

Your partner in giving

## Restricted and Control Stock Questionnaire

Please complete this questionnaire to assist us determining the proper liquidation of restricted securities by National Philanthropic Trust (NPT).

If you need assistance, call (888) 878-7900 or send an email to <a href="mailto:npt@nptrust.org">npt@nptrust.org</a>.

Mr. Mrs. Ms. Dr.	
First Name, MI, Last Name	Account #
Security Name (Company)	Symbol Price
 Email	Telephone #
1. How many shares do you wish to contribu	te to National Philanthropic Trust?
2. Are you or have you been in the last 90 day than 10% of the outstanding shares of the co	ys an officer, director, control person or affiliate, or holder of more ompany?
Yes No	If yes, check all that apply:
I am (have been in the last 90 days) a memb I am (have been in the last 90 days) a relative of	
I am (have been in the last 90 days) a memb I am (have been in the last 90 days) a relative of I am (have been in the last 90 days) a relative of	per of the controlling group of the Stock Issuer r spouse of a control person who lives in the same home as a control person f a control person's spouse who lives in the same house as a control person
I am (have been in the last 90 days) a memb I am (have been in the last 90 days) a relative of I am (have been in the last 90 days) a relative of 3. Have you purchased any of the company s	per of the controlling group of the Stock Issuer r spouse of a control person who lives in the same home as a control person f a control person's spouse who lives in the same house as a control person
I am (have been in the last 90 days) a member I am (have been in the last 90 days) a relative of I am (have	over of the controlling group of the Stock Issuer or spouse of a control person who lives in the same home as a control person of a control person's spouse who lives in the same house as a control person otock in the last six months?  you purchase and what were the dates?  own?  ts, estates, corporations and organizations in which you or your family of which you or any family member serves as Trustee, Executor or in

## **B.** Securities

7. Is there Yes	a lege No	end on the certificate(s)?  If yes, what does the legend(s) say, and in whose name have the securities been issued? (Provide a
copy of the	e certifi	cate.)
Certificate	Date:	Certificate #
8. Is there sale of the		rent registration statement requiring delivery of a prospectus in connection with the proposed rities?
Yes	No	If yes, please provide the date of prospectus:
		agreements (e.g., a shareholder's agreement or registration rights agreement), contractual top transfer orders relating to these securities?
Yes	No	If yes, please explain here. Also, obtain a copy and send it along with this questionnaire.
10. Are yo		ossession of material non-public information with respect to the issuer of the shares ed?
Yes	No	
	-	rities acquired:hares acquired:
13. From	whom	were the securities acquired?
14. Was th	ne pur	chase price paid in full on acquisition date?
Yes	No	If yes, you may skip to Question 19.
price, or b installmer	oy ente nt purc	of the purchase price was paid by a promissory note or other obligation to pay the purchase ering into an installment purchase contract, was the note or obligation payable to, or the chase contract entered into with, the issuer of the securities or an affiliate (including an officer ne issuer?
Yes	No	If no, skip to Question #19. If yes, provide date the obligation was paid in full:
16. Did th	e oblig	gation provide for recourse against you?
Yes	No	
17. Was th	ne obli	gation secured by collateral other than these securities?
Yes	No	If no, you may skip to Question #19.
18. What i	is the v	value of the collateral?

## D. Acquisition of Securities

19. How did you acquire the securities? (check only one)					
Merger or company populied					
Name of company acquired:					
Were you an affiliate of the acquired company? Yes No					
If yes, when did you cease to be an affiliate?					
Private placement					
From whom?					
Relationship to issuer:					
In lieu of payment for services					
Describe services:					
Date services completed:					
Partnership distribution					
Name of partnership:					
Stock dividend, stock split, reverse split or re-capitalization					
Provide date and description of acquisition of original securities:					
Gift, pledge, or from a trust or estate When and how did the prior owner acquire the securities?					
Other					
Please decribe:					
E. Securities Sold During the Past Three Months					
<ul><li>20. Have you or any person directly or indirectly related to you sol three months?</li><li>(This includes any donee, donor, trust, estate, corporation, partnership</li></ul>	or other organization ir	n which you or your family			
has a beneficial interest or of which your or your family is an Executor, or any person with whom you have acted in concert for the purpose of convertible are included in the class of securities intended to be sold.)					
Yes No If yes, please provide the following details:					
Securities sold by:	# of shares sold	Date of sale			
Name of Issuer's Counsel	Phone				

Name	Phone
Email	
6. Acknowledgment of Terms	
the best of my knowledge. I understand National Ph financial service firm/company in selling these secur any misinformation I provide or for any losses rela and Control Stock Questionnaire. I authorize Nation the Stock Issuer's Legal and/or Compliance Departr	tricted and Control Stock Questionnaire honestly and to ilanthropic Trust will use this information to assist me or the ities. I will not hold National Philanthropic Trust liable for ted to transactions initiated in reliance upon this Restricted al Philanthropic Trust or its agent or representative to contact ment in reference to my contribution of securities to National
Philanthropic Trust.	

National Philanthropic Trust | 165 Township Line Road, Suite 1200 | Jenkintown, PA 19046 | npt@nptrust.org