

Alternative Investment Product Onboarding Questionnaire

Please return completed form to LPLFinancialAlternativeInvestments@lpl.com.

1. Product Description

Sponsor Firm Name: Product Name:

Product type, please check:

- Non-traded REIT
 BDC
 Hedge Fund
 Hedge Fund of Funds
 Private Equity
 Managed Futures
 Oil and Gas LP
 Equipment Leasing
 1031 Exchange Internal Fund
 Closed End Fund
 Other

Perpetual Offering: Yes No New Product Offering Follow on Product Offering Share Class / Cusip Addition

2. Operational Information

Operations call has been held with LPL Financial: Yes No Please provide date:

Cusip:

Share Class(es) to be added:

Select (X)	Platform	Share Class (i.e. A, I, etc.)	Investment Minimum (\$)	Subsequent Purchase Minimum (\$)
X	Brokerage	A	\$2,500	\$500
	Advisory SAM			
	Advisory SWM Hybrid			
	Advisory SWM IFA			

Applicable account types: Qualified Non-Qualified Both

U.S. Citizens Only: Yes No

U.S. Residents Only: Yes No

Fund Inception/ Effective Date:

Blue Sky States: All 50 States All 50 States, Plus DC, Puerto Rico, Virgin Islands

Individual States

Transfer Agent:

DTCC AIP Networking Eligible: Yes No

Alt Serv (AIOE) Eligible: Yes No

DTCC AIP Networking Agreement fully executed at LPL: Yes No If no, please provide target date to execute:

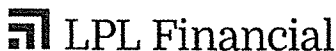
Sponsor subscribes to AI Insight: Yes No

3. Acknowledgment

Sponsor shall pay LPL Financial a product onboarding fee of \$30,000 per new product offering launched at LPL. Sponsor shall pay LPL Financial a product onboarding fee of \$15,000 per follow on product offering or cusip (share class) addition, as applicable. Fees are payable within 30 days following receipt of invoice. Please note that fees will only be assessed for products approved by the LPL Financial Product Review Committee and with an executed selling and/or service agreement with LPL. Fees do not represent Research due diligence fees, Marketing and/or Conference fees or AIP Networking set up or ongoing fees.

Please sign below to acknowledge your agreement to remit payment as outlined above and to attest that the information that you have provided is complete and accurate.

Authorized Sponsor Representative Signature Authorized Sponsor Representative Name (print) Sponsor Representative Title Date (required)



Member FINRA/SIPC

F709
Revised 0616

