

Testamentary Disposition (Koniag Stock Will)



Important:

- Ⓞ This Testamentary Disposition is made under the provisions of Alaska Statutes 13.16.705(b).
- Ⓞ Without a will that does not include inheritance of Koniag stock, determination of heirs is based in accordance with Alaska Statutes.
- Ⓞ The only way to change the person(s) named in a stock will is to prepare a new stock will.
- Ⓞ Fractional shares are not allowed. If you do not specify who will receive the additional or fractional share, it will be determined by lot.
- Ⓞ See instructions for more information.

A

SHAREHOLDER INFORMATION

I, _____, having attained the age of eighteen (18), whose birth date is _____, whose Social Security Number is _____, and, being of sound mind, execute this stock will solely for the purpose of transferring my shares of stock in KONIAG INCORPORATED NATIVE CORPORATION, hereinafter shall be referred to as "KONIAG".

I currently own: _____ shares of Class A Stock
 _____ shares of Class B Stock
 _____ shares of Class C Stock

B

DISPOSITION OF KONIAG STOCK

I hereby devise and bequeath my shares of stock in KONIAG as follows: **(Fractional shares cannot be further divided)**

PRIMARY BENEFICIARY(IES)		Print full name, address, and date of birth of beneficiary(ies) whom you want to receive your stock		
Full Legal Name:	Address:	Date of Birth:	Class of Stock:	# or % of shares
Relationship:				
Relationship:				
Relationship:				
Relationship:				
Relationship:				
Relationship:				
Relationship:				

() INITIAL HERE IF YOU HAVE ADDITIONAL BENEFICIARY (IES) ON A SEPARATE PAGE. ATTACH ADDITIONAL SHEET.

C

CUSTODIANSHIP **SKIP THIS SECTION IF NO MINORS ARE LISTED IN SECTION B.**

If any of the above beneficiary(ies) listed is/are minors when I die, I name the following persons as the custodian until they turn 18 years of age:

APPOINTED CUSTODIAN(S)		Print full name and address for each beneficiary(ies) who is a minor	
Minor's Name:	Custodian's Name & Address	Successor Custodian's Name & Address:	

D

If children are born to or adopted by me after the date of this stock will, I wish for them to receive equal shares (to the greatest extent possible) as those persons listed in Section B. (If neither box is checked, KONIAG will presume the answer is "yes.") Yes _____ No _____

E

INITIALS _____

F

DISPOSITION OF ADDITIONAL STOCK ACQUIRED *(Initial only ONE)*

Should I acquire any additional KONIAG stock, I hereby devise and bequeath such shares as follows:

- Option 1 _____ To the same persons and in the same relative proportion as listed in Section B.
- Option 2 _____ To the following persons (if different than listed in Section B) and in the following proportions:

BENEFICIARY(IES)		Print full name, address, and date of birth of beneficiary(ies) whom you want to receive your ADDITIONAL stock		
Full Legal Name:	Address:	Date of Birth:	Class of Stock:	# or % of shares

G

CONTINGENT BENEFICIARY(IES) *(Initial only ONE)*

Should any beneficiary listed in Section B not survive me, I hereby devise and bequeath such shares as follows:

- Option 1 _____ to that beneficiary's potential heir(s) according to Alaska State law.
- Option 2 _____ to the surviving beneficiary(ies) listed in Section B and in the same proportions.
- Option 3 _____ to the following:

CONTINGENCY BENEFICIARY(IES)		Print full name, address, and date of birth of beneficiary(ies) IF option #3 is initialed.		
Full Legal Name:	Address:	Date of Birth:	Class of Stock:	# or % of shares

H

SIGNATURE AND NOTARY PUBLIC

SHAREHOLDER

I, _____, the Shareholder, sign my name to this instrument this
(Shareholder)

_____ day of _____, _____, and, being first sworn, declare to the undersigned authority
(Day) (Month) (Year)

that I sign and execute this instrument as my TESTAMENTARY DISPOSITION, and, that I sign it willingly (or willingly direct another to sign for me), and that I execute it as my free and voluntary act for the purpose expressed in it, and that I am 18 years of age or older, of sound mind, and under no constraint or undue influence. By signing, I hereby revoke any and all prior wills, codicils, signature on a stock certificate or relevant form, or other prior testamentary disposition of these shares of stock made by me.

(Shareholder Signature)

NOTARY

STATE OF _____)
) ss:
 COUNTY/DISTRICT _____)

SUBSCRIBED, SWORN TO, and acknowledged before me by the Shareholder this

_____ day of _____, _____.
(Day) (Month) (Year)

(Notary Signature)
 Notary Public in and for _____
 My Commission Expires _____

Testamentary Disposition (Koniag Stock Will) Instructions



Submit a valid *Koniag Stock Will* by providing the following:

- A SHAREHOLDER INFORMATION**
- A1 Print your full legal name.
 - A2 Enter your birth date.
 - A3 Enter your social security number.
 - A4 Enter the number of shares next to the class of stock.

- B DISPOSITION OF KONIAG STOCK**
- B1 Print full legal name AND relationship of the primary beneficiary whom you want to receive your stock.
 - B2 Print address of the primary beneficiary.
 - B3 Print the date of birth of the primary beneficiary.
 - B4 Print the class of stock you wish each primary beneficiary to receive.
 - B5 Print the number (#) OR percentage (%) of shares for each primary beneficiary.

NOTE: Use whole shares only. Shares cannot be broken down to less than 1 share and fractional shares will not be further divided.

☺ If you have 100 shares and you wished to divide your stock equally to an uneven amount of heirs: i.e., three heirs, then two heirs will each inherit 33 shares and one heir will inherit 34 shares.

☺ If you have fractional shares: i.e., 33.333 and three heirs are listed, two heirs would get 11 shares each and one would get 11.333 shares.

- B6 Initial if there are additional beneficiaries on a separate page and attach the page.

- C CUSTODIANSHIP**
Skip if no minor is listed in Section B.
- C1 Print the name of any minor who is listed as a primary beneficiary who is under age 18 or behavioral/emotionally disabled adults.
 - C2 Print the name and address of the Custodian that you appoint.
 - C3 Print the name and address of the Successor Custodian, in the event the Custodian is unable to perform the duties as Custodian.

- D Initial only one answer. If neither box is checked, Koniag will presume the answer is "Yes."

- E Initial the bottom left corner of the page.

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- ☐ The only way to change the person(s) named in a stock will is to prepare a new stock will.
- ☐ Fractional shares are not allowed. If you do not specify who will receive the additional or fractional share, it will be determined by lot.
- ☐ See instructions for more information.

A SHAREHOLDER INFORMATION

I, **A1 Shareholder's Name**, having attained the age of eighteen (18), whose birth is **A2 DD/MM/YY** whose Social Security Number **A3 XXX-XX-XXXX** and, being of sound mind, execute this stock will solely for the purpose of transferring my shares of stock in KONIAG INCORPORATED NATIVE CORPORATION, hereinafter shall be referred to as "KONIAG".

A4 I currently own 33.333 shares of Class A Stock
 _____ shares of Class B Stock
 _____ shares of Class C Stock

B DISPOSITION OF KONIAG STOCK

I hereby devise and bequeath my shares of stock in KONIAG as follows: (Fractional shares cannot be further divided)

PRIMARY BENEFICIARY(IES)					
Print full name, address, and date of birth of beneficiary(ies) whom you want to receive your stock					
B1 Full Legal Name:	B2 Address:	B3 Date of Birth:	B4 Class of Stock:	B5 % of shares	
Relationship: <u>Child</u>	<u>Address</u>	<u>DD/MM/YY</u>	<u>Class A</u>	<u>11</u>	
Relationship: <u>Child</u>	<u>Address</u>	<u>DD/MM/YY</u>	<u>Class A</u>	<u>11</u>	
Relationship: <u>Minor's Full Name</u>	<u>Address</u>	<u>DD/MM/YY</u>	<u>Class A</u>	<u>11.333</u>	
Relationship:					
Relationship:					
Relationship:					
Relationship:					

B6 INITIAL HERE IF YOU HAVE ADDITIONAL BENEFICIARY (IES) ON A SEPARATE PAGE. ATTACH ADDITIONAL SHEET.

C CUSTODIANSHIP SKIP THIS SECTION IF NO MINORS ARE LISTED IN SECTION B.
 If any of the above beneficiary(ies) listed is/are minors when I die, I name the following persons as the custodian until they turn 18 years of age.

APPOINTED CUSTODIAN(S)		
Print full name and address for each beneficiary(ies) who is a minor		
C1 Minor's Name:	C2 Custodian's Name & Address:	C3 Successor Custodian's Name & Address:
<u>Minor's Full Name</u>	<u>Full Name & Address</u>	<u>Full Name & Address</u>

D If children are born to or adopted by me after the date of this stock will, I wish for them to receive equal shares (to the greatest extent possible) as those persons listed in Section B. (If neither box is checked, KONIAG will presume the answer is "Yes.")
 Yes No

E INITIAL SIN

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