ForgeTrust

INCOMING ASSET QUESTIONNAIRE

Contact Center: (800) 248-8447 | www.ForgeTrust.com

This form is to be used by all individuals transferring Assets In-Kind to Forge Trust Co. Please complete one (1) form for each incoming asset. This form is not required for the following assets: Certificate of Deposit, IRA ("Checkbook") LLC, Precious Metals, Publicly-Traded Assets, and Real Estate/Raw Land.

Raw Land.	g	.,	, , , , , , , , , , , , , , , , , , , ,		, , , , , , , , , , , , , , , , , , , ,				
1. PERSONAL INF	FORMATION (*required field)	d)							
Should Forge Trust Co. need to contact you in regards to	First Name*	Mic	ddle Name	Last Name*					
this request, your preferred method of contact is:	Account Number	Soc	cial Security Number* (last 4 digits)						
Email Primary Phone	Phone* XXX-XXX-XXXX	Em	nail (Your personal email only)						
2. INVESTMENT NAME/DESCRIPTION									
Name of limited partnership/business entity transferring to Forge Trust Co.									
3. QUESTIONNAII	RE								
1 Do you or any family membe	er own any units/shares of this company	ny outside of	vour IRA?		Yes	No			
		ry <u>outoide or</u>	your not.		100	140			
If yes: What is the percentage of ownership you own outside of your IRA?									
What is the percentage of ownership you own outside of your INA?									
2. Are you or any family member a main decision-maker or majority owner of the company?						No			
If yes:					I				
How are you related to the famil	ly member? (Write "self" if yourself)								
3. Are you or any family member employed by the company?					Yes	No			
If yes:									
How are you related to the family member? (Write "self" if yourself) What position is held by the employee?									
Have you or any of your family members received, or will receive, a personal gain based on your IRA making this investment in the company? Yes No						No			
If yes:									
Please explain the <u>personal</u> gair	n you or your family member will receiv	ve							
5. Please provide any additional	l details regarding this asset transfer:								

4. STATUS OF INVESTMENT ENTITY

Please tell us if any of the following apply to the Investment you have named in Section 2 of this form (please check all that apply):

The company is in bankruptcy, is pending bankruptcy proceedings, or is no longer in business

The company is under investigation by a Government entity, such as the SEC, FBI, or IRS

FOR PROMISSORY NOTES OR LOANS ONLY: This note has defaulted or matured or I am not receiving payments on this note pursuant to our agreement

NONE OF THESE APPLY

5. INVESTMENT ASSET CONTACT INFORMATION

Please provide the contact information for the investment asset that you are transferring to Forge Trust Co. This could include, but is not limited to, the investment company's manager(s), the Investor Relations team, or the Transfer Agent of the investment.

THIS SECTION SHOULD NOT BE FILLED OUT WITH YOUR IRA CUSTODIAN'S INFORMATION

Company Name*	Contact Person		Department		
Company Name		Gontaot i Gison		Boparanone	
Address*					
City*		State/Province*	Zip/Postal C	odo*	Country
City		State/Flovince	Zip/Fosiai C	oue	Country
Main Phone* XXX-XXX-XXXX	Alternate Phone XXX-XXX-XXXX	Fax XXX-XXX-XXXX		Email	
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Please note that we will not be able to accept your investment without a WRITTEN confirmation of the transfer. Forge Trust Co. will send a request to your Investment Sponsor in order to obtain this written confirmation. Your involvement will become necessary if your Investment Sponsor does not respond to our request.

6. SIGNATURE

Account Owner Signature	Date (MM/DD/YYYY)
x	

Please sign and submit additional documents as required.

DELIVERY INSTRUCTIONS

transfers-in@ForgeTrust.com

(650) 745-2907

Regular mail Forge Trust Co. PO Box 6850 San Mateo, CA 94403 Overnight mail Forge Trust Co. 3050 S Delaware Street, Ste. 202 San Mateo, CA 94403

Email

Fax