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Last Will & Testament (AS 13.16.705(b) Stock Will)

IMPORTANT: As a Kikiktagruk Inupiat Corporation (KIC) Shareholder, you are encouraged to execute a KIC Stock Will to ensure that your KIC stock will be distributed in the desired manner. It is important to update your KIC Stock Will upon the death of a designated heir, after giving or receiving a gift of stock. Marriage, divorce, the birth or adoption of children and other life changes are also reasons to complete a new stock will.

I, _____ (testator), being of sound mind, execute this will or codicil solely for the purpose of transferring my shares of stock in Kikiktagruk Inupiat Corporation (KIC). 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.

Date of Birth _____ Social Security Number _____

I devise and bequeath all of my shares of stock in KIC that I own or am entitled to as stipulated below. I understand that KIC does not allow share fractions or single shares to be divided. I further understand and agree that if following the transfer instructions below would result in dividing a share fraction or single share, KIC shall follow its allocation of shares procedure to determine ownership of any share fraction or single share that would have otherwise be divided.

Section I: Disposition of KIC Stock

Full Legal Name of Beneficiary(ies)

Date of Birth & Social Security Number

Distribution of
Shares

***Print full legal name**

***Exact Number of shares**

_____	_____	_____	_____
Full Legal Name of Beneficiary	Date of Birth	Social Security Number	Number of Shares

_____	_____
Mailing Address	Phone Number

_____	_____	_____	_____
Full Legal Name of Beneficiary	Date of Birth	Social Security Number	Number of Shares

_____	_____
Mailing Address	Phone Number

_____	_____	_____	_____
Full Legal Name of Beneficiary	Date of Birth	Social Security Number	Number of Shares

_____	_____
Mailing Address	Phone Number

_____	_____	_____	_____
Full Legal Name of Beneficiary	Date of Birth	Social Security Number	Number of Shares

_____	_____
Mailing Address	Phone Number

Testator's (your) Initials: _____

Section I: Continued

Full Legal Name of Beneficiary	Date of Birth	Social Security Number	Number of Shares
Mailing Address		Phone Number	
Full Legal Name of Beneficiary	Date of Birth	Social Security Number	Number of Shares
Mailing Address		Phone Number	
Full Legal Name of Beneficiary	Date of Birth	Social Security Number	Number of Shares
Mailing Address		Phone Number	

Section II: Custodian(s)

Complete Section 2 only if someone named in Section 1 is a minor (under 18 years of age). Appoint one adult custodian for each minor by printing the custodian's name on the same lines as the minor. Print the custodian's name next to each and every minor, even if naming the same custodian.

I appoint the following individual(s) as custodian(s) of the KIC stock for the named minor(s) as required by the Alaska Uniformed Transfer to Minors Act. (AS 13.46.085):

Name of Minor Beneficiary (from Section 1)	Name of Custodian for that Minor Beneficiary
_____	_____
_____	_____
_____	_____
_____	_____

Section III: Disposition of Additional Stock Acquired

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

Option 1 _____ To the same person(s) and in the same relative proportion as listed in Section I.

Option 2 _____ To the following persons (if different than those you named in Section 1) and in the following proportions.

Full Legal Name of Beneficiary(ies) <i>*Print full legal name</i>	Date of Birth & Social Security Number	Distribution of Shares <i>*Percentage of shares</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Testator's (your) Initials: _____

Section IV: Signatures

This instrument shall be governed by and construed in accordance with the laws of the State of Alaska.

I, _____, the testator, sign my name to this instrument at _____ (city), _____ (state), and declare that I sign and execute this instrument as my last Will and that I sign it willingly (or willingly direct another to sign for me), that I execute it as my free and voluntary act for the purposes expressed in it, and that I am 18 years of age or older, of sound mind, and under no constraint or undue influence.

Your Signature

Date

State of _____

County of: _____ (or _____ Judicial District)

Subscribed and sworn to, and acknowledged before me by _____,
(print name of testator)

the testator, this _____ day of _____, 20____.

Notary's Signature

Notary Public in and for: _____

My Commission expires: _____