youthdevelopmentfund@saulttribe.net](mailto:youthdevelopmentfund@saulttribe.net)  
906-632-6797

**SAULT STE. MARIE TRIBE OF CHIPPEWA INDIANS  
2025 YOUTH DEVELOPMENT FUND APPLICATION**

**Section I – Applicant Information (one application per child)**

Youth Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_  
 Parent(s)/Guardian(s) \_\_\_\_\_ Foster Child\* (Y/N) \_\_\_\_\_  
\*Proof of income not necessary for foster child(ren)  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Email Address \_\_\_\_\_

List ALL members of the household	Age	Income provided for 18+ Y/N If No, You MUST Complete Section Below	300% 48 Contiguous State & D.C. Poverty Guidelines
1			\$45,180
2			\$61,320
3			\$77,460
4			\$93,600
5			\$109,740
6			\$125,880
7			\$142,020
8			\$158,160
For each additional person, add			\$5,380
Declaration of no income: Name of adult: _____			
Declaration of no income: Name of adult: _____			

**Section II – Request Information**

**Purpose of Request:** \_\_\_\_\_ **Date(s) of Activity:** \_\_\_\_\_

**Amount of Funds Requested** (max \$250.00 per calendar year per youth): \_\_\_\_\_

**Check Payable to:** \_\_\_\_\_

**Checks will be made payable to the organization unless proof of payment is received. A W9 must be filled out for the above listed name/company.**

All information obtained in this application will be treated as privileged and confidential. I certify that all the information given is true and correct and that all income is reported. I understand that this information is being given for the receipt of funds; and I authorize Sault Tribe program officials to verify the information on this application; and that deliberate misrepresentation of the information may subject to suspension from the program and/or require the return of funds.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

## Request for Taxpayer Identification Number and Certification

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

**Give Form to the  
requester. Do not  
send to the IRS.**

Print or type.  
See Specific Instructions on page 3.

<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.																					
<b>2</b> Business name/disregarded entity name, if different from above																					
<b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes. <table style="width: 100%; margin-top: 5px;"> <tr> <td><input type="checkbox"/> Individual/sole proprietor or single-member LLC</td> <td><input type="checkbox"/> C Corporation</td> <td><input type="checkbox"/> S Corporation</td> <td><input type="checkbox"/> Partnership</td> <td><input type="checkbox"/> Trust/estate</td> </tr> <tr> <td colspan="5"> <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____                     </td> </tr> <tr> <td colspan="5"> <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.                     </td> </tr> <tr> <td colspan="5"> <input type="checkbox"/> Other (see Instructions) ▶ _____                     </td> </tr> </table>	<input type="checkbox"/> Individual/sole proprietor or single-member LLC	<input type="checkbox"/> C Corporation	<input type="checkbox"/> S Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust/estate	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____					<b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.					<input type="checkbox"/> Other (see Instructions) ▶ _____					<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see Instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <small>(Applies to accounts maintained outside the U.S.)</small>
<input type="checkbox"/> Individual/sole proprietor or single-member LLC	<input type="checkbox"/> C Corporation	<input type="checkbox"/> S Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Trust/estate																	
<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____																					
<b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.																					
<input type="checkbox"/> Other (see Instructions) ▶ _____																					
<b>5</b> Address (number, street, and apt. or suite no.) See Instructions.	Requester's name and address (optional)																				
<b>6</b> City, state, and ZIP code																					
<b>7</b> 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 generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 25%; border: 1px solid black; height: 20px;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 40%; border: 1px solid black; height: 20px;"></td> </tr> </table>		-		-	
	-		-		
<b>OR</b>					
<b>Employer identification number</b>					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; border: 1px solid black; height: 20px;"></td> <td style="width: 5%; text-align: center;">-</td> <td style="width: 90%; border: 1px solid black; height: 20px;"></td> </tr> </table>		-			
	-				

### 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); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**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 for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
------------------	----------------------------	--------

### General Instructions

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

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*