ATTACHMENT 15B: TYPE OF OWNERSHIP ENTITY— CORPORATION

(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:

Provide all of the following information for <u>each of the following:</u> (i) <u>all officers</u>, (ii) <u>all directors</u> and (iii) <u>all stockholders with a</u> <u>10% interest or more</u> in the corporation that is the Ownership Entity (*complete 2.A. below if any officer, director and/or stockholder is a partnership; complete 2.B. below if any officer, director and/or stockholder is a corporation; and/or complete 2.C. below if any officer, director and/or stockholder is a limited liability company). (attach additional pages if needed to provide complete information.)*

| DIRECTORS | STOCKHOLDERS |
|----------------|--|
| Name: | Name: |
| Address: | Type of Entity: |
| Talanhana Na . | State of Formation: |
| Telephone No.: | Address: |
| Nome: | Telephone No.: |
| | |
| | Name: |
| Telephone No.: | Type of Entity: |
| | State of Formation: |
| Name: | Address: |
| Address: | Telephone No.: |
| Telephone No.: | Name: |
| | Type of Entity: |
| | State of Formation: |
| | Address: |
| | |
| | Telephone No.: |
| | Name: Address: Telephone No.: Name: Address: Telephone No.: 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. A. If any officer, director and/or stockholder identified in 1. above is itself a partnership (limited, general, or limited liability), provide all of the following information for <u>each general partner</u> of any officer, director and/or stockholder 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 (<i>complete 3.A.(i) below</i>) | |
| | | □ corporation (<i>complete 3A.(ii</i>) below) | |
| | | □ limited liability company (<i>complete 3.A.(iii) below</i>) | |
| | State of Formation: | | |
| (ii) | Name of General Pa | rtner: | |
| | Address: | | |
| | Telephone: (| Ownership:% | |
| | Type of entity: | □ individual □ partnership (<i>complete 3.A.(i) below</i>) | |
| | | □ corporation (<i>complete 3A.(ii) below</i>) | |
| | | □ limited liability company (<i>complete 3.A.(iii) below</i>) | |
| | State of Formation: | | |
| (iii) | Name of General Pa | rtner: | |
| | Address: | | |
| | Telephone: (| Ownership:% | |
| | Type of entity: | □ individual □ partnership (<i>complete 3.A.(i) below</i>) | |
| | | □ corporation (<i>complete 3A.(ii</i>) below) | |
| | | □ limited liability company (<i>complete 3.A.(iii) below</i>) | |
| | State of Formation: | | |

2. B. If any officer, director and/or stockholder identified in 1. above is a corporation, provide all of the following information for <u>each of the following</u>: (i) <u>all officers</u>, (ii) <u>all directors</u> and (iii) <u>all stockholders with a 10% interest or more</u> in each officer, director and/or stockholder 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 stockholder identified below is a corporation and/or stockholder identified below is a corporation (<i>attach additional pages if needed to provide complete information*.)

| OFFICERS Name: | DIRECTORS Name: | STOCKHOLDERS Name: |
|-------------------|--------------------|---------------------------------|
| Title: | Address: | Type of Entity: |
| Address: | Telephone No.: | State of Formation: |
| Telephone No.: | | Address: |
| Name: | Name: | Telephone No.: |
| Title: | Address: | |
| Address: | Telephone No.: | Name: |
| | | State of Formation: |
| Telephone No.: | Name: | Address: |
| Name: | Address: | Telephone No.: |
| Title: | | |
| Address: | Telephone No.: | Name: |
| Telephone No.: | | 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 officer, director and/or stockholder identified in 1. above is 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 officer, director and/or stockholder identified 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 that does not meet the requirements of Part VII.A.6.d. of the 2016 QAP; 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.)*

| MEMBERS Indicate the Managing Member(s), if any | MANAGERS/OFFICERS Indicate the Chief Manager(s), if any |
|---|---|
| Name: | Name: |
| Type of Entity: | Type of Entity: |
| State of Formation: | State of Formation: |
| Address: | Address: |
| Telephone No.: | Telephone No.: |
| | |
| Name: | Name: |
| Type of Entity: | Type of Entity: |
| State of Formation: | State of Formation: |
| Address: | Address: |
| Telephone No : | Telephone No.: |
| | |
| - Name: | Name: |
| Type of Entity: | Type of Entity: |
| State of Formation: | State of Formation: |
| Address: | Address: |
| Telephone No.: | |
| | _ |
| | |
| | |
| is: 🗖 Member Managed 📮 Manager | Managed 🛛 Board |
| | |
| | |
| | |
| | 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.: Type of Entity: State of Formation: Address: Telephone No.: Telephone No.: Name: Type of Entity: State of Formation: Address: Telephone No.: Address: Telephone No.: Address: |

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 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: () | Ownership: | % |
| | Type of entity: \Box individual \Box partnersh | ip 🛛 corporation | □ limited liability company |
| | State of Formation: | | |
| b. | Name of General Partner: | | |
| | Address: | | |
| | Telephone: () | Ownership: | 0% |
| | Type of entity: \Box individual \Box partnersh | ip 🛛 corporation | □ limited liability company |
| | State of Formation: | | |
| c. | Name of General Partner: | | |
| | Address: | | |
| | Telephone: () | Ownership: | % |
| | Type of entity: \Box individual \Box partnersh | ip 🛛 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 <u>each</u> of the following: (i) all officers, (ii) all directors and (iii) all stockholders with a 10% interest or more in each general partner identified as a corporation in 2.A. If any officer, director or stockholder identified below is not an individual or a you must provide additional information, in the relevant form based on type of entity, until only individuals and no entities are identified. (*attach additional pages if needed to provide complete information*.)

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

 \Box 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 <u>each of the following</u>: (i) <u>all governors/directors</u>, (ii) <u>all members</u> and (iii) <u>all managers/officers</u> of each 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 type of entity, until only individuals and no entities are identified. (*attach additional pages if needed to provide complete information*.)

| GOVERNORS/DIRECTORS | MEMBERS Indicate the Managing Member(s), if any | MANAGERS/OFFICERS Indicate the Chief Manager(s), if any |
|------------------------------------|---|---|
| Name: | Name: | Name: |
| Address: | Type of Entity: | Type of Entity: |
| | - State of Formation: | State of Formation: |
| Telephone No.: | Address: | Address: |
| | Telephone No.: | Telephone No.: |
| Name: | | |
| Address: | - Name: | Name: |
| | Type of Entity: | Type of Entity: |
| Telephone No.: | State of Formation: | State of Formation: |
| | Address: | Address: |
| Name: | Telephone No.: | Telephone No.: |
| Address: | - Name: | — — Name: |
| Telephone No.: | Type of Entity: | Type of Entity: |
| | State of Formation: | State of Formation: |
| | Address: | Address: |
| | Telephone No.: | |
| Indicate if the LLC listed above i | s: 🗖 Member Managed 🗖 Manager | I |
| | | |

| a. | Name of General Partner: | | |
|----|--|---------------|----------------------------|
| | Address: | | |
| | Telephone: () | _Ownership: | % |
| | Type of entity: \Box individual \Box partnership | □ corporation | □ limited liability compar |
| | State of Formation: | | |
| b. | Name of General Partner: | | |
| | Address: | | |
| | Telephone: () | _Ownership: | % |
| | Type of entity: \Box individual \Box partnership | □ corporation | □ limited liability compar |
| | State of Formation: | | |
| c. | Name of General Partner: | | |
| | Address: | | |
| | Telephone: () | _Ownership: | % |
| | Type of entity: \Box individual \Box partnership | □ corporation | □ limited liability compar |
| | 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 <u>each of the following</u>: (i) <u>all officers</u>, (ii) <u>all directors</u> and (iii) <u>all stockholders with a 10% interest or more</u> in each 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 type of entity, until only individuals and no entities are identified. (*attach additional pages if needed to provide complete information*.)

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

 \Box 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 <u>each of the following</u>: (i) <u>all governors/directors</u>, (ii) <u>all members</u> and (iii) <u>managers/officers</u> of each officer, director and/or stockholder identified as a limited liability company 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 type of entity, until only individuals and no entities are identified. (*attach additional pages if needed to provide complete information*.)

| Entity:Name:Formation:Type of Entity:Formation:State of Formation:Address:Address:ne No.:Telephone No.:Entity:Type of Entity:Formation:State of Formation:Formation:State of Formation:Address:Address: |
|---|
| Formation: State of Formation: Address: Address: ne No.: Telephone No.: Name: Name: Entity: Type of Entity: Formation: State of Formation: |
| Address: ne No.: Telephone No.: Name: Entity: Type of Entity: Formation: |
| Ie No.: Telephone No.: Image: Sentity: Type of Entity: Formation: State of Formation: |
| Entity: Type of Entity: Formation: State of Formation: |
| Entity: Type of Entity: Formation: State of Formation: |
| Formation: State of Formation: |
| |
| Address: |
| |
| Tabahara Na . |
| Telephone No.: |
| Name: |
| Entity: Type of Entity: |
| Formation: State of Formation: |
| Address: |
| Telephone No.: |
| |
| |

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 <u>each</u> general partner of each 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 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: ()Ownership:% |
| | Type of entity: individual partnership corporation limited liability company |
| | State of Formation: |
| b. | Name of General Partner: |
| | Address: |
| | Telephone: ()Ownership:% |
| | Type of entity: \Box individual \Box partnership \Box corporation \Box limited liability company |
| | State of Formation: |
| c. | Name of General Partner: |
| | Address: |
| | Telephone: () Ownership: % |
| | Type of entity: \Box individual \Box partnership \Box corporation \Box 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 <u>each of the following</u>: (i) <u>all officers</u>, (ii) <u>all directors</u> and (iii) <u>stockholders with a 10% interest or more</u> in each 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 type of entity, until only individuals and no entities are identified. (*attach additional pages if needed to provide complete information*.)

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

 \Box 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 <u>each of the following</u>: (i) <u>all governors/directors</u>, (ii) <u>all members</u> and (iii) <u>all managers/officers</u> of each 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 type of entity, until only individuals and no entities are identified. (attach additional pages if needed to provide complete information.)

| GOVERNORS/DIRECTORS | MEMBERS Indicate the Managing Member(s), if any | MANAGERS/OFFICERS Indicate the Chief Manager(s), if any |
|---------------------|---|---|
| Name: | Name: | Name: |
| Address: | Type of Entity: | Type of Entity: |
| | State of Formation: | State of Formation: |
| Telephone No.: | Address: | Address: |
| | Telephone No.: | Telephone No.: |
| Name: | | <u></u> |
| Address: | Name: | Name: |
| | Type of Entity: | Type of Entity: |
| Telephone No.: | State of Formation: | State of Formation: |
| | Address: | Address: |
| Name: | Telephone No.: | Telephone No.: |
| Address: | | |
| | Name: | Name: |
| Telephone No.: | Type of Entity: | Type of Entity: |
| | State of Formation: | State of Formation: |
| | Address: | Address: |
| | Telephone No.: | |
| | | - |

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