

OGLALA SIOUX TRIBE
BUSINESS CODE

FORM 12 – STATEMENT OF INTEREST EXCHANGE

Document processing fee is \$100.00

Fees & forms/cover sheets are subject to change.

Documents must be typewritten or machine printed.

ABOVE SPACE FOR OFFICE USE ONLY

Statement of Interest Exchange

filed pursuant to Section 44-2-1.40 of the OST Business Code and Subpart 2.4 of Chapter 44 of the OST Law and Order Code:

1. Entity name or true name of each entity the shares of which will be acquired:

(Enter name exactly as it appears in the Tribal Records)

ID number: _____

Principal office street address: _____
(Street name and number)

(City) (State) (Postal/Zip Code) (Province/Country – if not US)

Principal office mailing address: (if different from above)

(Street name and number or Post Office Box information)

(City) (State) (Postal/Zip Code) (Province/Country – if not US)

Entity name or true name: _____
(Enter name exactly as it appears in the Tribal Records if applicable)

ID number: _____

Principal office street address

(Street name and number or Post Office Box information)

(City) (State) (Postal/Zip Code) (Province/Country – if not US)

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Principal office mailing address: (if different from above)

(Street name and number or Post Office Box information)

(City) (State) (Postal/Zip Code) (Province/Country – if not US)

Entity name or true name: _____
(Enter name exactly as it appears in the Tribal Records if applicable)

ID number: _____

Principal office street address:

(Street name and number or Post Office Box information)

(City) (State) (Postal/Zip Code) (Province/Country – if not US)

Principal office mailing address: (if different from above)

(Street name and number or Post Office Box information)

(City) (State) (Postal/Zip Code) (Province/Country – if not US)

(If there are more than three such entities, mark with an "X" and include an attachment stating the entity name, ID number, and the principal office address of each additional entity.) ____ ("X")

2. Entity name of acquiring entity: _____

ID number: _____

Principal office mailing address:

(Street name and number or Post Office Box information)

(City) (State) (Postal/Zip Code) (Province/Country – if not US)

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3. The plan of interest exchange was approved by the acquired entity in accordance with Article 3 of Subpart 2.3 of Chapter 44 of the OST Law and Order Code (Sections 44-2-1.36 et seq.)

4. Additional information may be included. If applicable, mark with an “X” and include an attachment stating the additional information. _____ (“X”)

5. (Optional) Delayed effective date: _____
(mm/dd/yyyy)

(**Caution:** Delayed effective date may not be more than 90 days after the filing date.)

Notice: Causing this document to be delivered for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of subpart 2.4 of Chapter 44 of the Oglala Sioux Tribe Law and Order Code, the constituent documents, and the organic statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that subpart, the constituent documents, and the organic statutes. This perjury notice applies to each individual who causes this document to be delivered to the Oglala Sioux Tribe, whether or not such individual is named in the document as one who has caused it to be delivered.

6. Name(s) and address(es) of the individual(s) causing the document to be delivered for filing:

(**Caution:** This Statement must be signed on behalf of a domestic acquired entity.)

(Last) (First) (Middle) (Suffix)

(Street name and number or Post Office Box information)

(City) (State) (Postal/Zip Code) (Province/Country – if not US)

(The document need not state the true name and address of more than one individual. However, if you wish to state the name and address of any additional individuals causing the document to be delivered for filing, mark below with an “X” and include an attachment stating the name and address of each such individuals.)

_____ “X”

Disclaimer: This form, and any related instructions, are not intended to provide legal, business or tax advice, and are offered as a public service without representation or warranty. While this form is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form. Questions should be addressed to the user’s attorney.

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FORM 12 – STATEMENT OF INTEREST EXCHANGE INSTRUCTIONS

**Instructions for completing a
Statement of Interest Exchange**

Use these instructions when completing a Statement of Interest Exchange pursuant to Section 44-2-1.40 of the OST Business Code and subpart 2.4 of Chapter 44 of the OST Law and Order Code.

Provide only information required or permitted to be included in the document by OST law. Information included in the document must be typewritten, in English and must state the name(s) and address(es) of at least one individual causing the document to be delivered for filing. The required form/cover sheet must be used when filing the document.

You may include additional information in an attachment to the form/cover sheet. Any attachment becomes part of the document. If there is a conflict between information in the attachment and the form/cover sheet, the information in the form/cover sheet controls. Information provided in a case-sensitive format will be retrieved and displayed in the same format.

Include a self-addressed stamped envelope and extra copy of the document for return mailing of the file stamped copy.

Line-by-line Instructions:

Entity Name or True Name of Each Entity Whose Interests (Shares) Will Be Acquired. List the entity names or true names of the entities involved in the share and equity capital exchange and complete all information in this section. The name of any entity currently in the Tribal Records must be stated exactly as shown in the Tribal Records. The true name, with respect to a foreign entity, is the name as used in the entity's jurisdiction of formation. The true name, with respect to a partnership, is the name of the partnership prior to registration with the Tribe. The true name, with respect to a domestic entity, is the entity name. If there are more than three entities involved in the share and equity capital exchange, mark where indicated with an "X" and include an attachment stating the additional information.

ID Number. The number assigned to the initial document that began the record in the Tribal Records of the Oglala Sioux Tribe. This ID number is specific to the OST. It is not a state or federal tax number. The ID number is noted in the Tribal Records indexed by name. This ID number must be indicated on all documents related to an existing

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record in the Tribal Records.

Principal Office Street Address. List the complete street address of the entity's principal office code.

Principal Office Mailing Address. If mail cannot be delivered to the street address, provide an address where mail may be delivered.

Entity Name of Acquiring Entity. List the entity name of the acquiring entity, and complete all information in this section.

ID Number. The number assigned to the initial document that began the record in the Tribal Records of the Oglala Sioux Tribe. This ID number is specific to the OST. It is not a state or federal tax number. The ID number is noted in the Tribal Records indexed by name. This ID number must be indicated on all documents related to an existing record in the Tribal Records.

Principal Office Street Address. List the complete street address of the entity's principal office code.

Principal Office Mailing Address. If mail cannot be delivered to the street address, provide an address where mail may be delivered.

Statement Regarding Approval of Share Exchange. . The plan of interest exchange was approved by the acquired entity in accordance with Article 3 of Subpart 2.3 of Chapter 44 of the OST Law and Order Code (Sections 44-2-1.36 et seq.)

Additional Information. If additional information is to be included, mark the box and include an attachment stating the additional information.

Delayed Effective Date. The effective date of this document may be delayed up to 90 days after filing. The delayed effective date may also specify a particular time of day Mountain Time. If no time of day is specified, it defaults to close of business on that date. Close of business is 11:59:59 PM Mountain Time.

Notice. Causing this document to be delivered to the Tribe for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose

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behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of subpart 2.4 of Chapter 44 of the OST Law and Order Code, the constituent documents, and the organic statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that Subpart, the constituent documents, and the organic statutes. This perjury notice applies to each individual who causes this document to be delivered to the Tribe, whether or not such individual is named in the document as one who has caused it to be delivered.

Filing Information. State the name(s) and address(es) of the individual(s) causing this document to be delivered for filing. This information is required for the Tribe to deliver notice if the filing of the document is refused. The individual(s) listed will be held responsible for complying with the above notice. The document need not state the true name and address of more than one individual. However, if you wish to state the name and address of any additional individuals causing the document to be delivered for filing, mark an “X” indicated and include an attachment stating the name and address of such individuals.

(Caution: This Statement must be signed on behalf of a domestic acquired entity.)

Disclaimer. These instructions, and the related form, are not intended to provide legal, business or tax advice, and are offered as a public service without representation or warranty. While the related form is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form. Questions should be addressed to the user’s attorney.