

Filling in the form . . .

- Everyone must fill in Part A
- Fill in Part B only if there is no will and you are seeking to transfer the deceased's shares
- Everyone must fill in Part C

Part A — General Information


1. Relationship to Deceased

I can swear to the truth of the facts stated because I am the deceased's

- Mother Father Brother Sister Spouse Friend Aunt
 Uncle Cousin Child Niece Nephew Personal Representative
 Other: _____

2. Death Certificate/Circumstances Relating to Death of Shareholder

- A copy of the deceased's death certificate is attached.

 If a death certificate is not attached, or the following information is not included in the death certificate, or it is inaccurate in the death certificate, please fill out the following information.

The deceased's date of death was _____.

The deceased was _____ years old at the time of death. Date of birth: _____.

The deceased died in: _____
(city/state)

At the time of death, the deceased was living in: _____
(city/state)

3. Stock

A. AKI Stock

- At the time of death, the deceased owned AKI Settlement Common Stock

B. Gifts

I don't know of any gift of AKI stock by the deceased to any person during his or her life.

I believe that the deceased gave some or all of his or her AKI stock to the following person(s) during his or her life:

Name of recipient: _____
Address: _____
Telephone: _____
Relationship to deceased: _____
Date of gift: _____
Number of shares given: _____

C. Court Orders

A divorce decree, decree of separation, child support order, or other order or decree (this includes any agreement related to child support or property settlement which has been approved by a court) has been issued, which may affect who is entitled to the stock of the deceased.

Date of the order or decree: _____
Name of the court: _____
Location of the court: _____
Case number: _____

A copy of the court order or decree is attached.

I don't know of any such order or decree regarding the deceased.

D. Wills

The deceased signed a Testamentary Disposition form for AKI stock.
 A copy of the signed Testamentary Disposition form is attached.

The deceased signed a Testamentary Disposition Revocation form for his or her AKI stock.
 A copy of the signed revocation form is attached.

The deceased signed a general will that provided for the transfer of his or her AKI stock.

A copy of the signed will is attached.

The deceased did not leave a Testamentary Disposition form or will.

I do not know if the deceased left a Testamentary Disposition form or will.

I don't know of any wills, Testamentary Disposition forms or revocations by the deceased except the ones described above.

If a copy of the Testamentary Disposition form, will or Testamentary Disposition Revocation form is not attached, I believe the following person has the deceased's Testamentary Disposition form, will or Testamentary Disposition Revocation form:

Name: _____

Address: _____

Telephone: _____

E. Other ANCSA Corporations


I don't know if the deceased was a shareholder of any other corporation organized under the Alaska Native Claims Settlement Act ("ANCSA").

The deceased was not a shareholder of any other corporation organization under ANCSA.

The deceased was also a shareholder of the following corporations organized under ANCSA:

Koniag, Inc.

Other: _____

 If the deceased left a Testamentary Disposition form or a will that states how his or her AKI stock is to be transferred upon death, skip to Part C.

Part B — Family Information

1. Probate

- I do not know if estate or probate proceedings have been started or a personal representative has been appointed by a probate court.
- No estate, probate or appointment proceedings have been started in any court for the deceased.
- The estate of the deceased has been or is being probated at:

Name of court: _____

Location of court: _____

Case number: _____

Personal Representative (executor) appointed by the probate court to administer the deceased's estate:

Name: _____

Address: _____

Telephone: _____

2. Deceased's Marital Status

A. Status at Time of Death

- At the time of death, the deceased was not married.
- At the time of death, the deceased was married to:

Name: _____

Address: _____

Telephone: _____ Age: _____

Is the spouse of the deceased of Alaska Native descent?

Yes No I don't know

- The deceased's spouse died on: _____

B. Previous Marriages

Was the deceased previously married? Yes No I don't know

If so, please list all former spouses:

Name of first spouse: _____

Address: _____

Telephone: _____

How did this marriage end? Death Divorce

In which city and state did this marriage end? _____

Name of second spouse: _____

Address: _____

Telephone: _____

How did this marriage end? Death Divorce

In which city and state did this marriage end? _____

Any other previous marriages? Yes (list on attached sheet) No Don't know

3. Family

A. Mother

Name of mother: _____

Address of mother: _____

Telephone: _____

Mother is: Natural Adoptive Stepparent

Is mother of Alaska Native descent? Yes No I don't know

If adoptive or stepparent, who is the natural mother?

Name: _____

Address: _____

Telephone: _____

B. Father

Name of father: _____

Address of father: _____

Telephone: _____

Father is: Natural Adoptive Stepparent

Is father of Alaska Native descent? Yes No Don't know

If adoptive or stepparent, who is the natural father?

Name: _____

Address: _____

Telephone: _____

C. Children

The deceased never had any children.

The deceased had the following children (List all children whether living or dead, adopted or natural born, or born out of wedlock. Attach additional sheets if necessary):

Name: _____

Address: _____

Telephone: _____ Age: _____

Name of legal guardian if child is not yet 18: _____

Name of other parent (if other than deceased's spouse):

Is this child of Alaska Native descent? Yes No Don't know

If deceased, date of death: _____

Did this child have any children at the time of his or her death? (If so, please list them in paragraph E below (grandchildren) of this questionnaire.)

Yes No Don't know

Name: _____

Address: _____

Telephone: _____ Age: _____

Name of legal guardian if child is not yet 18: _____

Name of other parent (if other than deceased's spouse):

Is this child of Alaska Native descent? Yes No Don't know

If deceased, date of death: _____

Did this child have any children at the time of his or her death? (If so, please list them in paragraph E below (grandchildren) of this questionnaire.)

Yes No Don't know

Name: _____
Address: _____
Telephone: _____ Age: _____
Name of legal guardian if child is not yet 18: _____
Name of other parent (if other than deceased's spouse): _____
Is this child of Alaska Native descent? Yes No Don't know
If deceased, date of death: _____
Did this child have any children at the time of his or her death? (If so, please list them in paragraph E below (grandchildren) of this questionnaire.)
 Yes No Don't know

D. Brothers and Sisters

- The deceased did not have any brothers or sisters.
- The deceased had the following brothers and sisters (list all of them, whether living or dead, adopted or natural born, and half-brothers and half-sisters. Attach additional sheets if necessary):

Name: _____
Address: _____
Telephone: _____ Age: _____
Name of legal guardian if child is not yet 18: _____
Name of other parent (if other than deceased's spouse): _____
Is this brother or sister of Alaska Native descent? Yes No Don't know
If deceased, date of death: _____
If the person's father or mother were different from the deceased's father or mother, who was the common parent? _____

Name: _____
Address: _____
Telephone: _____ Age: _____
Name of legal guardian if child is not yet 18: _____
Name of other parent (if other than deceased's spouse): _____
Is this brother or sister of Alaska Native descent? Yes No Don't know
If deceased, date of death: _____
If the person's father or mother were different from the deceased's father or mother, who was the common parent? _____

Name: _____
Address: _____
Telephone: _____ Age: _____
Name of legal guardian if child is not yet 18: _____
Name of other parent (if other than deceased's spouse): _____
Is this brother or sister of Alaska Native descent? Yes No Don't know
If deceased, date of death: _____
If the person's father or mother were different from the deceased's father or mother, who was the common parent? _____

E. Grandchildren and Other Issue

- The deceased did not have any grandchildren, great-grandchildren, or other issue who survived the deceased.
- The deceased was survived by the following grandchildren, great-grandchildren, and other issue (attach additional sheets if necessary):

Name: _____
Relationship to deceased: _____
Names of person's parents: _____
Address: _____
Telephone: _____ Age: _____

Name: _____
Relationship to deceased: _____
Names of person's parents: _____
Address: _____
Telephone: _____ Age: _____

Name: _____
Relationship to deceased: _____
Names of person's parents: _____
Address: _____
Telephone: _____ Age: _____

F. Other Relatives

- The deceased did not have any other relatives who have not been named in other sections of this questionnaire.

The deceased had the following other relatives who have not been named in other sections of this questionnaire (attach additional sheets if necessary):

Name: _____
Relationship to deceased: _____
Address: _____
Telephone: _____ Age: _____

Name: _____
Relationship to deceased: _____
Address: _____
Telephone: _____ Age: _____

Name: _____
Relationship to deceased: _____
Address: _____
Telephone: _____ Age: _____

G. Family Tree

A drawing showing the family tree of deceased and all of his or her relatives is attached.

Part C — Certification, Signature and Notarization

I have attached _____ sheet(s) of paper with additional information.

I know of no other fact that might affect who is entitled to the stock.

Date: _____
_____ (signature)

Subscribed and sworn before me this _____ day of _____, 20__.

Notary Public in _____
My commission expires: _____