**UNITED STATES**

**SECURITIES AND EXCHANGE COMMISSION**

**Washington, D.C. 20549**

**FORM D**

**Notice of Exempt Offering of Securities**

|  |  |  |
| --- | --- | --- |
| **\*\*\*Warning\*\*\*** | **Do not paste information into any fields. All information must be manually typed.This worksheet is a Word 2013 form document. If you are editing in a different version of Word, please make sure the form is saved as Word 2013 (.docx) file.** | **\*\*\*Warning\*\*\*** |

**Contact Details**

|  |  |  |
| --- | --- | --- |
| Contact Name | Contact Phone Number | Contact Email Address |
|       |       |       |

**1. Issuer’s Identity
\*****If more than one Issuer, enter the additional entries at the end of the Worksheet. Check this box if more than 100 Issuers** [ ] **.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| CIK (Filer ID Number) | CCC | Previous Names | [ ]  | None | Entity Type (Select One) |
|       |       |       | [ ]  | Corporation |
|  |       | [ ]  | Limited Partnership |
|  |       | [ ]  | Limited Liability Company |
|  | (Only enter Previous Names (maximum of three) | [ ]  | General Partnership |
|  | that are not currently listed on the SEC database) | [ ]  | Business Trust |
|  |  | [ ]  | Other (Specify below) |
|  |  |       |
|  |  |  |
|  |
| Year of Incorporation/Organization (Select one) |
| [ ]  | Over Five Years Ago |
| [ ]  | Within Last Five Years (Specify Year)      |
| [ ]  | Yet to Be Formed |

**2. Principal Place of Business and Contact Information**

|  |  |
| --- | --- |
| Street Address 1 | Street Address 2 (optional) |
|       |       |
|  |  |
| City | State/Province/Country | ZIP/PostalCode | Phone Number of Issuer |
|       |    |       |       |

**3. Related Persons** \*Enter up to ten related persons below. If more than ten, please contact your local Merrill Customer Service Representative.

|  |  |  |
| --- | --- | --- |
| Last Name | First Name | Middle Name (optional) |
|       |       |       |
|  |  |  |
| Street Address 1 | Street Address 2 (optional) |  |
|       |       |  |
|  |  |  |
| City | State/Province/Country | ZIP/PostalCode |
|       |    |       |
|  |  |  |
| Relationship: [ ]   Executive Officer  [ ]   Director  [ ]   Promoter |

Clarification of Response (if Necessary): \*SEC limits Clarification to 255 characters.

|  |  |  |
| --- | --- | --- |
| Last Name | First Name | Middle Name (optional) |
|       |       |       |
|  |  |  |
| Street Address 1 | Street Address 2 (optional) |  |
|       |       |  |
|  |  |  |
| City | State/Province/Country | ZIP/PostalCode |
|       |    |       |
|  |  |  |
| Relationship: [ ]   Executive Officer  [ ]   Director  [ ]   Promoter |

Clarification of Response (if Necessary): \*SEC limits Clarification to 255 characters.

|  |  |  |
| --- | --- | --- |
| Last Name | First Name | Middle Name (optional) |
|       |       |       |
|  |  |  |
| Street Address 1 | Street Address 2 (optional) |  |
|       |       |  |
|  |  |  |
| City | State/Province/Country | ZIP/PostalCode |
|       |    |       |
|  |  |  |
| Relationship: [ ]   Executive Officer  [ ]   Director  [ ]   Promoter |

Clarification of Response (if Necessary): \*SEC limits Clarification to 255 characters.

|  |  |  |
| --- | --- | --- |
| Last Name | First Name | Middle Name (optional) |
|       |       |       |
|  |  |  |
| Street Address 1 | Street Address 2 (optional) |  |
|       |       |  |
|  |  |  |
| City | State/Province/Country | ZIP/PostalCode |
|       |    |       |
|  |  |  |
| Relationship: [ ]   Executive Officer  [ ]   Director  [ ]   Promoter |

Clarification of Response (if Necessary): \*SEC limits Clarification to 255 characters.

|  |  |  |
| --- | --- | --- |
| Last Name | First Name | Middle Name (optional) |
|       |       |       |
|  |  |  |
| Street Address 1 | Street Address 2 (optional) |  |
|       |       |  |
|  |  |  |
| City | State/Province/Country | ZIP/PostalCode |
|       |    |       |
|  |  |  |
| Relationship: [ ]   Executive Officer  [ ]   Director  [ ]   Promoter |

Clarification of Response (if Necessary): \*SEC limits Clarification to 255 characters.

|  |  |  |
| --- | --- | --- |
| Last Name | First Name | Middle Name (optional) |
|       |       |       |
|  |  |  |
| Street Address 1 | Street Address 2 (optional) |  |
|       |       |  |
|  |  |  |
| City | State/Province/Country | ZIP/PostalCode |
|       |    |       |
|  |  |  |
| Relationship: [ ]   Executive Officer  [ ]   Director  [ ]   Promoter |

Clarification of Response (if Necessary): \*SEC limits Clarification to 255 characters.

|  |  |  |
| --- | --- | --- |
| Last Name | First Name | Middle Name (optional) |
|       |       |       |
|  |  |  |
| Street Address 1 | Street Address 2 (optional) |  |
|       |       |  |
|  |  |  |
| City | State/Province/Country | ZIP/PostalCode |
|       |    |       |
|  |  |  |
| Relationship: [ ]   Executive Officer  [ ]   Director  [ ]   Promoter |

Clarification of Response (if Necessary): \*SEC limits Clarification to 255 characters.

|  |  |  |
| --- | --- | --- |
| Last Name | First Name | Middle Name (optional) |
|       |       |       |
|  |  |  |
| Street Address 1 | Street Address 2 (optional) |  |
|       |       |  |
|  |  |  |
| City | State/Province/Country | ZIP/PostalCode |
|       |    |       |
|  |  |  |
| Relationship: [ ]   Executive Officer  [ ]   Director  [ ]   Promoter |

Clarification of Response (if Necessary): \*SEC limits Clarification to 255 characters.

|  |  |  |
| --- | --- | --- |
| Last Name | First Name | Middle Name (optional) |
|       |       |       |
|  |  |  |
| Street Address 1 | Street Address 2 (optional) |  |
|       |       |  |
|  |  |  |
| City | State/Province/Country | ZIP/PostalCode |
|       |    |       |
|  |  |  |
| Relationship: [ ]   Executive Officer  [ ]   Director  [ ]   Promoter |

Clarification of Response (if Necessary): \*SEC limits Clarification to 255 characters.

|  |  |  |
| --- | --- | --- |
| Last Name | First Name | Middle Name (optional) |
|       |       |       |
|  |  |  |
| Street Address 1 | Street Address 2 (optional) |  |
|       |       |  |
|  |  |  |
| City | State/Province/Country | ZIP/PostalCode |
|       |    |       |
|  |  |  |
| Relationship: [ ]   Executive Officer  [ ]   Director  [ ]   Promoter |

Clarification of Response (if Necessary): \*SEC limits Clarification to 255 characters.

|  |  |  |
| --- | --- | --- |
| Last Name | First Name | Middle Name (optional) |
|       |       |       |
|  |  |  |
| Street Address 1 | Street Address 2 (optional) |  |
|       |       |  |
|  |  |  |
| City | State/Province/Country | ZIP/PostalCode |
|       |    |       |
|  |  |  |
| Relationship: [ ]   Executive Officer  [ ]   Director  [ ]   Promoter |

Clarification of Response (if Necessary): \*SEC limits Clarification to 255 characters.

**4. Industry Group (Select one)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| [ ]  | Agriculture |  | [ ]  | Business Services | [ ]  | Retailing |
|  | Banking & Financial Services |  |  | Energy | [ ]  | Restaurants |
|  | [ ]  | Commercial Banking |  |  | [ ]  | Coal Mining |  | Technology |
|  | [ ]  | Insurance |  |  | [ ]  | Electric Utilities |  | [ ]  | Computers |
|  | [ ]  | Investing |  |  | [ ]  | Energy Conservation |  | [ ]  | Telecommunications |
|  | [ ]  | Investment Banking |  |  | [ ]  | Environmental Services |  | [ ]  | Other Technology |
|  | [ ]  | Pooled Investment Fund |  |  | [ ]  | Oil & Gas |  | Travel |
|  |  | If selecting this industry group, also |  |  | [ ]  | Other Energy |  | [ ]  | Airlines & Airports |
|  |  | select one fundtype below and  |  |  | Health Care |  | [ ]  | Lodging & Conventions |
|  |  | answer the question below: |  |  | [ ]  | Biotechnology |  | [ ]  | Tourism & Travel Services |
|  |  | [ ]  | Hedge Fund |  |  | [ ]  | Health Insurance |  | [ ]  | Other Travel |
|  |  | [ ]  | Private Equity Fund |  |  | [ ]  | Hospitals & Physicians | [ ]  | Other |
|  |  | [ ]  | Venture Capital Fund |  |  | [ ]  | Pharmaceuticals |  |  |  |
|  |  | [ ]  | Other Investment Fund |  |  | [ ]  | Other Health Care |  |  |  |
|  |  |  | Is the issuer registered as |  | [ ]  | Manufacturing |  |  |  |
|  |  |  | an investment company under |  |  | Real Estate |  |  |  |
|  |  |  | the Investment Company |  |  | [ ]  | Commercial |  |  |  |
|  |  |  | Act of 1940? |  |  | [ ]  | Construction |  |  |  |
|  |  |  | [ ]  | Yes | [ ]  | No |  |  | [ ]  | REITS & Finance |  |  |  |
|  | [ ]  | Other Banking & Financial Services |  |  | [ ]  | Residential |  |  |  |
|  |  |  |  |  | [ ]  | Other Real Estate |  |  |  |

**5. Issuer Size (Select one)**

|  |  |  |
| --- | --- | --- |
| Revenue Range (for issuer not specifying "hedge"or "other investment" fund in Item 4 above) | **OR** | Aggregate Net Asset Value Range (for issuerspecifying "hedge" or "other investment" fund inItem 4 above) |
| [ ]  | No Revenues |  | [ ]  | No Aggregate Net Asset Value |
| [ ]  | $1 - $1,000,000 |  | [ ]  | $1 - $5,000,000 |
| [ ]  | $1,000,001 - $5,000,000 |  | [ ]  | $5,000,001 - $25,000,000 |
| [ ]  | $5,000,001 - $25,000,000 |  | [ ]  | $25,000,001 - $50,000,000 |
| [ ]  | $25,000,001 - $100,000,000 |  | [ ]  | $50,000,001 - $100,000,000 |
| [ ]  | Over $100,000,000 |  | [ ]  | Over $100,000,000 |
| [ ]  | Decline to Disclose |  | [ ]  | Decline to Disclose |
| [ ]  | Not Applicable |  | [ ]  | Not Applicable |

**6. Federal Exemptions and Exclusions Claimed (Select all that apply)**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | [ ]  | Investment Company Act Section 3(c) |
| [ ]  | Rule 504(b)(1) (not (i), (ii) or (iii)) | [ ]  | Section 3(c)(1) | [ ]  | Section 3(c)(9) |
| [ ]  | Rule 504 (b)(1)(i) | [ ]  | Section 3(c)(2) | [ ]  | Section 3(c)(10) |
| [ ]  | Rule 504 (b)(1)(ii) | [ ]  | Section 3(c)(3) | [ ]  | Section 3(c)(11) |
| [ ]  | Rule 504 (b)(1)(iii) | [ ]  | Section 3(c)(4) | [ ]  | Section 3(c)(12) |
| [ ]  | Rule 506(b) | [ ]  | Section 3(c)(5) | [ ]  | Section 3(c)(13) |
| [ ]  | Rule 506(c) | [ ]  | Section 3(c)(6) | [ ]  | Section 3(c)(14) |
| [ ]  | Securities Act Section 4(a)(5) | [ ]  | Section 3(c)(7) |  |  |
|  |  |  |  |  |  |

**7. Type of Filing**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| [ ]  | New Notice | **OR** | [ ]  | Amendment If amended filing provide previous accession number:      |
| Date of First Sale(YYYY-MM-DD) |       | OR | [ ]  | First Sale Yet to Occur |

**8. Duration of Offering**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Does the Issuer intend this offering to last more than one year? | [ ]  | Yes | [ ]  | No |

**9. Type(s) of Securities Offered (select all that apply)**

|  |  |  |  |
| --- | --- | --- | --- |
| [ ]  | Equity | [ ]  | Pooled Investment Fund Interests |
| [ ]  | Debt | [ ]  | Tenant-in-Common Securities |
| [ ]  | Option, Warrant or Other Right to AcquireAnother Security | [ ]  | Mineral Property Securities |
| [ ]  | Security to be Acquired Upon Exercise of Option, | [ ]  | Other (describe) |
|  | Warrant or Other Right to Acquire Security |       |

**10. Business Combination Transaction**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Is this offering being made in connection with a business combination transaction,such as a merger, acquisition or exchange offer? | [ ]  | Yes | [ ]  | No |

Clarification of Response (if Necessary): \*SEC limits Clarification to 255 characters.

**11. Minimum Investment**

Minimum investment accepted from any outside investor $       USD

**12. Sales Compensation**

**\*If more than one Sales Compensation Recipient, enter at the end of worksheet. If no recipient, do not fill in any fields or check any boxes.**

|  |  |  |  |
| --- | --- | --- | --- |
| Recipient | Recipient CRD Number | [ ]  | None |
|       |       |  |  |
| (Associated) Broker or Dealer | [ ]  | None | (Associated) Broker or Dealer CRD Number | [ ]  | None |
|       |       |  |  |
| Street Address 1 | Street Address 2 (optional) |
|       |       |
| City | State/Province/Country |  | ZIP/Postal Code |
|       |    |  |       |
|  |
| State(s) of Solicitation (select all that apply) [ ]   All States |
| Check “All States” or check individual States |
| [ ]  AL | [ ]  AK | [ ]  AZ | [ ]  AR | [ ]  CA | [ ]  CO | [ ]  CT | [ ]  DE | [ ]  DC | [ ]  FL | [ ]  GA | [ ]  HI | [ ]  ID |
| [ ]  IL | [ ]  IN | [ ]  IA | [ ]  KS | [ ]  KY | [ ]  LA | [ ]  ME | [ ]  MD | [ ]  MA | [ ]  MI | [ ]  MN | [ ]  MS | [ ]  MO |
| [ ]  MT | [ ]  NE | [ ]  NV | [ ]  NH | [ ]  NJ | [ ]  NM | [ ]  NY | [ ]  NC | [ ]  ND | [ ]  OH | [ ]  OK | [ ]  OR | [ ]  PA |
| [ ]  RI | [ ]  SC | [ ]  SD | [ ]  TN | [ ]  TX | [ ]  UT | [ ]  VT | [ ]  VA | [ ]  WA | [ ]  WV | [ ]  WI | [ ]  WY | [ ]  PR |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| [ ]  Check this box if foreign/non-US sales have been solicited by the recipient. |

**13. Offering and Sales Amounts**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| (a)  Total Offering Amount | $      | USD | **OR** | [ ]  | Indefinite |
| (b)  Total Amount Sold | $      | USD |  |  |  |
| (c)  Total Remaining to be Sold          (Subtract (a) from (b)) | $      | USD | **OR** | [ ]  | Indefinite |

Clarification of Response (if Necessary): \*SEC limits Clarification to 255 characters.

**14. Investors**

|  |  |  |
| --- | --- | --- |
| [ ]  | Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. |       |
|  |  |  |
|  | Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering: |       |

**15. Sales Commissions & Finder's Fees Expenses**

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sales Commissions  | $       | USD | [ ]  | Estimate |
|  |  |  |  |  |
| Finders' Fees  | $       | USD | [ ]  | Estimate |

Clarification of Response (if Necessary): \*SEC limits Clarification to 255 characters.

**16. Use of Proceeds**

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | $       | USD | [ ]  | Estimate |

Clarification of Response (if Necessary): \*SEC limits Clarification to 255 characters.

**Signature and Submission**

**Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.**

**Terms of Submission**

|  |
| --- |
| In submitting this notice, each issuer named above is:• Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.\*• Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.• Certifying that, if the issuer is claiming a Rule 505 exemption, the issuer is not disqualified from relying on Rule 505 for one of the reasons stated in Rule 505(b)(2)(iii). |

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

[ ]   I also am a duly authorized representative of the other Issuer(s) in Item 1 above and authorized to sign on their behalf.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Issuer(must match the Issuername from the SECdatabase exactly) |  | Signature |  | Name of Signer |  | Title |  | Date(YYYY-MM-DD) |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

*Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.*

\* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.

**Items 1 and 2 Continuation Page**

**1 and 2. Issuer's Identity and Contact Information (Continued)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| CIK (Filer ID Number) | CCC | Previous Names | [ ]  | None | Entity Type |
|       |       |       | [ ]  | Corporation |
|  |       | [ ]  | Limited Partnership |
|  |       | [ ]  | Limited Liability Company |
|  | (Only enter Previous Names (maximum of three) | [ ]  | General Partnership |
|  | that are not currently listed on the SEC database) | [ ]  | Business Trust |
|  |  | [ ]  | Other (Specify below) |
|  |  |       |
|  |  |  |
|  |
| Year of Incorporation/Organization (Select one) |
| [ ]  | Over Five Years Ago |
| [ ]  | Within Last Five Years (Specify Year)      |
| [ ]  | Yet to Be Formed |
|  |  |
| Street Address 1 | Street Address 2 (optional) |
|       |       |
|  |  |
| City | State/Province/Country | ZIP/PostalCode | Phone Number of Issuer |
|       |    |       |       |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| CIK (Filer ID Number) | CCC | Previous Names | [ ]  | None | Entity Type |
|       |       |       | [ ]  | Corporation |
|  |       | [ ]  | Limited Partnership |
|  |       | [ ]  | Limited Liability Company |
|  | (Only enter Previous Names (maximum of three) | [ ]  | General Partnership |
|  | that are not currently listed on the SEC database) | [ ]  | Business Trust |
|  |  | [ ]  | Other (Specify below) |
|  |  |       |
|  |  |  |
|  |
| Year of Incorporation/Organization (Select one) |
| [ ]  | Over Five Years Ago |
| [ ]  | Within Last Five Years (Specify Year)      |
| [ ]  | Yet to Be Formed |
|  |  |
| Street Address 1 | Street Address 2 (optional) |
|       |       |
|  |  |
| City | State/Province/Country | ZIP/PostalCode | Phone Number of Issuer |
|       |    |       |       |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| CIK (Filer ID Number) | CCC | Previous Names | [ ]  | None | Entity Type |
|       |       |       | [ ]  | Corporation |
|  |       | [ ]  | Limited Partnership |
|  |       | [ ]  | Limited Liability Company |
|  | (Only enter Previous Names (maximum of three) | [ ]  | General Partnership |
|  | that are not currently listed on the SEC database) | [ ]  | Business Trust |
|  |  | [ ]  | Other (Specify below) |
|  |  |       |
|  |  |  |
|  |
| Year of Incorporation/Organization (Select one) |
| [ ]  | Over Five Years Ago |
| [ ]  | Within Last Five Years (Specify Year)      |
| [ ]  | Yet to Be Formed |
|  |  |
| Street Address 1 | Street Address 2 (optional) |
|       |       |
|  |  |
| City | State/Province/Country | ZIP/PostalCode | Phone Number of Issuer |
|       |    |       |       |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| CIK (Filer ID Number) | CCC | Previous Names | [ ]  | None | Entity Type |
|       |       |       | [ ]  | Corporation |
|  |       | [ ]  | Limited Partnership |
|  |       | [ ]  | Limited Liability Company |
|  | (Only enter Previous Names (maximum of three) | [ ]  | General Partnership |
|  | that are not currently listed on the SEC database) | [ ]  | Business Trust |
|  |  | [ ]  | Other (Specify below) |
|  |  |       |
|  |  |  |
|  |
| Year of Incorporation/Organization (Select one) |
| [ ]  | Over Five Years Ago |
| [ ]  | Within Last Five Years (Specify Year)      |
| [ ]  | Yet to Be Formed |
|  |  |
| Street Address 1 | Street Address 2 (optional) |
|       |       |
|  |  |
| City | State/Province/Country | ZIP/PostalCode | Phone Number of Issuer |
|       |    |       |       |

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| --- | --- | --- | --- | --- | --- |
| CIK (Filer ID Number) | CCC | Previous Names | [ ]  | None | Entity Type |
|       |       |       | [ ]  | Corporation |
|  |       | [ ]  | Limited Partnership |
|  |       | [ ]  | Limited Liability Company |
|  | (Only enter Previous Names (maximum of three) | [ ]  | General Partnership |
|  | that are not currently listed on the SEC database) | [ ]  | Business Trust |
|  |  | [ ]  | Other (Specify below) |
|  |  |       |
|  |  |  |
|  |
| Year of Incorporation/Organization (Select one) |
| [ ]  | Over Five Years Ago |
| [ ]  | Within Last Five Years (Specify Year)      |
| [ ]  | Yet to Be Formed |
|  |  |
| Street Address 1 | Street Address 2 (optional) |
|       |       |
|  |  |
| City | State/Province/Country | ZIP/PostalCode | Phone Number of Issuer |
|       |    |       |       |

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| --- | --- | --- | --- | --- | --- |
| CIK (Filer ID Number) | CCC | Previous Names | [ ]  | None | Entity Type |
|       |       |       | [ ]  | Corporation |
|  |       | [ ]  | Limited Partnership |
|  |       | [ ]  | Limited Liability Company |
|  | (Only enter Previous Names (maximum of three) | [ ]  | General Partnership |
|  | that are not currently listed on the SEC database) | [ ]  | Business Trust |
|  |  | [ ]  | Other (Specify below) |
|  |  |       |
|  |  |  |
|  |
| Year of Incorporation/Organization (Select one) |
| [ ]  | Over Five Years Ago |
| [ ]  | Within Last Five Years (Specify Year)      |
| [ ]  | Yet to Be Formed |
|  |  |
| Street Address 1 | Street Address 2 (optional) |
|       |       |
|  |  |
| City | State/Province/Country | ZIP/PostalCode | Phone Number of Issuer |
|       |    |       |       |

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| --- | --- | --- | --- | --- | --- |
| CIK (Filer ID Number) | CCC | Previous Names | [ ]  | None | Entity Type |
|       |       |       | [ ]  | Corporation |
|  |       | [ ]  | Limited Partnership |
|  |       | [ ]  | Limited Liability Company |
|  | (Only enter Previous Names (maximum of three) | [ ]  | General Partnership |
|  | that are not currently listed on the SEC database) | [ ]  | Business Trust |
|  |  | [ ]  | Other (Specify below) |
|  |  |       |
|  |  |  |
|  |
| Year of Incorporation/Organization (Select one) |
| [ ]  | Over Five Years Ago |
| [ ]  | Within Last Five Years (Specify Year)      |
| [ ]  | Yet to Be Formed |
|  |  |
| Street Address 1 | Street Address 2 (optional) |
|       |       |
|  |  |
| City | State/Province/Country | ZIP/PostalCode | Phone Number of Issuer |
|       |    |       |       |

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| --- | --- | --- | --- | --- | --- |
| CIK (Filer ID Number) | CCC | Previous Names | [ ]  | None | Entity Type |
|       |       |       | [ ]  | Corporation |
|  |       | [ ]  | Limited Partnership |
|  |       | [ ]  | Limited Liability Company |
|  | (Only enter Previous Names (maximum of three) | [ ]  | General Partnership |
|  | that are not currently listed on the SEC database) | [ ]  | Business Trust |
|  |  | [ ]  | Other (Specify below) |
|  |  |       |
|  |  |  |
|  |
| Year of Incorporation/Organization (Select one) |
| [ ]  | Over Five Years Ago |
| [ ]  | Within Last Five Years (Specify Year)      |
| [ ]  | Yet to Be Formed |
|  |  |
| Street Address 1 | Street Address 2 (optional) |
|       |       |
|  |  |
| City | State/Province/Country | ZIP/PostalCode | Phone Number of Issuer |
|       |    |       |       |

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| --- | --- | --- | --- | --- | --- |
| CIK (Filer ID Number) | CCC | Previous Names | [ ]  | None | Entity Type |
|       |       |       | [ ]  | Corporation |
|  |       | [ ]  | Limited Partnership |
|  |       | [ ]  | Limited Liability Company |
|  | (Only enter Previous Names (maximum of three) | [ ]  | General Partnership |
|  | that are not currently listed on the SEC database) | [ ]  | Business Trust |
|  |  | [ ]  | Other (Specify below) |
|  |  |       |
|  |  |  |
|  |
| Year of Incorporation/Organization (Select one) |
| [ ]  | Over Five Years Ago |
| [ ]  | Within Last Five Years (Specify Year)      |
| [ ]  | Yet to Be Formed |
|  |  |
| Street Address 1 | Street Address 2 (optional) |
|       |       |
|  |  |
| City | State/Province/Country | ZIP/PostalCode | Phone Number of Issuer |
|       |    |       |       |

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| --- | --- | --- | --- | --- | --- |
| CIK (Filer ID Number) | CCC | Previous Names | [ ]  | None | Entity Type |
|       |       |       | [ ]  | Corporation |
|  |       | [ ]  | Limited Partnership |
|  |       | [ ]  | Limited Liability Company |
|  | (Only enter Previous Names (maximum of three) | [ ]  | General Partnership |
|  | that are not currently listed on the SEC database) | [ ]  | Business Trust |
|  |  | [ ]  | Other (Specify below) |
|  |  |       |
|  |  |  |
|  |
| Year of Incorporation/Organization (Select one) |
| [ ]  | Over Five Years Ago |
| [ ]  | Within Last Five Years (Specify Year)      |
| [ ]  | Yet to Be Formed |
|  |  |
| Street Address 1 | Street Address 2 (optional) |
|       |       |
|  |  |
| City | State/Province/Country | ZIP/PostalCode | Phone Number of Issuer |
|       |    |       |       |

**Item 12 Continuation Page**

**12. Sales Compensation (Continued)**

|  |  |  |  |
| --- | --- | --- | --- |
| Recipient | Recipient CRD Number | [ ]  | None |
|       |       |  |  |
| (Associated) Broker or Dealer | [ ]  | None | (Associated) Broker or Dealer CRD Number | [ ]  | None |
|       |       |  |  |
| Street Address 1 | Street Address 2 (optional) |
|       |       |
| City | State/Province/Country |  | ZIP/Postal Code |
|       |    |  |       |
|  |
| State(s) of Solicitation (select all that apply) [ ]   All States |
| Check “All States” or check individual States |
| [ ]  AL | [ ]  AK | [ ]  AZ | [ ]  AR | [ ]  CA | [ ]  CO | [ ]  CT | [ ]  DE | [ ]  DC | [ ]  FL | [ ]  GA | [ ]  HI | [ ]  ID |
| [ ]  IL | [ ]  IN | [ ]  IA | [ ]  KS | [ ]  KY | [ ]  LA | [ ]  ME | [ ]  MD | [ ]  MA | [ ]  MI | [ ]  MN | [ ]  MS | [ ]  MO |
| [ ]  MT | [ ]  NE | [ ]  NV | [ ]  NH | [ ]  NJ | [ ]  NM | [ ]  NY | [ ]  NC | [ ]  ND | [ ]  OH | [ ]  OK | [ ]  OR | [ ]  PA |
| [ ]  RI | [ ]  SC | [ ]  SD | [ ]  TN | [ ]  TX | [ ]  UT | [ ]  VT | [ ]  VA | [ ]  WA | [ ]  WV | [ ]  WI | [ ]  WY | [ ]  PR |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| [ ]  Check this box if foreign/non-US sales have been solicited by the recipient. |

|  |  |  |  |
| --- | --- | --- | --- |
| Recipient | Recipient CRD Number | [ ]  | None |
|       |       |  |  |
| (Associated) Broker or Dealer | [ ]  | None | (Associated) Broker or Dealer CRD Number | [ ]  | None |
|       |       |  |  |
| Street Address 1 | Street Address 2 (optional) |
|       |       |
| City | State/Province/Country |  | ZIP/Postal Code |
|       |    |  |       |
|  |
| State(s) of Solicitation (select all that apply) [ ]   All States |
| Check “All States” or check individual States |
| [ ]  AL | [ ]  AK | [ ]  AZ | [ ]  AR | [ ]  CA | [ ]  CO | [ ]  CT | [ ]  DE | [ ]  DC | [ ]  FL | [ ]  GA | [ ]  HI | [ ]  ID |
| [ ]  IL | [ ]  IN | [ ]  IA | [ ]  KS | [ ]  KY | [ ]  LA | [ ]  ME | [ ]  MD | [ ]  MA | [ ]  MI | [ ]  MN | [ ]  MS | [ ]  MO |
| [ ]  MT | [ ]  NE | [ ]  NV | [ ]  NH | [ ]  NJ | [ ]  NM | [ ]  NY | [ ]  NC | [ ]  ND | [ ]  OH | [ ]  OK | [ ]  OR | [ ]  PA |
| [ ]  RI | [ ]  SC | [ ]  SD | [ ]  TN | [ ]  TX | [ ]  UT | [ ]  VT | [ ]  VA | [ ]  WA | [ ]  WV | [ ]  WI | [ ]  WY | [ ]  PR |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| [ ]  Check this box if foreign/non-US sales have been solicited by the recipient. |