

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, a random drawing will occur.
- ⓐ 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

If stock is not specifically allocated on this form, Koniag will distribute shares equally to the heirs listed below.

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:				

() 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

PERSONAL ESTATE FUNDS *(Initial or check only ONE. If left blank Koniag will assume Option 1.)*

Should I have any funds on hold that were issued before my death, I hereby devise and bequeath as follows:

Option 1 _____ To the same persons and in the same relative proportion as listed in Section B.

Option 2 _____ To the following person as my Personal Estate Representative (P.E.R).

OPTION 2: FULL LEGAL NAME OF P.E.R.

Print address of Personal Estate Representative

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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:

OPTION 2: 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:

OPTION 3: 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 PERSONAL ESTATE FUNDS

Personal Estate Funds consist of any funds due, accrued and payable to you by Koniag. These funds typically include accrued but unpaid dividends and are separate from the shares you wish to devise above. If left blank, Koniag will assume Option 1.

- D1 Initial or check only one option. If you initial or check Option #2 and fail to provide a name, then Option #1 will be used.
- D2 Print full legal name of the Personal Estate Representative, and alternate if you so choose.
- D3 Print the address of the Personal Estate Representative.

- E Initial the bottom left corner of the page.

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(Koniag Stock Will)

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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, a random drawing will occur.
- ☐ See instructions for more information.

A SHAREHOLDER INFORMATION

A1 Shareholder's Full Name _____, having attained the age of eighteen (18), whose birth date is MM/DD/YY _____, whose Social Security Number is XXX-XX-XXXX _____, and, being of sound mind, execute this stock will solely for the purpose of transferring my shares of stock in Koniag.

A4 I currently own: 33.333 shares of Class A Stock
33.000 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)

Full Legal Name:	Address:	Date of Birth:	Class of Stock:	# or % of shares
B1 <u>Full Name</u> _____ Relationship: <u>Child</u>	B2 <u>Address</u> _____	B3 <u>MM/DD/YY</u> _____	B4 <u>A/B</u> _____	B5 <u>11 / 11</u> _____
<u>Full Name</u> _____ Relationship: <u>Child</u>	<u>Address</u> _____	<u>MM/DD/YY</u> _____	<u>A/B</u> _____	<u>11 / 11</u> _____
<u>Minor's Full Name</u> _____ Relationship: <u>Child</u>	<u>Address</u> _____	<u>MM/DD/YY</u> _____	<u>A/B</u> _____	<u>11.333/11</u> _____
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:

Minor's Name:	Custodian's Name & Address	Successor Custodian's Name & Address:
C1 <u>Minor's Full Name</u> _____	C2 <u>Full Name & Address</u> _____	C3 <u>Full Name & Address</u> _____

D PERSONAL ESTATE FUNDS (Initial only or check ONE)

Should I have any funds on hold that were issued before my death, I hereby devise and bequeath as follows:

D1 Option 1 X To the same persons and in the same relative proportion as listed in Section B.
Option 2 _____ To the following person as my Personal Estate Representative (P.E.R.).

OPTION 2 FULL LEGAL NAME OF P.E.R. _____ Print address of Personal Estate Representative _____

D2 _____

E INITIALS SIN **E**

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.

DELIVER, MAIL, FAX OR EMAIL FORM

Shareholder Records

194 Alimaq Drive
Kodiak, AK 99615

P: 907-290-8492 or toll free: 800-658-3818

F: 907-486-3325

E: shareholderrecords@koniag.com

Shareholder Records

3800 Centerpoint Drive, Ste 700
Anchorage, AK 99503

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

F: 907-562-5258

E: shareholderrecords@koniag.com

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 option 2 is selected.				
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

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 of _____, _____.

(Day) (Month) (Year)

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

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