

Stock Will

NOTE: Filling out the following form affects all of your stock in Ouzinkie Native Corporation. It will not affect any stock you own in Koniag, Inc. or other Native corporations. It will not affect any Native allotment or other property you own. Unless you clearly and specifically indicate otherwise in this or another Stock Will or in your general will, the testamentary provisions set forth below will be interpreted and construed (a) to include any unpaid distributions attributable to the stock; (b) to include Ouzinkie Native Corporation stock you acquire in the future in any manner, notwithstanding AS 13.12.605; and (c) to intend that the number of shares bequeathed to each person be increased or decreased proportionately so as to result in bequeathing all Ouzinkie Native Corporation stock you own at the time of your death. See your lawyer if you have questions concerning passing of title to your stock or other property at death. Ouzinkie Native Corporation assumes no responsibility for the proper execution of the Stock Will, or for assisting in passing of title to your stock or other property at death.

Testamentary Disposition

Upon my death, I give, devise, and bequeath, pursuant to AS 13.16.705, all my shares of stock in Ouzinkie Native Corporation to the following person(s) in the amount(s) set forth.

| Name | Current address | Number or % of shares | Custodian for minor (optional) |
|------|-----------------|-----------------------|--------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Date: _____

_____)
(Signature of stockholder)

State of _____)
_____ Judicial District/County) ss.

Subscribed and sworn to or affirmed before me at _____ on _____.

Notary Public in _____
My commission expires: _____

See Reverse Side Regarding Death Benefits

Request to Death Benefits Trustees (optional)

I request that any death benefits payable under the ONC Death Benefits Settlement Trust upon my death be paid as set forth below. I understand that the decision as to whom benefits will be paid is in the discretion of the trustees, but I ask them to consider this request.

Please note that only Shareholders of Record on December 18, 2000 are eligible for the Death Benefit to be paid to their heir(s).

| Name | Relationship | Amount or % | Custodian for minor (optional) |
|------|--------------|-------------|--------------------------------|
| | | | |
| | | | |
| | | | |

Date: _____

(Signature of stockholder)