## ATTACHMENT 15C: TYPE OF OWNERSHIP ENTITY - <br> LIMITED LIABILITY COMPANY

(Submit pages of the applicable attachment and the Ownership Organizational Chart for which information has been provided. Blank pages should not be uploaded in THOMAS.)

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

Name:
$\qquad$

Name:
$\qquad$

Name:
Address:

Telephone No.:
$\qquad$

Type of Entity:
State of Formation:
Address:

Telephone No.:

## MEMBERS

Indicate the Managing Member(s), if any
Name:

Type of Entity:
State of Formation:

Address:

Telephone No.:

Name:
Type of Entity:
State of Formation:
Address:

Telephone No.:

Name:
$\qquad$

Indicate if the LLC listed above is: $\square$ Member Managed $\square$ Manager Managed $\square$ Board

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.:
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: $\square$ individual partnership (complete 3.A.(i) below)
$\square$ corporation (complete 3A.(ii) below)
$\square$ limited liability company (complete 3.A.(iii) below)
State of Formation: $\qquad$
(ii) Name of General Partner:

Address:

Telephone: (__ O_ Ownership:__ \%
Type of entity: $\square$ individual partnership (complete 3.A.(i) below)
$\square$ corporation (complete 3A.(ii) below)
$\square$ limited liability company (complete 3.A.(iii) below)
State of Formation: $\qquad$
(iii) Name of General Partner:

Address:

Telephone: $\square$ ) Ownership: $\qquad$
Type of entity: $\square$ individual $\square$ partnership (complete 3.A.(i) below)
corporation (complete 3A.(ii) below)
$\square$ limited liability company (complete 3.A.(iii) below)
State of Formation: $\qquad$
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

Name:

## Title:

Address:

Telephone No.:

Name:
Title:
Address:

Telephone No.:

Name:
Title:
Address:

Telephone No.:
$\qquad$

DIRECTORS
Name:
Address:

Telephone No.:

Name:
Address:

Telephone No.:

Name:
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:
Address:

Telephone No.:

## Name:

Address:
$\qquad$
Telephone No.:

## Name:

## Address:

Telephone No.:
$\longrightarrow \longrightarrow$

| MEMBERS <br> Indicate the Managing <br> Member(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.:

## 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: $\square$ Member Managed Manager Managed $\quad \square$ Board
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. If any general partner identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)
a. Name of General Partner:

Address:

Telephone: $\qquad$ ) $\qquad$ Ownership: $\qquad$ \%

Type of entity: $\square$ individual $\square$ partnership $\square$ corporation limited liability company
State of Formation: $\qquad$
b. Name of General Partner:

Address:
Telephone: $\square$ ) Ownership: $\qquad$ \%

Type of entity: $\square$ individual $\square$ partnership corporation limited liability company
State of Formation:
c. Name of General Partner:

Address:
$\begin{array}{lll}\text { Telephone: }(\square) & \text { Ownership:_} \\ \text { Type of entity: } \square \text { individual } \quad \square \text { partnership } \quad \square \text { corporation } \quad \square \text { limited liability company }\end{array}$
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. If any officer, director of stockholder identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

## OFFICERS

Name:
Title:
Address:

## Telephone No.:

Name:

## Title:

Address:

Telephone No.:

Name:

## Title:

Address:

## Telephone No.:

$\qquad$

Name:
Address:

Telephone No.:

## DIRECTORS

Name:
Address:

Telephone No.:

Name:

## Address:

Telephone No.:
$\qquad$
-

## 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.:

$\square$ 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. If any member or manager identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

## GOVERNORS/DIRECTORS

## Name:

Address:
$\qquad$
Telephone No.:

Name:

| Address: |
| :--- |
| Telephone No.: |

## Name:

## Address:

## Telephone No.:

Indicate if the LLC listed above is:

MEMBERS
Indicate the Managing Member(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.:
$\longrightarrow$

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.:
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. If any general partner identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)
a. Name of General Partner:

Address: $\qquad$
Telephone: (___ Ownership:___ $\%$
Type of entity: $\square$ individual $\square$ partnership corporation limited liability company
State of Formation:
b. Name of General Partner:

Address:

Telephone: (____Ownership: $\qquad$ \%

Type of entity: $\square$ individual $\square$ partnership corporation limited liability company
State of Formation:
c. Name of General Partner:

Address:

Telephone: (___O_ Ownership:___
Type of entity: $\square$ individual $\square$ 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. If any officer, director or stockholder identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

## OFFICERS

Name:

## Title:

Address:

Telephone No.:

Name:

## Title:

Address:

Telephone No.:

Name:

## Title:

Address:

## Telephone No.:

$\qquad$

Name:
Address:

Telephone No.:

## DIRECTORS

Name:
Address:

Telephone No.:

Name:

Address:

Telephone No.:
$\qquad$
$\qquad$
$\qquad$

## 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.:

$\square$ 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. 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. If any member or manager identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

## GOVERNORS/DIRECTORS

Name:

## Address:

Telephone No.:

Name:

## Address:

Telephone No.:

Name:

## Address:

Telephone No.:
$\qquad$

Type of Entity:
State of Formation:

## Address:

## Telephone No.:

MEMBERS Indicate the Managing Member(s), if any
Name:

Type of Entity:
State of Formation:
Address:

Telephone No.:

Name:

Type of Entity:
State of Formation:

Address:

Telephone No.:

Name:

## 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.:
$\square$ Board
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. If any general partner identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)
a. Name of General Partner:

Address: $\qquad$
Telephone: (___ Ownership:___ $\%$
Type of entity: $\square$ individual $\square$ partnership $\square$ corporation limited liability company
State of Formation:
b. Name of General Partner:

Address:

Telephone: (_) $\qquad$ Ownership: $\qquad$ \%

Type of entity: $\square$ individual $\square$ partnership corporation limited liability company
State of Formation:
c. Name of General Partner:

Address:

Telephone: (______ Ownership:___
Type of entity: $\square$ individual $\square$ 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. If any officer, director or stockholder identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

## OFFICERS

Name:

## Title:

Address:
$\qquad$
Name:

## Title:

Address:

Telephone No.:

Name:
Title:
Address:

Telephone No.: $\qquad$

DIRECTORS
Name:

## Address:

Telephone No.:

Name:
Address:

Telephone No.:
Name:

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.:

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. If any member or manager identified below is not an individual or a corporation you must provide additional information, in the relevant form based on the type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

## GOVERNORS/DIRECTORS

## Name:

Address:
$\qquad$
Telephone No.:

## Name:

| Address: |
| :--- |
| Telephone No.: |

## Name:

## Address:

## Telephone No.:

$\qquad$

| $\overline{\text { Type of Entity: }}$ |
| :--- |
| State of Formation: |
| Address: |
| Telephone No.: |

MEMBERS
Indicate the Managing Member(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: $\square$ Member Managed $\square$ Manager Managed $\square$ Board

