

**Report of Organizational Actions
 Affecting Basis of Securities**

► See separate instructions.

Part I Reporting Issuer

1 Issuer's name SEALASKA CORPORATION		2 Issuer's employer identification number (EIN) 92-0042296	
3 Name of contact for additional information MARK POPLIS	4 Telephone No. of contact 907-586-1512	5 Email address of contact	
6 Number and street (or P.O. box if mail is not delivered to street address) of contact 1 SEALASKA PLZ STE 400		7 City, town, or post office, state, and Zip code of contact JUNEAU AK 99801	
8 Date of action 4/13/2015 (REVISED FORM)		9 Classification and description ALL SEALASKA CORPORATION STOCK CLASSES A,B,C,D,E AND L	
10 CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)

Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.

14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ► **SEALASKA PREVIOUSLY POSTED A FORM 8937 CONCERNING THE APRIL 13, 2015 DISTRIBUTION. THE FORM WAS PREPARED BASED ON ESTIMATES OF 2015 TAXABLE INCOME AND EARNINGS AND PROFITS AS OF APRIL 13, 2015. SEALASKA HAS SINCE UPDATED THOSE ESTIMATES AND NOW BELIEVES THIS FORM 8937 IS NO LONGER REQUIRED SINCE THE APRIL AND DECEMBER 2015 DISTRIBUTIONS WILL BE REPORTED AS TAXABLE ON THE 2015 FORMS 1099-DIV.**

15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis ► _____

16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ► _____

Part II Organizational Action (continued)

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶ _____

18 Can any resulting loss be recognized? ▶ _____

19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ▶ _____

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature ▶ Mark Poplis Date ▶ 2/3/2016

Print your name ▶ **MARK POPLIS** Title ▶ **TAX DIRECTOR**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no.			