



*Natives Of Kodiak*

**NATIVES OF KODIAK, INC.**  
**Inter Vivos**  
**Gift of Stock Form**

A shareholder who is 18 years of age or older may make a gift of shares **only** to a person who is the shareholder's:

- Child
  - Grandchild
  - Great-Grandchild
  - Niece
  - Nephew
  - Brother / Half-Brother
  - Sister / Half-Sister
- The recipient must be related to the shareholder by birth or adoption.
  - Brothers and sisters include half-brothers and half-sisters but *do not* include stepbrothers or stepsisters.
  - The gift can only be made if the stock is not under custodianship, guardianship, or court order for divorce or child support.
  - Any gift of stock that you make may have tax consequences; therefore, we suggest you seek the advice of a tax accountant or lawyer before making any transfers.
  - NOK stock can only be distributed in whole shares; we no longer allow the splitting of shares to less than 1 (one) share. Already fractionalized shares will not be further divided.
  - **The entire Gift of Stock application must be returned, including required additional documentation before the gift transfer can be completed.** The application will be cancelled/voided a year from the date the application was received if entire packet has not yet been received.

**NOTICE**

NOK and NOK Shareholder Permanent Fund Trust (SPFT) shares will be transferred at the same time and in the same amounts. *For example*, if you indicate that you want to gift five shares to your grandchild, we will transfer 5 NOK shares *and* 5 SPFT shares to your grandchild.

**DOCUMENT REQUIREMENTS**

**The following documents must be returned to NOK:**

- ☐ The completed Gift of Stock Form (signed & dated in the presence of a notary)
- ☐ Acceptance of Gift of Settlement Common Stock (signed & dated in the presence of a notary) for each recipient
- ☐ W-9 Form (Social Security Number Certification) for each recipient of shares
- ☐ Copy of Birth Certificate(s) (See *Birth Certificate Requirements* on next page)
- ☐ Name Change Documents (If current name is different from birth certificate)

**Birth Certificate Requirements:**

<b>If recipient of shares is:</b>	<b>Then Provide:</b>
Child	Birth Certificate of child
Grandchild	Birth Certificate of child, <b>and</b> Birth certificate of grandchild
Great-Grandchild	Birth Certificate of child, Grandchild, <b>and</b> great-grandchild
Adopted Child	Adoption Decree OR Birth Certificate
Brother/Sister	Birth Certificate of brother or sister
Half-Brother/Half-Sister	Birth Certificate of half-brother or half-sister
Niece/Nephew	Birth Certificate of brother/sister <b>and</b> Birth Certificate of niece/nephew

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**Return the forms all required documents to:**

Natives of Kodiak, Inc.  
2625 Mill Bay Road  
Kodiak, AK 99615

Email: [shareholders@nativesofkodiak.com](mailto:shareholders@nativesofkodiak.com)

Phone: (907) 486-3606 | Toll-free at 800-648-8462 | Fax: (907) 486-2745  
Shareholder Records: (907) 512-7988

**NATIVES OF KODIAK, INC.**  
**GIFT OF SETTLEMENT COMMON STOCK AND ACCEPTANCE**

I, \_\_\_\_\_, am making this Affidavit for the purposes of making  
 (Shareholder Gifting Stock)  
 an Inter Vivos Gift of Stock pursuant to the provisions of Section 7(i)(i)(c)(iii) of the Alaska Native Claims Settlement Act. I do hereby give, assign, transfer, convey and set over to the descendant(s) I have named herein, stock in Natives of Kodiak, Inc. according to the instructions I have provided in this Affidavit.

SHAREHOLDER INFORMATION (Person Gifting Stock)	
Full Name	Shareholder ID Number
Address	Social Security Number
City/State/Zip	Date of Birth
Email	Phone
Number of Recipients I am gifting shares/trust units to: _____	

Number of Shares Owned Before Gifting	Total Number of Shares I am Gifting	Number of Shares I will Own After this Gift

\_\_\_\_\_ I understand that when I indicate, above, the number of shares I wish to gift, NOK will transfer equal amounts  
 Initial Here of NOK Shares and SPF Trust Units to the recipient(s) as designated below.

RECIPIENT INFORMATION		RECIPIENT 1
Full Legal Name	Shareholder ID Number	Number of Shares I am gifting to this Recipient
Address	Social Security Number	
City/State/Zip	Date of Birth	
Home Phone / Cell Phone		
Relationship of Recipient <input type="checkbox"/> Child <input type="checkbox"/> Grandchild <input type="checkbox"/> Great Grandchild <input type="checkbox"/> Niece to Shareholder: <input type="checkbox"/> Nephew <input type="checkbox"/> Brother <input type="checkbox"/> Sister <input type="checkbox"/> Half-brother <input type="checkbox"/> Half-sister		
<b>If Recipient is a minor (under 18 years of age), please designate a custodian:</b>		
Custodian Name	Relationship to Recipient      Shareholder ID # (if a shareholder)	
Address	Social Security Number      Date of Birth	
City/State/Zip	City/State/Zip	
Phone	Email	

RECIPIENT INFORMATION		RECIPIENT 2
Full Legal Name	Shareholder ID Number	Number of Shares/Trust Units I am gifting to this Recipient
Address	Social Security Number	
City/State/Zip	Date of Birth	

Email	Home Phone / Cell Phone	
Relationship of Recipient ___ Child ___ Grandchild ___ Great Grandchild ___ Niece to Shareholder: ___ Nephew ___ Brother ___ Sister ___ Half-brother ___ Half-sister		
<b>If Recipient is a minor (under 18 years of age), please designate a custodian:</b>		
Custodian Name	Relationship to Recipient	Shareholder ID # (if a shareholder)
Address	Social Security Number	Date of Birth
City/State/Zip	Home Phone	
Email	Cell Phone	

RECIPIENT INFORMATION		RECIPIENT 3
Full Legal Name	Shareholder ID Number	Number of Shares/Trust Units I am gifting to this Recipient
Address	Social Security Number	
City/State/Zip	Date of Birth	
Email	Home Phone / Cell Phone	
Relationship of Recipient ___ Child ___ Grandchild ___ Great Grandchild ___ Niece to Shareholder: ___ Nephew ___ Brother ___ Sister ___ Half-brother ___ Half-sister		
<b>If Recipient is a minor (under 18 years of age), please designate a custodian:</b>		
Custodian Name	Relationship to Recipient	Shareholder ID # (if a shareholder)
Address	Social Security Number	Date of Birth
City/State/Zip	Home Phone	
Email	Cell Phone	

RECIPIENT INFORMATION		RECIPIENT 4
Full Legal Name	Shareholder ID Number	Number of Shares/Trust Units I am gifting to this Recipient
Address	Social Security Number	
City/State/Zip	Date of Birth	
Email	Home Phone / Cell Phone	
Relationship of Recipient ___ Child ___ Grandchild ___ Great Grandchild ___ Niece to Shareholder: ___ Nephew ___ Brother ___ Sister ___ Half-brother ___ Half-sister		
<b>If Recipient is a minor (under 18 years of age), please designate a custodian:</b>		
Custodian Name	Relationship to Recipient	Shareholder ID # (if a shareholder)
Address	Social Security Number	Date of Birth
City/State/Zip	Home Phone	
Email	Cell Phone	

**Person Gifting Shares Must Sign This Form in the Presence of a Notary**

**AFFIDAVIT of SHAREHOLDER GIFTING STOCK AND NOTARY**

I, \_\_\_\_\_, being first duly sworn, upon oath, do hereby depose and say:

1. I understand that the Alaska Native claims Settlement Act (43 U.S.C. 1606) permits a shareholder to give a gift of shares to a person who is a Native or a descendant of a Native and is the shareholder's child, grandchild, great-grandchild, niece, nephew, brother or sister. I will provide such other proof of qualification as Natives of Kodiak, Inc. (NOK) may request.
2. I attest that I am at least 18 years of age.
3. I wish to make a gift of shares to the recipient(s) shown herein.
4. I have designated a custodian for recipients who are minors and I direct that the custodian transfer the shares to the recipient when the recipient reaches the age of 18.
5. I understand that if there are taxes owed as a result of this transfer, Natives of Kodiak, Inc. will not be responsible for payment, and that payment of any such taxes will be either my responsibility as donor or the recipient's responsibility.
6. I understand that my gift places in the hands of the recipient all authority to transfer these shares by will or gift; that I will no longer have voting rights for these shares; that I will no longer receive dividends, distributions or other benefits for the shares that I am gifting.
7. I understand that by signing this affidavit, I am swearing under oath to the best of my knowledge and belief that everything stated herein is true, and that I am acting of my own free will and am not under any undue pressure, influence, or duress.
8. I affirm that I have not received anything of value nor was I promised anything of value as compensation or payment for the stock I wish to transfer.
9. I have read and understand the information provided in this Affidavit.

\_\_\_\_\_  
(Signature of Shareholder Gifting Stock)

DATED this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

STATE OF \_\_\_\_\_ )  
 ) ss:  
COUNTY/DISTRICT \_\_\_\_\_ )

**THIS IS TO CERTIFY** that on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_,

before me, personally appeared \_\_\_\_\_, to me known and known to

(Shareholder Gifting Stock)

me to be the identical individual described in and who executed the within and foregoing instrument, and acknowledged to me that he/she had executed the same freely and voluntarily for the uses and purposes therein mentioned.

**WITNESS** my hand and notary seal on the date and year last above written.

\_\_\_\_\_  
Notary Public in and for the State of \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

**Recipient Must Sign This Form in the Presence of a Notary**

**ACCEPTANCE BY RECIPIENT – GIFT OF SETTLEMENT COMMON STOCK**

I, \_\_\_\_\_, being first duly sworn, upon oath, do hereby depose and say:  
(Recipient Name)

1. I am (circle one) the **RECIPIENT** or **CUSTODIAN** of minor child: \_\_\_\_\_.  
(Custodian Name)  
I accept the gift of Natives of Kodiak, Inc. shares/trust units, including all the rights and responsibilities of being a shareholder of Natives of Kodiak, Inc.
2. I certify that I am (or, if I am the Custodian, the Recipient is) a Native or a descendant of a Native.
3. I have not (and, if I am the Custodian, neither I nor the recipient has) given or promised any consideration or anything of value in exchange for the making of this gift.
4. If I am not (or, if I am the Custodian, the Recipient is not) presently a shareholder of Natives of Kodiak, Inc., **I will provide to Natives of Kodiak, Inc. a W-9 Form** certifying my social security number before the shares are issued to me.
5. If I am the Custodian, I consent to my appointment as Custodian for the Recipient, without compensation, and agree that I will not use any money or other benefit received by me on behalf of the Recipient for my own benefit, except as reimbursement for reasonable expenses actually incurred for the support, maintenance, education and benefit of the Recipient. I understand that in dealing with custodian property I must observe the standard of care that would be observed by a prudent person dealing with property of another, that custodial property must be kept separate and distinct from all other property in a manner sufficient to identify it clearly as custodial property of the minor, and that a custodian may not receive compensation except upon approval by the superior court for unusual and extraordinary services. I will comply with all provisions of the Alaska Uniform Transfers to Minors Act, AS 13.46.

I hereby acknowledge receipt of \_\_\_\_\_ shares of Natives of Kodiak, Inc. and \_\_\_\_\_ units of the NOK Permanent Fund Trust as a gift from \_\_\_\_\_.

I understand that once this stock is transferred to me (or if I am the Custodian, the recipient) will become a shareholder in the Corporation, with all the rights and responsibilities which result from being a shareholder.

\_\_\_\_\_  
(Signature of Recipient)

DATED this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

STATE OF \_\_\_\_\_ )  
 ) ss:  
COUNTY/DISTRICT \_\_\_\_\_ )

**SUBSCRIBED** and **SWORN** to before me, the undersigned Notary Public, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for the State of \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

# Request for Taxpayer Identification Number and Certification

Give Form to the  
requester. Do not  
send to the IRS.

► Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ► _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
				-				-	
or									
Employer identification number									
				-					

## Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ►	Date ►
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*