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Computershare PO Box 505013 Louisville, KY 40233-5013 www.computershare.com/investor

Name of Current Account Holder	
Joint Tenant Address	Current Holder Account Number
City, State, Zip	
	Company Name
Fransfer Request	PLEASE PRINT CLEARLY
. CURRENT ACCOUNT TYPE (account you are transferring s	hares out of)
Non-Custodial Registrations - complete section 2 below	OR Custodial Registrations - Custodian to complete section 3 (reverse page)
	e Number (do not use hyphens)
Name(s) / Registration on Current Account (include ALL names/entities listed on account (include ALL names/entitie	count)
Current Street Address	Apt. / Unit Number
City	State Zip Code



#### 3. CUSTODIAL REGISTRATIONS

he Custodian registered to the current acc	ount (that	vou are tra	ansferrin	a shares	out of)	must pr	ovide a	ınd/o	r verifv	the fo	llowing	a inforr	nation:
ame of Custodian	ourit (urat	you alo al		9 0114100	out 0.,	maot pr	01140					e	
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ame(s) / Registration on Current Account (include ALL	names/entitie	es listed on a	ccount)										
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rrent Street Address												Apt. / I	Jnit Numb
									I				
у									State		Zip C	ode	
ustodian Account Number/Investor ID at Custodian		Custodian	Taxpayer II	) Number (d	o not use	hyphens)							
ustodian Telephone Number (do not use hyphens)	Ext.												
Stoulan relegione number (do not use hypners)	LAL												

4. COST BASIS/REA	SON FOR TRA	NSFER	
documentation that this	is a decedent trans	the transfer for shares acquired after 12/31/10. If this section is not fully completed, all transfers will be treated as Gifts, unless we re fer (i.e. Affidavit of Domicile) in which case the transfer will be treated as an inheritance. We recommend that you consult with your to fit transfer. Please check ONLY ONE box. If you check more than one box your transfer will be treated as if you had not made any sel	ax advisor
Private Sale	Date of Sale:	(If Private Sale) Cost Per Share:	US Dollars
Gift	Date of Gift:		
Inheritance	Date of Death:	(If Inheritance) Value Per Share:	US Dollars
l <u> </u>		If blank we will default to the effective date of the transfer.)	
No Change of Ow	nership (please sp	ecify)	

### 5. SHARE TRANSFER

A. Transfer All Securities OR B. Transfer Shares A	s Instructed Below I, complete the Security Description/Share Type details below.
Security Description / Share Type (ex: Common, Preferred, etc)  Transfer All	Enter number of whole and / or fractional shares to transfer, if applicable
	or
	or
	or
	or
S. AUTHORIZED SIGNATURES	
The undersigned does (do) hereby irrevocably constitute and appoint Computershare as attorney to transfer the said stock, as the case may be, on the books of said Company, with full power of substitution in the premises.	Required ► Medallion Guarantee Stamp All Current Holder(s) or Legal Rep(s) (Notary Seal Is Not Acceptable)
The signature(s) below on this Transfer Request form must correspond exactly with the name(s) as shown upon the face of the stock certificate or a Computershare-issued statement for book-entry shares, without alteration or enlargement or any change whatever. The below must be signed by all current registered holders, or a legally authorized representative with indication of his or her capacity next to the signature.	
NOTE: Signature(s) must be stamped with a Medallion Signature Guarantee by a qualified financial institution, such as a commercial bank, savings bank, savings and loan, US stockbroker and security dealer, or credit union, that is participating in an approved Medallion Signature Guarantee Program (A NOTARY SEAL IS NOT ACCEPTABLE).	
	Date (mm / dd / yyyy)
	Signature of all Current Holders or Legal Representative(s)
Required ► Medallion Guarantee Stamp Current Custodian (Notary Seal Is Not Acceptable)	Required ► Medallion Guarantee Stamp All Current Holder(s) or Legal Rep(s) - Continued (Notary Seal Is Not Acceptable)
Date (mm / dd / yyyy)	Date (mm / dd / yyyy)
Signature of Current Custodian	Signature of Additional Current Holder(s) or Legal Representative(s)

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Non-Custodial Registrations - complete section 8 OR Custodial Registrations - Custodian to complete section 9 (reverse page
8. New Account Type (account you are transferring shares to): Non-Custodial Registration
A. New Non-Custodial Registration Type
Individual Estate – Include Executor Name, Provide Estate EIN on Form W-9
Joint Tenants with Right of Survivorship Qualified Pension Plan (Non-custodial)
Community Property  Trust – Include Trustee Names, Trust Name, and Trust Agreement Date below.
Tenants in Common  Transfer on Death ("TOD") – Note: Only 1 TOD beneficiary may
Corporation be registered per account. List the TOD beneficiary name below.
Custodial for Minors Act – State of:  Other (Specify)
B. New Holder Information  New Holder's Existing Account Number (if applicable)  Name of Individual / Entity / Trustee / Executor / Other
Name of Joint Holder / Minor / Co-Trustee / TOD Beneficiary / Other (if applicable)
Trust / Estate Name (if applicable)
Trust / Estate Name - continued Trust Agreement Date (mm / dd / yyyy) (if applicable)
Current Street Address Apt. / Unit Number
City State Zip Code
E-mail Address



9. New Account Type (account you are transferring shares to): Custodial Registrations A. New Custodial Registration Type **Traditional IRA** Simplified Employee Pension/Trust (SEP) Roth IRA Pension/Profit Sharing Plan **KEOGH Plan** Other (Specify) **B. New Custodial Information** Name of Custodian Beneficial Holder for New Account (include ALL names/entities listed on account) **Current Street Address** Apt. / Unit Number City State Zip Code Custodian E-mail Address Custodian Account Number / Investor ID at Custodian NOTE: Signature(s) must be stamped with a Medallion Signature Guarantee by Custodian Telephone Number (do not use hyphens) Ext. a qualified financial institution, such as a commercial bank, savings bank, savings and loan, US stockbroker and security dealer, or credit union, that is participating in an approved Medallion Signature Guarantee Program (A NOTARY SEAL IS NOT ACCEPTABLE). Signature of New Custodian Required ► Medallion Guarantee Stamp New Custodian (Notary Seal Is Not Acceptable) Date (mm / dd / yyyy)





## 10. Distribution for new account

Bank Routing Number – this is a nine-digit number.  Bank Account Number – account numbers vary in length and must not include check numbers.
DO NOT USE YOUR CREDIT CARD NUMBER. If you are unsure of your Bank Routing Number or Bank Account Number, please check with your financial institution.
Please DO NOT provide a check number in the fields above. This is commonly listed with your Account and Bank Routing Numbers on your check.
Checking Account Savings Account
Name(s) that appear on the account at your financial institution
Name of Financial Institution
I/We hereby authorize Computershare as disbursing agent for the payer, to initiate credit entries to my (our) account; or if necessary debit entries or adjustments for any credit entries in error. This authority is to remain in effect until my (our) written authorization to terminate electronic funds transfer is received in time to afford Computershare reasonable opportunity to act on it or until this service is terminated by the payer or Computershare. All registered holders as well as all individuals listed on the financial account must sign below.
Signature 1 - Please keep signature within the box. Signature 2 - Please keep signature within the box. Date (mm / dd / yyyy)
Telephone Number (do not use hyphens)

# 11. FINANCIAL ADVISOR / FINANCIAL INSTITUTION INFORMATION

A. Financial Advisor Information Financial Advisor Name		
Financial Advisor CRD Number	Telephone Number (do not use hyphens) Ext.	
Financial Advisor E-mail Address		
Financial Advisor Street Address/PO Box		
City	State Zip Co	ode
B. Financial Institution Information Financial Institution Name		
Financial Institution CRD Number	Telephone Number (do not use hyphens) Ext.	
Financial Institution Street Address/PO Box		
City	State Zip Co	ode

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A. Taxpayer Identification Number (TIN Enter the TIN for the new Holder or new Custodian in the For other entities, it is your Employer Identification Numl backup withholding. COMPLETE ONLY ONE BOX.	appropriate box. For individuals,		
Social Security Number (do not use hyphens)		Employer Identification Number (do not use	hyphens)
	OR		
B. Federal Tax Classification			Limited Liability Company
Check appropriate box (required); check only <b>ONE</b> of the follows	owing boxes:		or
Individual / Sole Proprietor or Single- Member LLC Note: For a single-member LLC that is disregarded, c	S Corporation  theck the appropriate box above for the	Partnership Trust / Estate ne tax classification of the single-member owner.	Other Classification If you are an LLC or Other Classification, do not complete this form. You must complete an IRS Form W-9. This form can be found on the IRS website at <a href="https://www.irs.gov">www.irs.gov</a> . See "Limited Liability
C. Exempt Payee Code (if any)			Company or Other Classification" on the back of this form for more information.
If you are exempt from backup withholding, e See Exempt payee codes on the back of this		de that may apply to you.	Exemption from FATCA reporting code (if any)  Not Applicable  (Applies to accounts maintained outside the U.S.)
D. Certification			
Under penalties of perjury, I certify that:  1. The number shown on this form is my correct Taxpayer Id  2. I am not subject to backup withholding because: (a) I am backup withholding as a result of a failure to report all inte  3. I am a U.S. citizen or other U.S. person (defined on rever  4. The FATCA code(s) entered on this form (if any) indicating  Certification Instructions. You must cross out item 2 above all interest and dividends on your tax return.  This form must be signed and dated for us to accept as p	exempt from backup withholding, or erest or dividends, or (c) the IRS has se).  g that I am exempt from FATCA represent you have been notified by the IRS	s notified me that I am no longer subject to bac orting is correct (defined on reverse). S that you are currently subject to backup with	ckup withholding, and
Signature - Please keep signature within the box.	Date (mm / dd / yyyy)	Telephone N	umber (do not use hyphens)



## How to complete this form

#### **Backup Withholding**

The Internal Revenue Service (IRS) requires us to withhold taxes for the applicable rate of backup withholding for U.S. persons without a W-9 tax certification who are not otherwise exempt. Parties acting as disbursement agents, such as Computershare, must withhold and pay to the IRS the applicable tax rate of such payments under certain conditions. This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, and royalties. Supplying us with your correct Taxpayer Identification Number (TIN), and signing this form will generally allow you to receive your payments without being subject to backup withholding. Failure to supply your TIN, or supplying us with an incorrect TIN, could result in a \$50.00 penalty being assessed by the IRS.

Receipt of a completed Form W-9 will discontinue backup withholding unless otherwise required.

#### What Name and Number To Give the Requester

		•
	For this type of account:	Give name and SSN of:
1.	Individual	The individual
2.	Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account
3.	Custodian account of a minor (Uniform Gift to Minors Act)	The minor
4.	a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee
	b. So-called trust account that is not a legal or valid trust under state law	The actual owner
5.	Sole proprietorship or disregarded entity owned by an individual	The owner
6.	Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1.671-4(b)(2)(i)(A))	The grantor
	For this type of account:	Give name and EIN of:
7.	Disregarded entity not owned by an individual	The owner
8.	A valid trust, estate, or pension trust	Legal entity
9.	Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10	. Association, club, religious, charitable, educational, or other tax- exempt organization	The organization
11.	Partnership or multi-member LLC	The partnership
12	. A broker or registered nominee	The broker or nominee
13	Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14	Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1.671-4(b)(2)(i)(B))	The trust

Exempt payee code. Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends. Corporations are not exempt from backup withholding for payments made in settlement of payment card or third native network transactions.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following codes identify payees that are exempt from backup withholding:

- 1 -- An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2 -- The United States or any of its agencies or instrumentalities
- 3 A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4 -- A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5 A corporation
- 6 A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States
- 7 A futures commission merchant registered with the Commodity Futures Trading Commission
- 8 A real estate investment trust
- 9 An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10 -- A common trust fund operated by a bank under section 584(a)
- 11 -- A financial institution
- 12 A middleman known in the investment community as a nominee or custodian
- 13 A trust exempt from tax under section 664 or described in section 4947

## **Limited Liability Company or Other Classification**

If you are a Limited Liability Company or Other entity, complete an IRS Form W-9 found on the IRS website <a href="www.irs.gov">www.irs.gov</a>. Be sure to include the information required in the IRS instructions for a Limited Liability Company (LLC) or for Other entities on page 2. Return the completed form to the address below.

**Definition of a U.S. Person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien.
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations Section 301.7701-7).

**Exemption from FATCA reporting:** If you are submitting this form for an account that is maintained in the United States, you are exempt from FATCA reporting.

