

# 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, Inc. ("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.

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 requested information of each beneficiary 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:				

( ) 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 \_\_\_\_\_



**DISPOSITION OF ADDITIONAL STOCK ACQUIRED** *(Initial or Check 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 information of beneficiary(ies) whom you want to receive your ADDITIONAL stock		
Full Legal Name:	Address:	Date of Birth:	Class of Stock:	# or % of shares



**CONTINGENT BENEFICIARY(IES)** *(Initial or Check 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



**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’s 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 Check only one answer. If neither box is checked, Koniag will presume the answer is "Yes."

E Check the bottom left corner of the page.

### 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, Inc. ("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, **A1 Shareholder's Name**, born **A2 DD/MM/YY** [attained the age of eighteen (18) whose birth date is **A2 DD/MM/YY** whose Social Security Number is **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 90 of shares:
Full Name: <b>Child</b> Relationship: _____	Address: _____	DD/MM/YY _____	Class A	11
Full Name: <b>Child</b> Relationship: _____	Address: _____	DD/MM/YY _____	Class A	11
Minor's Full Name: <b>Child</b> Relationship: _____	Address: _____	DD/MM/YY _____	Class A	11.333
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:
Minor's Full Name: _____	Full Name & Address: _____	Full 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** INITIAL **E SIN**

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# Testamentary Disposition (Koniag Stock Will) Instructions



## F DISPOSITION OF ADDITIONAL STOCK ACQUIRED

- F1 Initial or check only one option. If you check Option #2 and fail to provide names, then Option #1 will be used for all stock acquired after the date of this stock will form.
- F2 Print full legal name of the beneficiary.
- F3 Print the address of the beneficiary.
- F4 Print the birth date of the beneficiary.
- F5 Enter the class of stock.
- F6 Enter the number of shares next to the class of stock.

## G CONTINGENT BENEFICIARY(IES)

- G1 Initial or check only one option.
- G2 Print full legal name of the contingent beneficiary.
- G3 Print address of the contingent beneficiary.
- G4 Print the date of birth of the contingent beneficiary.
- G5 Print the class of stock you wish each contingent beneficiary to receive.
- G6 Print the number (#) OR percentage (%) of shares for each contingent beneficiary.

## H SIGNATURE AND NOTARY PUBLIC

- H1 Print your **full legal name**.  
**YOUR SIGNATURE MUST BE NOTARIZED IN FRONT OF A NOTARY PUBLIC**
- H2 Print the day that you sign your stock will.
- H3 Print the month in front of a notary public.
- H4 Print the year in front of a notary public.
- H5 Sign your **full legal name** in front of a notary public.
- H6 **The Notary Block MUST be thoroughly completed by the notary public.**

### Things to Remember:

- ⊙ The Koniag offices have notaries available.
- ⊙ Complete a new stock will if:
  - You inherit additional shares
  - You give or receive a gift of shares
  - Someone named in your current stock will dies
  - You change your name (marriage or divorce)
  - You give birth or adopt children
- ⊙ Shareholders are encouraged to have their eligible descendant(s)/potential heir(s) register as Koniag Descendant(s).
- ⊙ Shareholders who submit a valid will are eligible for quarterly and annual grand prize drawing.

**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:

F1 Option SIN 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			
F2 Full Legal Name:	F3 Address:	F4 Date of Bir:	F5 Class of Stock:	F6 # 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:

G1 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 SIN to the following:

CONTINGENCY BENEFICIARY(IES)	Print full name, address, and date of birth of beneficiary(ies) IF section 53 is not checked.			
G2 Full Legal Name:	G3 Address:	G4 Date of Bir:	G5 Class of Stock:	G6 # or % of shares
FullName	Address	DD/MM/YY	CLASS A	100%

**YOUR SIGNATURE MUST BE NOTARIZED IN FRONT OF A NOTARY PUBLIC**

**H SIGNATURE AND NOTARY PUBLIC**

SHAREHOLDER  
H1 Shareholder's Name the Shareholder, sign my name to this instrument this  
H2 Day day of H3 Month H4 Year, and, being first sworn, declare to the undersigned authority 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.

H5 Shareholder's Signature  
(Shareholder Signature)

**The date the notary signs the stock will MUST be the same date you signed the stock will.**

NOTARY  
H6 STATE OF \_\_\_\_\_ )  
COUNTY/DISTRICT \_\_\_\_\_ ) SS:  
\_\_\_\_\_) \_\_\_\_\_

SUBSCRIBED, SWORN TO, and acknowledged before me by the Shareholder this  
\_\_\_\_\_) \_\_\_\_\_  
(Day) (Month) (Year)

\_\_\_\_\_) \_\_\_\_\_  
(Notary Signature)  
Notary Public in and for \_\_\_\_\_  
My Commission Expires \_\_\_\_\_

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### DELIVER, MAIL, FAX OR EMAIL FORM

Shareholder Records

194 Alimaq Drive  
Kodiak, AK 99615

P: 907-486-2530 or toll free: 800-658-3818

F: 907-486-3325

E: shareholderrecords@koniag.com

Shareholder Records

3800 Centerpoint Drive, Ste 502  
Anchorage, AK 99503

P: 907-561-2668 or toll free: 800-658-3818

F: 907-562-5258

E: shareholderrecords@koniag.com