

Effective Date:	January 2019
To:	All Alutiiq Subcontractors
From:	Eileen Y. Mann, ARM, VP Risk Management/HSET
RE:	Subcontractor Online Due Diligence Registration

All subcontractors, prior to executing an agreement or contract with an Alutiiq subsidiary, must first register through our secure online subcontractor due diligence portal. An Alutiiq subsidiary is not permitted to award a subcontract until the subcontractor is registered in the portal and approved by Alutiiq’s Risk Management Team.

The registration process involves completing an application and uploading certain documents as outlined below. This registration process is designed to provide Alutiiq with key information about your business that allows us to confirm we are doing business with qualified companies and to get your company set up in our contract management and financial systems. We thank you in advance for registering in the portal and look forward to doing business with you.

HOW TO REGISTER AS AN ALUTIIQ APPROVED SUBCONTRACTOR:

Step 1: Register online at <https://duediligence.alutiiq.com/> and complete the application.

Step 2: Upload PDFs of the documents listed in the table below. Note that if you fail to upload all of the required documents we will be unable to process or approve your application.

NOTE: You must complete the registration process in one sitting. If the registration is not completed, your information will not be saved. Completing the application and uploading the documents should take approximately 30 minutes.

DOCUMENTS YOU WILL NEED TO REGISTER ONLINE:

After completing the due diligence application you will be asked to upload PDFs of the document listed in the below chart. It is advisable to gather PDFs of these documents prior to starting the online application process because (as noted above) the registration process must be completed in one sitting.

Subcontractors whose annual work for Alutiiq is anticipated to be **BELOW \$35,000** must upload the following documents at time of registration:

1. Completed IRS W-9 Form.
2. Subcontractor Insurance Verification Form and Current Certificate of Insurance. The insurance verification form follows this memo and is completed by your insurance broker or agent. The completed insurance verification form, along with the current COI, must be uploaded during your registration.

Subcontractors whose annual work for Alutiiq is anticipated to be **ABOVE \$35,000** must upload the following documents at time of registration:

1. Completed IRS W-9 Form.
2. Subcontractor Insurance Verification Form and Current Certificate of Insurance. The insurance verification form is attached and is completed by your insurance broker or agent. The completed insurance verification form, along with the current COI, must be uploaded during your registration.
3. Balance Sheet for the most recently completed fiscal year.
4. Letter from your Broker reporting your current Workers Compensation Experience Modification Rate (EMR) (a sample Broker Letter is attached). A NCCI Report stating your EMR is also acceptable.

When the review of your application is complete, you will receive an email notifying you that you are a registered/approved subcontractor. Please note that registration is good for one (1) year, and subcontractors will be required to update information annually.

NOTE: The one item that often slows our review and approval is the subcontractor’s submission of a non-compliant Certificate of Insurance. If your company is selected to work as a consultant or a subcontractor, our standard contract terms and conditions require very specific insurance. Standard insurance terms and conditions include:

Standard Insurance	Limits	Required Provisions
Workers Compensation (incl. Employers’ Liability)	Statutory limits	<ul style="list-style-type: none"> • Waiver of Subrogation
General Liability	\$1,000,000 per occurrence w/\$2,000,000 aggregate	<ul style="list-style-type: none"> • Additional Insured • Primary/Non-Contributory • Waiver of Subrogation
Auto Liability	\$1,000,000 per occurrence w/\$2,000,000 aggregate	<ul style="list-style-type: none"> • Additional Insured • Primary/Non-Contributory • Waiver of Subrogation

Other Coverages may be required where applicable:

Other Insurance Coverages	
Professional Liability	May be required for consultants, engineers, other professionals including medical professionals.
Cyber Liability	May be required for some IT contracts where Personally Identifiable Information (PII) is at risk.
Defense Based Act (DBA)	Required for contracts where the place of performance is OCONUS.
Pollution Liability	May be required for some construction and/or remediation contracts.
Marine Liability	May be required for contracts where performance is in a marine environment or scope of work involves work on vessels.

The insurance coverage types, and limits of coverage, may be amended or waived based on the proposed Scope of Work. Any amendments to our standard insurance requirements occurs during the contract negotiation phase where we propose any needed corrections to the insurance requirements to more precisely reflect the hazards of the proposed work. If your insurance program is different than the requirements noted above, please have your insurance broker contact us at DueDiligence@Alutiiq.com.

We thank you for registering with Alutiiq as one of our preferred subcontractors. We look forward to working with your company in the very near future.



Eileen Y. Mann, ARM, VP Risk Management/HSET
emann@alutiiq.com

P.S. If you have suggestions based on your registration experience regarding how we can make the process easier and more transparent to subcontractors, please contact me at DueDiligence@Alutiiq.com.

Effective Date:	January 1, 2019
To:	Insurance Broker or Agent
From:	Eileen Y. Mann, ARM, VP Risk Management/HSET
RE:	Verification of Subcontractor Insurance Coverage

All subcontractors, prior to executing an agreement or contract with Alutiiq, must first complete a short online due diligence process. This process includes verification that the subcontractor's insurance program meets certain standard terms and conditions. Those terms and conditions are as follows:

Standard Insurance	Limits	Required Provisions
Workers Compensation (incl. Employers' Liability)	Statutory limits	<ul style="list-style-type: none"> Waiver of Subrogation
General Liability	\$1,000,000 per occurrence w/\$2,000,000 aggregate	<ul style="list-style-type: none"> Additional Insured Primary/Non-Contributory Waiver of Subrogation
Auto Liability	\$1,000,000 per occurrence w/\$2,000,000 aggregate	<ul style="list-style-type: none"> Additional Insured Primary/Non-Contributory Waiver of Subrogation
Professional Liability (applicable for consulting and professional firms only)	\$2,000,000 per claim	<ul style="list-style-type: none"> Waiver of Subrogation (where available)

The insurance coverage types, and limits of coverage, may be amended or waived based on the proposed Scope of Work. Any amendments to our standard insurance requirements occurs during the contract negotiation phase where we propose any needed corrections to the insurance requirements to more precisely reflect the hazards of the proposed work. If your insurance program is different than the requirements noted above, please have your insurance broker contact us at DueDiligence@Alutiiq.com, otherwise, please complete the form on the following page and return a pdf copy to your client so that they may attach it to their record when they register in our due diligence portal. This is a time-sensitive request, so your soonest attention to this matter is much appreciated.



Eileen Y. Mann, ARM, VP Risk Management/HSET
Subcontractor Registration Program Administrator emann@alutiiq.com

Instructions: This form must be completed and signed by the subcontractor’s insurance broker or agent, and must be accompanied by a valid and current Certificate of Insurance (COI) that meets the requirements noted in the foregoing Subcontractor Registration Instruction memo and attached sample COI. Non-Compliant COIs will be rejected and the Subcontractor’s registration will not be approved.

1. BROKER/AGENT INFORMATION		
Today’s Date:		
Broker Company Name		
Mailing Address		
City, State, Zip		
Broker Contact Name		
Broker Contact Email/Phone		
2. CLIENT/INSURED INFORMATION		
Insured Company Name		
Mailing Address		
City, State, Zip		
Insured Company Contact Name		
Insured Company Contact Email/Phone		
3. INSURANCE PROGRAM INFORMATION		
<p>Note: Items a) through c) and insuring provisions noted in f) through h) are standard insurance terms and conditions. Unless specifically waived, these are the minimum requirements for all subcontractors. Additional coverages may be required depending on the scope or work.</p>		
a) General Liability	\$1,000,000 Per Occ/\$2,000,000 Agg	<input type="checkbox"/> Yes <input type="checkbox"/> No
b) Auto Liability	\$1,000,000 Per Occ/\$2,000,000 Agg	<input type="checkbox"/> Yes <input type="checkbox"/> No
c) Workers’ Comp/Employers Liability	Statutory Limits/\$1,000,000 Per	<input type="checkbox"/> Yes <input type="checkbox"/> No
d) Professional Liability/D&O	\$1,000,000 Per Occ/Claims Made	<input type="checkbox"/> Yes <input type="checkbox"/> No
e) Effective Dates		To:
f) Where required by written contract, do policies provide for Additional Insured status? If no, provide a supplemental memo with details.		<input type="checkbox"/> Yes <input type="checkbox"/> No
g) Where required by written contract, do policies provide for Primary/Non-Contributory status? If no, provide a supplemental memo with details.		<input type="checkbox"/> Yes <input type="checkbox"/> No
h) Where required by written contract, do policies provide for Waiver of Subrogation? If no, provide a supplemental memo with details.		<input type="checkbox"/> Yes <input type="checkbox"/> No
Broker Signature:		
Broker Printed Name/Title:		
Date:		

Request for Taxpayer Identification Number and Certification

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

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification (required): <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate	
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶	
	<input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.)		Requester's name and address (optional)
City, state, and ZIP code		
List account number(s) here (optional)		

SAMPLE

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number									

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

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).

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 on page 4.

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.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

Balance sheet example

SAMPLE

TEDDY FAB INC. BALANCE SHEET December 31, 2100

ASSETS

Current assets

Cash and cash equivalents	\$ 100,000
Accounts receivable	20,000
Inventory	15,000
Prepaid expense	4,000
Investments	10,000
Total current assets	149,000

Property and equipment

Land	24,300
Buildings and improvements	250,000
Equipment	50,000
Less accumulated depreciation	(5,000)

Other assets

Intangible assets	4,000
Less accumulated amortization	(200)

Total assets \$ 472,100

LIABILITIES AND SHAREHOLDERS' EQUITY

Current liabilities

Accounts payable	\$ 30,000
Notes payable	10,000
Accrued expenses	5,000
Deferred revenue	2,000
Total current liabilities	47,000

Long-term debt 200,000

Total liabilities 247,000

Shareholders' Equity

Common stock	10,000
Additional paid-in capital	20,000
Retained earnings	197,100
Treasury stock	(2,000)

Total liabilities and shareholders' equity \$ 472,100



MARSH & MCLENNAN
AGENCY

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December 18, 2018

Eileen Terwilliger
Vice President of Risk Management
Afognak Native Corporation
3909 Arctic Boulevard, Suite 400
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Subject: Experience Modification Rating

Please find experience modification ratings as calculated by the National Council of Compensation Insurance applicable for Afognak Native Corporation, Alutiiq, LLC, and all Alutiiq owned or operated subsidiaries as follows:

Effective	12/31/2018 through 12/30/2019	.58
Effective	12/31/2017 through 12/30/2018	.75
Effective	12/31/2016 through 12/30/2017	.76
Effective	12/31/2015 through 12/30/2016	.63
Effective	12/31/2014 through 12/30/2015	.73

Please note the EMR is applicable to the parent corporation and all subsidiaries and as such is not specific to the experience of any one entity. The workers compensation insurance carrier is ACE American Insurance Company.

Please advise should you have any questions.

Sincerely,

Deidre Moore, CIC, CRM
Vice President