

Acceptance of Inheritance of Stock Affidavit-Minor

I, _____ (Custodian's Legal Name), understand that (Recipient's Legal Name), is to receive _____ (# of Shares) shares of stock on behalf on of ______ (Name of Deceased Shareholder), the _____ (Relationship to Recipient).

I understand that the stock will be transferred by MTNT according to the Stock Will on record or AS.13.16.705(b).

I hereby affirm that the Recipient is an heir and/or descendent of a Native as defined in the Alaska Native Claims Settlement Act Amendments of 1971 (definition set forth below) and that I have not transferred or promised anything of value in exchange to obtain these shares on behalf of the Recipient. If this Acceptance of Inherited Stock is approved, I understand that I will become the custodian of ______ (# of Shares) shares of stock at MTNT, Ltd. Corporation on behalf of the Recipient.

The Alaska Native Claims Settlement Act defines "Native" as: (1) a citizen of the United States who is a person of 1/8 or more-degree Indian blood, Eskimo and/or combination thereof; (2) a lineal descendent of a Native or of an individual who would been a Native if such an individual where alive on December 8, 1971 or (3) an adoptee of a Native or of a descendent of a Native whose adoption occurred prior to his or her majority and is recognized at law in equity.

□ For the record, the Recipient is not an Alaska Native, Indian, Eskimo and/or decree of Native blood

I understand that the stock the Recipient receives in MTNT is restricted by provisions of the Alaska Native Claims Settlement Act and *cannot* be sold, used as collateral for a loan or be traded.

I will advise MTNT in writing of any changes which may affect the MTNT Stock Records such as address changes, name changes, etc.

I understand that by signing this affidavit I am swearing under oath to the best of my knowledge, believe that everything stated herein is true, know of no other fact which might affect who is entitled to the stock, that I am 18 years of age or older and that I am acting of my own free will and am not under any undue pressure, influence or duress.

Custodian's Signature:	Date:
STATE OF)) s) (Country or Judicial District)	S.
Subscribed, sworn to, and acknowledged b	efore me this Day of, 20
Notary's Signature: Notary Public in and for: My commission expires:	