

ATTACHMENT 16C: TYPE OF OWNERSHIP ENTITY—LIMITED LIABILITY COMPANY

NAME OF OWNERSHIP ENTITY: _____

1. Provide all of the following information for **each of the following**: (i) all governors/directors, (ii) all members and (iii) all managers/officers of the Ownership Entity (*complete 2.A. if any member and/or manager identified below is a partnership; complete 2.B. if any member and/or manager identified below is a corporation; and/or complete 2.C. if any member and/or manager identified below is a limited liability company*). (attach additional pages if needed to provide complete information)

GOVERNORS/DIRECTORS	MEMBERS <i>(indicate the Managing Member(s), if any)</i>	MANAGERS/OFFICERS <i>(indicate the Chief Manager(s), if any)</i>
Name: _____	Name: _____	Name: _____
Title: _____	Type of Entity: _____	Type of Entity: _____
Type of Entity: _____	Address: _____	State of Formation: _____
Address: _____	Telephone No.: _____	Address: _____
Telephone No.: _____	Name: _____	Telephone No.: _____
Name: _____	Type of Entity: _____	Name: _____
Title: _____	Address: _____	Type of Entity: _____
Type of Entity: _____	Telephone No.: _____	State of Formation: _____
Address: _____	Name: _____	Address: _____
Telephone No.: _____	Type of Entity: _____	Telephone No.: _____
Name: _____	Address: _____	Name: _____
Title: _____	Telephone No.: _____	Type of Entity: _____
Type of Entity: _____	Name: _____	State of Formation: _____
Address: _____	Type of Entity: _____	Address: _____
Telephone No.: _____	Address: _____	Telephone No.: _____
	Telephone No.: _____	Name: _____
		Type of Entity: _____
		State of Formation: _____
		Address: _____
		Telephone No.: _____

2. A. If any member and/or manager identified in 1. above is itself a partnership (limited, general, or limited liability), provide all of the following information for **each general partner** of any member and/or manager identified as a partnership in 1. (*attach additional pages if needed to provide complete information*).

(i.) Name of General Partner: _____

Address: _____

Telephone: (_____) _____

Ownership: _____%

Type of entity: individual; partnership (*complete 3.A.(i) below*)

corporation (*complete 3.A.(ii) below*)

limited liability company (*complete 3.A.(iii) below*)

State of Formation: _____

(ii.) Name of General Partner: _____

Address: _____

Telephone: (_____) _____

Ownership: _____%

Type of entity: individual; partnership (*complete 3.A. (i) below*)

corporation (*complete 3.A. (ii) below*)

limited liability company (*complete 3.A.(iii) below*)

State of Formation: _____

(iii).Name of General Partner: _____

Address: _____

Telephone: (_____) _____

Ownership: _____%

Type of entity: individual; partnership (*complete 3.A. (i) below*)

corporation (*complete 3.A. (ii) below*)

limited liability company (*complete 3.A.(iii) below*)

State of Formation: _____

2. B. If any member and/or manager identified in 1. above is itself a corporation, provide all of the following information for **each of the following**: (i) all officers, (ii) all directors and (iii) all stockholders with a 10% interest or more in each member and/or manager identified as a corporation in 1. (*complete 3.B.(i) if any officer, director and/or stockholder identified below is a partnership; complete 3.B.(ii) if any officer, director and/or stockholder identified below is a corporation; and/or complete 3.B.(iii) if any officer, director and/or stockholder identified below is a limited liability company*). (attach additional pages if needed to provide complete information)

OFFICERS	DIRECTORS	STOCKHOLDERS
Name: _____ Title: _____ Type of Entity: _____ Address: _____ Telephone No.: _____	Name: _____ Type of Entity: _____ Address: _____ Telephone No.: _____	Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____
Name: _____ Title: _____ Type of Entity: _____ Address: _____ Telephone No.: _____	Name: _____ Type of Entity: _____ Address: _____ Telephone No.: _____	Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____
Name: _____ Title: _____ Type of Entity: _____ Address: _____ Telephone No.: _____	Name: _____ Type of Entity: _____ Address: _____ Telephone No.: _____	Name: _____ Type of Entity: _____ State of Formation: _____ Address: _____ Telephone No.: _____

- Check here if no stockholders are listed above because no single stockholder owns a 10% or greater interest in the corporation for which this information is provided.

2. C. If any member and/or manager identified in 1. above is itself a limited liability company, provide all of the following information for **each of the following**: (i) all governors/directors, (ii) all members and (iii) all managers/officers of each member and/or manager identified below as a limited liability company in 1. (complete 3.C.(i) if any member and/or manager identified below is a partnership; complete 3.C.(ii) if any member and/or manager identified below is a corporation; and/or complete 3.C.(iii) if any member and/or manager identified below is a limited liability company). (attach additional pages if needed to provide complete information)

GOVERNORS/DIRECTORS

Name:

Title:

Type of Entity:

Address:

Telephone No.:

Name:

Title:

Type of Entity:

Address:

Telephone No.:

Name:

Title:

Type of Entity:

Address:

Telephone No.:

MEMBERS

(indicate the Managing Member(s), if any)

Name:

Type of Entity:

Address:

Telephone No.:

Name:

Type of Entity:

Address:

Telephone No.:

Name:

Type of Entity:

Address:

Telephone No.:

MANAGERS/OFFICERS

(indicate the Chief Manager(s), if any)

Name:

Type of Entity:

State of Formation:

Address:

Telephone No.:

Name:

Type of Entity:

State of Formation:

Address:

Telephone No.:

Name:

Type of Entity:

State of Formation:

Address:

Telephone No.:

Indicate if the LLC listed above is: member managed manager managed board managed

3. A. (i) If any general partner identified in 2.A. above is itself a partnership (limited, general, or limited liability), provide all of the following information for **each general partner** of any general partner identified as a partnership in 2.A. (*attach additional pages if needed to provide complete information*).

a. Name of General Partner: _____

Address: _____

Telephone: (_____) _____

Ownership: _____%

Type of entity: individual; partnership; corporation; limited liability company

State of Formation: _____

b. Name of General Partner: _____

Address: _____

Telephone: (_____) _____

Ownership: _____%

Type of entity: individual; partnership; corporation; limited liability company

State of Formation: _____

c. Name of General Partner: _____

Address: _____

Telephone: (_____) _____

Ownership: _____%

Type of entity: individual; partnership; corporation; limited liability company

State of Formation: _____

3. A. (ii) If any general partner identified in 2.A. above is itself a corporation, provide all of the following information for **each of the following**: (i) all officers, (ii) all directors and (iii) all stockholders with a 10% interest or more in any general partner identified as a corporation in 2.A. (*attach additional pages if needed to provide complete information*).

OFFICERS	DIRECTORS	STOCKHOLDERS
Name: <hr/> Title: <hr/> Type of Entity: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/>	Name: <hr/> Type of Entity: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/>	Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> <hr/> Address: <hr/> <hr/> Telephone No.: <hr/>
Name: <hr/> Title: <hr/> Type of Entity: <hr/> <hr/> Address: <hr/> <hr/> Telephone No.: <hr/>	Name: <hr/> Type of Entity: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/>	Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> <hr/> Address: <hr/> <hr/> Telephone No.: <hr/>
Name: <hr/> Title: <hr/> Type of Entity: <hr/> <hr/> Address: <hr/> <hr/> Telephone No.: <hr/>	Name: <hr/> Type of Entity: <hr/> Address: <hr/> <hr/> Telephone No.: <hr/>	Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> <hr/> Address: <hr/> <hr/> Telephone No.: <hr/>

Check here if no stockholders are listed above because no single stockholder owns a 10% or greater interest in the corporation for which this information is provided.

3. A. (iii) If any general partner identified in 2.A. above is itself a limited liability company, provide all of the following information for **each of the following**: (i) all governors/directors, (ii) all members and (iii) all managers/officers of any general partner identified as a limited liability company in 2.A. (*attach additional pages if needed to provide complete information*).

GOVERNORS/DIRECTORS	MEMBERS <i>(indicate the Managing Member(s), if any)</i>	MANAGERS/OFFICERS <i>(indicate the Chief Manager(s), if any)</i>
Name: _____	Name: _____	Name: _____
Title: _____	Type of Entity: _____	Type of Entity: _____
Type of Entity: _____	Address: _____	State of Formation: _____
Address: _____	Telephone No.: _____	Address: _____
Telephone No.: _____	Name: _____	Telephone No.: _____
Name: _____	Type of Entity: _____	Name: _____
Title: _____	Address: _____	Type of Entity: _____
Type of Entity: _____	Telephone No.: _____	State of Formation: _____
Address: _____	Name: _____	Address: _____
Telephone No.: _____	Type of Entity: _____	Telephone No.: _____
Name: _____	Address: _____	Name: _____
Title: _____	Telephone No.: _____	Type of Entity: _____
Type of Entity: _____		State of Formation: _____
Address: _____		Address: _____
Telephone No.: _____		Telephone No.: _____

Indicate if the LLC listed above is: member managed manager managed board managed

3. B. (i) If any officer, director and/or stockholder identified in 2.B. above is itself a partnership (limited, general, or limited liability), provide all of the following information for **each general partner** of any officer, director and/or stockholder identified as a partnership in 2.B. (*attach additional pages if needed to provide complete information*).

a. Name of General Partner: _____

Address: _____

Telephone: (_____) _____

Ownership: _____%

Type of entity: individual partnership corporation limited liability company

State of Formation: _____

b. Name of General Partner: _____

Address: _____

Telephone: (_____) _____

Ownership: _____%

Type of entity: individual partnership corporation limited liability company

State of Formation: _____

c. Name of General Partner: _____

Address: _____

Telephone: (_____) _____

Ownership: _____%

Type of entity: individual partnership corporation limited liability company

State of Formation: _____

3. B. (ii) If any officer, director and/or stockholder identified in 2.B. above is itself a corporation, provide all of the following information for **each of the following**: (i) all officers, (ii) all directors and (iii) all stockholders with a 10% interest or more in any officer, director and/or stockholder identified as a corporation in 2.B. (*attach additional pages if needed to provide complete information*).

OFFICERS

Name:

Title:

Type of Entity:

Address:

Telephone No.:

Name:

Title:

Type of Entity:

Address:

Telephone No.:

Name:

Title:

Type of Entity:

Address:

Telephone No.:

DIRECTORS

Name:

Type of Entity:

Address:

Telephone No.:

Name:

Type of Entity:

Address:

Telephone No.:

Name:

Type of Entity:

Address:

Telephone No.:

STOCKHOLDERS

Name:

Type of Entity:

State of Formation:

Address:

Telephone No.:

Name:

Type of Entity:

State of Formation:

Address:

Telephone No.:

Name:

Type of Entity:

State of Formation:

Address:

Telephone No.:

3. B. (iii) If any officer, director and/or stockholder identified in 2.B. above is itself a limited liability company, provide all of the following information for **each of the following**: (i) all governors/directors, (ii) all members and (iii) all managers/officers of any officer, director and/or stockholder identified as a limited liability company identified in 2.B. (*attach additional pages if needed to provide complete information*).

GOVERNORS/DIRECTORS	MEMBERS <i>(indicate the Managing Member(s), if any)</i>	MANAGERS/OFFICERS <i>(indicate the Chief Manager(s), if any)</i>
Name: _____	Name: _____	Name: _____
Title: _____	Type of Entity: _____	Type of Entity: _____
Type of Entity: _____	Address: _____	State of Formation: _____
Address: _____	Telephone No.: _____	Address: _____
Telephone No.: _____	Name: _____	Telephone No.: _____
Name: _____	Type of Entity: _____	Name: _____
Title: _____	Address: _____	Type of Entity: _____
Type of Entity: _____	Telephone No.: _____	State of Formation: _____
Address: _____	Name: _____	Address: _____
Telephone No.: _____	Type of Entity: _____	Telephone No.: _____
Name: _____	Address: _____	Name: _____
Title: _____	Telephone No.: _____	Type of Entity: _____
Type of Entity: _____	Name: _____	State of Formation: _____
Address: _____	Type of Entity: _____	Address: _____
Telephone No.: _____	Address: _____	Telephone No.: _____
	Telephone No.: _____	

Indicate if the LLC listed above is: member managed manager managed board managed

3. C. (i) If any member and/or manager identified in 2.C. above is itself a partnership (limited, general, or limited liability), provide all of the following information for **each general partner** of any member and/or manager identified as a partnership in 2.C. (*attach additional pages if needed to provide complete information*).

a. Name of General Partner: _____

Address: _____

Telephone: (_____) _____

Ownership: _____%

Type of entity: individual partnership corporation limited liability company

State of Formation: _____

b. Name of General Partner: _____

Address: _____

Telephone: (_____) _____

Ownership: _____%

Type of entity: individual partnership corporation limited liability company

State of Formation: _____

c. Name of General Partner: _____

Address: _____

Telephone: (_____) _____

Ownership: _____%

Type of entity: individual partnership corporation limited liability company

State of Formation: _____

3. C. (ii) If any member and/or manager identified in 2.C. above is itself a corporation, provide all of the following information for **each of the following**: (i) all officers, (ii) all directors and (iii) all stockholders with a 10% interest or more in any member and/or manager identified as a corporation in 2.C. (*attach additional pages if needed to provide complete information*).

OFFICERS	DIRECTORS	STOCKHOLDERS
Name: <hr/> Title: <hr/> Type of Entity: <hr/> Address: <hr/> Telephone No.: <hr/>	Name: <hr/> Type of Entity: <hr/> Address: <hr/> Telephone No.: <hr/>	Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> Telephone No.: <hr/>
Name: <hr/> Title: <hr/> Type of Entity: <hr/> Address: <hr/> Telephone No.: <hr/>	Name: <hr/> Type of Entity: <hr/> Address: <hr/> Telephone No.: <hr/>	Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> Telephone No.: <hr/>
Name: <hr/> Title: <hr/> Type of Entity: <hr/> Address: <hr/> Telephone No.: <hr/>	Name: <hr/> Type of Entity: <hr/> Address: <hr/> Telephone No.: <hr/>	Name: <hr/> Type of Entity: <hr/> State of Formation: <hr/> Address: <hr/> Telephone No.: <hr/>

- Check here if no stockholders are listed above because no single stockholder owns a 10% or greater interest in the corporation for which this information is provided.

3. C. (iii) If any member and/or manager identified in 2.C. above is itself a limited liability company, provide all of the following information for **each of the following**: (i) all governors/directors, (ii) all members and (iii) all managers/officers of any member and/or manager identified as a limited liability company in 2.C. (attach additional pages if needed to provide complete information).

GOVERNORS/DIRECTORS

Name:

Title:

Type of Entity:

Address:

Telephone No.:

Name:

Title:

Type of Entity:

Address:

Telephone No.:

Name:

Title:

Type of Entity:

Address:

Telephone No.:

MEMBERS
(indicate the Managing
Member(s), if any)

Name:

Type of Entity:

Address:

Telephone No.:

Name:

Type of Entity:

Address:

Telephone No.:

Name:

Type of Entity:

Address:

Telephone No.:

MANAGERS/OFFICERS
(indicate the Chief
Manager(s), if any)

Name:

Type of Entity:

State of Formation:

Address:

Telephone No.:

Name:

Type of Entity:

State of Formation:

Address:

Telephone No.:

Name:

Type of Entity:

State of Formation:

Address:

Telephone No.:

- Indicate if the LLC listed above is: member managed manager managed board managed