



Stock Will (AS 13.16.705(b))
For the purpose of
Tanadgusix (TDX) Corporation Shares
of Stock

I, _____

Date of Birth: _____ Social Security Number: _____

Address: _____ City/State: _____ Zip: _____

declare that I am of sound mind and that I am executing this Will for the purpose of transferring my shares of stock in Tanadgusix Corporation.

I hereby devise and bequeath my shares of stock in Tanadgusix Corporation to the following persons: (If any person has preceded me in death, that person's shares are to be distributed in accordance with the provisions of AS Section 13.12.603. For purposes of applying AS 13.12.603 a person who refuses my stock shall be treated as if they have predeceased me.) I understand and agree that Tanadgusix Corporation will eliminate fractional shares when making this disposition.

Name	Social Security No.	Relationship	Percent of Shares
_____	_____	_____	_____%
_____	_____	_____	_____%
_____	_____	_____	_____%
_____	_____	_____	_____%
_____	_____	_____	_____%
_____	_____	_____	_____%

The total of the lines above must equal **100** %

On this _____ day of _____, 20_____, by my own free will and under no constraint or undue influence, I set forth my signature on this instrument and execute it for the purposes expressed.

Signature Date

State of _____
Judicial District/County _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____.

by _____.

Notary for _____
My Commission Expires: _____

If the Stock Will is not notarized it must be completed with the signatures of two witnesses. (See side 2)

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If your signature is not attested by a notary public the signatures of two witnesses must be provided. The two witnesses cannot be named as heirs on the will.

Witness Number One:

I, _____, Witness, sign my name to this instrument, and declare that the testator signs and executes this instrument as the last Will of the testator, and that the testator signs it willingly, and that in the presence and hearing of the testator I sign this Will as witness to the testator's signing, and that to the best of my knowledge the testator is of legal age or older, of sound mind, and is under no constraint or undue influence.

Signature of Witness

Date

Printed Name and Address of Witness Number One:

Name

Address

City

State

Zip

Witness Number Two:

I, _____, Witness, sign my name to this instrument, and declare that the testator signs and executes this instrument as the last will of the testator, and that the testator signs it willingly, and that in the presence and hearing of the testator, I sign this Will as witness to the testator's signing, and that to the best of my knowledge the testator is of legal age or older, of sound mind, and is under no constraint or undue influence.

Signature of Witness

Date

Printed Name and Address of Witness Number Two:

Name

Address

City

State

Zip