June 25, 2025

Via USPS Priority Mail
Computershare
P.O. Box 43078
Providence, RI 02940-3078

Re: Susan C. Blackwood, deceased October 9, 2023
Account No.:C0005618193
Name of Stock: Verizon Communications Inc.

To Whom It May Concern:

I am the Executor of the Estate of Susan C. Blackwood. I would like to transfer the shares of Verizon Communications Inc. referenced above to the Estate of Susan C. Blackwood. To facilitate the transfer, please find enclosed the following documents:

- Transfer Request for Account No. C0005618193 – Verizon Communications, Inc.
- Affidavit of Domicile
- Copy of taxpayer Identification Number and Certification (Form W-9) and Notice of Employer Identification Number from IRS
- Original certificate No. NY 143005, dated January 26, 1994 – 37 shares

I prefer to use the Medallion Waiver Option in place of the stamp. Accordingly, also enclosed is a check payable to Computershare in the amount of $50.00, and a copy of my driver's license.

Immediately upon transfer of the shares, I instruct Computershare Investor Services to liquidate the shares and credit the proceeds to the following bank account:

- **Bank Name:** Valley National Bank
- **Bank Account Number:** 4377 24 9806
- **Routing Number:** 021201383
- **Account Type:** Checking

If you have questions or need any additional information, feel free to contact me at nallawollen@gmail.com. You may also contact and share information with my attorney, Kristin A. Canty, by email at kcanty@kcantylaw.com and by phone at 201-786-2000.

Thank you for your prompt attention to this matter.

Sincerely,

Nalla M. Wollen, Executor

Enclosures

Cc: Kristin A. Canty, Attorney at Law LLC

Computershare

Computershare
PO Box 43078
Providence, RI 02940-3078
www.computershare.com/investor

Susan C. Blackwood
Name of Current Account Holder
1010 Kendal Way
Address
Sleepy Hollow, NY 10591-1055
City, State, Zip

Current Holder Account Number
C00056181 93

Company Name
Verizon Communications Inc.

Transfer Request — See enclosed instructions

PLEASE PRINT CLEARLY

CURRENT HOLDER INFORMATION

Shares to be Transferred

PLEASE NOTE: Whole shares cannot be divided into fractional shares.

1 Date of death (mm / dd / yyyy) 10 / 09 / 2023

2 Daytime Telephone Number 201 - 786 - 2000

3 ☒ **Transfer ALL Shares** (all book-entry shares and any certificated shares submitted)
If this box is checked, do not complete sections 4, 5 and 6.

PARTIAL TRANSFER:

4 **DRS Book-Entry Shares** (number of whole shares to transfer)

5 **Certificated Shares** (number of whole shares to transfer)

IMPORTANT:
Original certificate(s) must be submitted for your transfer to be executed.

6 **Investment Plan Book-Entry Shares** (number of whole and/or fractional shares to transfer, if applicable)

7 ☐ **Check Replacements:** Check this box to have uncashed checks in the account reissued in the original issued name. Please see FAQ for details on fees.

8 **Authorized Signatures** — This section must be signed and stamped for your transfer to be executed.

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.

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).**

Required ► Medallion Guarantee Stamp
(Notary Seal is Not Acceptable)

Affix the medallion stamp below **OR** if your total account value is under $10,000, and you live in the United States, you may be eligible to utilize the Medallion Waiver option. See the cover letter for further details and instead use this box to record the check number you will be enclosing in non-refundable payment of the Medallion Waiver option, along with a copy of a government issued photo ID if electing the option not to provide a Medallion Signature Guarantee stamp.

Fee Received
$ 50 —
Ck # 1086

Signature of All Current Holders or Legal Representatives

Date (mm / dd / yyyy)

IMPORTANT ► You must complete both sides of this form for it to be valid.

E278UTR

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Computershare

Transfer Request — See enclosed instructions

PLEASE PRINT CLEARLY

NEW HOLDER / RECIPIENT INFORMATION

• Please complete for each new holder • Use additional pages as necessary

9 Account Type (mark only one box with an "X"):

- [ ] Individual (complete A, B, C, G & H)
- [ ] Custodial with Minor (complete A, B, C, D, G & H)
- [ ] Trustee/Trust (complete A-H)
- [ ] Joint (complete A, B, C, D, G & H)
- [x] Estate (complete A, B, C, E, G & H)
- [ ] Other (indicate type and complete A, B, C, D, G & H) _____

A New Holder's Existing Account Number (if applicable):

B *Social Security Number (SSN) or Employer Identification Number (EIN) *(do not use hyphens)*: 336556451

SSN [ ] EIN [x] (check one box above)

C Name (First, MI, Last) - Individual / Custodian / Trustee / Executor / Other: NALLA M WOLLEN

D Name (First, MI, Last) - Joint Holder / Minor / Co-Trustee / Other (if applicable):

E Trust / Estate Name (if applicable): ESTATE OF SUSAN C BLACKWOOD

Trust / Estate Name - *continued*:

F Date of Trust (mm / dd / yyyy) (if applicable): / /

G Address Number and Street Name / PO Box: 38 NORTH ROAD

Apt. / Unit Number:

H City: HASKELL

State: NJ

Zip Code: 07420

10 Purpose for Transfer/Cost Basis Data

Please check off the applicable purpose of 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 receive documentation that this is a decedent transfer (i.e. Affidavit of Domicile) in which case the transfer will be treated as an inheritance. We recommend that you consult with your tax advisor regarding the tax implications for each type of 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 selection. Please see section 10 of How to Complete the Transfer Request Form for further details.

- [ ] Private Sale — Date of Sale: _____ — Cost Per Share: _____ US Dollars
- [ ] Gift — Date of Gift: _____
- [x] Inheritance — Date of Death: 10/09/2023 — Value Per Share: _____ US Dollars
  (If blank we will default to the effective date of the transfer.)
- [ ] No Change of Ownership *(please specify)* _____

E279UTR

Computershare

Computershare
PO Box 43078
Providence, RI 02940-3078
www.computershare.com/investor

Estate of Susan C. Blackwood
Name
38 North Rd
Address
Haskell, NJ 07420-1455
City, State, Zip

Holder Account Number
C00056 18193

Company Name
Verizon Comm. Inc

Use black ink. Print in CAPITAL letters inside the grey areas as shown in this example. A B C 1 2 3 X

Form W-9 Request for Taxpayer Identification Number and Certification

Dear Shareholder:
Our records indicate that your U.S. Social Security Number or Employer Identification Number is not certified. If this Form W-9 is not completed and returned, your account may be subject to backup withholding at the applicable tax rate on all dividends and sale proceeds. For joint tenant accounts, the TIN provided must belong to the first owner listed above to avoid backup withholding.

A. Taxpayer Identification Number (TIN)

Enter your TIN for the above registered name and address in the appropriate box. For individuals, this is your Social Security number (SSN). For other entities, it is your Employer Identification Number (EIN). COMPLETE ONLY ONE BOX.

Social Security Number

OR

Employer Identification Number
3 3 6 5 5 6 4 5 1

B. Federal Tax Classification

Check appropriate box (required); check only **ONE** of the following boxes:

☐ Individual ☐ C Corporation ☐ S Corporation ☐ Partnership ☒ Trust/Estate

Limited Liability Company (LLC) or Partnership, Trust/Estate or other classification

Do not use this form if you are an LLC, or if you are a Partnership, or Trust/estate with any foreign partners, owners, or beneficiaries, and you are providing this form **to a partnership, trust, or estate**. You must complete an IRS Form W-9. This form can be found on the IRS website at **www.irs.gov**.

C. Exempt Payee Code (if any)

☐ If you are exempt from backup withholding, enter in the Exemptions box, any code that may apply to you. See Exempt payee codes on the back of this form.

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 Identification Number, and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined on reverse).
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct (defined on reverse).

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

Signature of U.S. Person (please keep signature within the box) Sally McWhorter

Date (mm/dd/yyyy) 6/25/2025

E28UW9

0407ID-PRV78 (rev. 8/24)-WEB

AFFIDAVIT OF DOMICILE

To be completed for decedent transfers only.

Account Name: Susan C. Blackwood Account Number: C00056 18193

Name of Stock: Verizon Communications Inc.

Deceased Holder's Taxpayer Identification or Social Security Number: 140-32-3243

The undersigned, Nalla M. Wollen

residing at 38 North Road, Haskell, NJ 07420-1455

being duly sworn, deposes and says that he/she is the Executor

Describe your status, i.e. Executor, Administrator, Survivor in Joint Tenancy, etc.

(If a corporate fiduciary show title of affiant and name of corporation)

of (the estate of) the Estate of Susan C. Blackwood

who died on October 9, 2023

that at the time of death the domicile (legal residence) of said decedent was at

1010 Kendal Way, Sleepy Hollow, NY 10591-1055

and that (s)he resided in the State of New York

for 2 years prior to death and was not a resident of any (other) state within the United States of America at time of death.

Signature: Nalla M Wollen

Sworn to before me, a notary public, this

25 day of June, 20 25

Signature: Kristin A Canty

(official administering oath)

Title: NJ Notary Public

My commission expires 10/24/26

AFFIX SEAL

KRISTIN A. CANTY
NOTARY PUBLIC
State of New Jersey
ID # 50048306
My Commission Expires 10/24/26

Raised Seal

00TH4A

EQSAFF 12-04-07

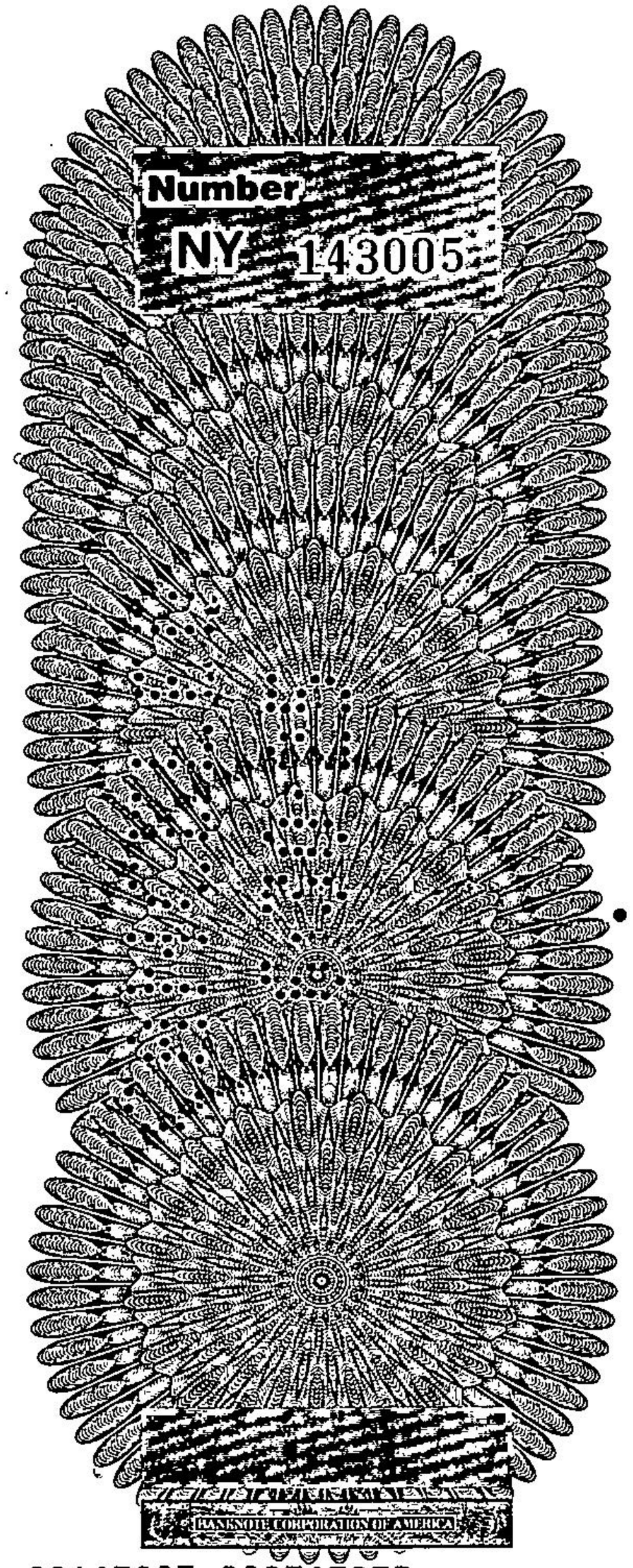
[illegible]

NEW JERSEY MVC

AUTO DRIVER LICENSE

DL W6271 57774 62426 CLASS D
DOB 12-10-1942
ISS 12-07-2023 EXP 12-10-2027
WOLLEN
NALLA MELODIE
38 NORTH RD LAKE IOSCO
HASKELL, NJ 07420-1458
END NONE
RESTR 1
GENDER F HGT 5'-04" EYES GRN ORGAN DONOR
LIC
REN C

I'm a registered organ donor in NJ!!



00143005 000343259

Bell Atlantic Corporation

Common Stock
Incorporated under the laws of the State of Delaware

See reverse for certain definitions

CUSIP 077853 10 9

Shares

37

This is to Certify that

SUSAN C. BLACKWOOD

37
37
37
37
37

is the owner of

THIRTY-SEVEN

fully paid and non-assessable shares of the Common Stock of

Bell Atlantic Corporation transferable on the books of the corporation by the holder hereof in person or by duly authorized attorney on surrender of this certificate properly endorsed. This certificate is not valid until countersigned by the Transfer Agent and registered by the Registrar. Witness the Seal of the corporation and the signatures of its duly authorized officers.

Alexander Graham Bell

Countersigned and Registered:
The Bank of New York,
Transfer Agent and Registrar
By

Authorized Officer

Dated: JAN 26, 1994

Treasurer

Chairman of the Board

BELL ATLANTIC CORPORATION
SEAL

---0

Bell Atlantic Corporation

The Corporation will furnish to any stockholder, upon request to its principal office or to any of its transfer offices and without charge, a full statement of the designation, relative rights, preferences and limitations of its Common Stock and of each series of its Series Preferred Stock and of each series of its Series Preference Stock so far as the same have been fixed and and a full statement of the authority of the board of directors to designate and fix the relative rights, preferences and limitations of each series of its Series Preferred Stock and of each series of its Series Preference Stock so far as the same have not been fixed.

This certificate also evidences and entitles the holder hereof to certain Rights as set forth in the Rights Agreement dated as of March 28, 1989 (as amended from time to time, the "Rights Agreement"), the terms of which are hereby incorporated herein by reference and a copy of which is on file at the principal offices of the Corporation. The Corporation will mail to the holder of this certificate a copy of the Rights Agreement without charge promptly upon written request. Under certain circumstances, the Rights will be evidenced by separate certificates and will no longer be evidenced by this certificate. Under certain circumstances, Rights issued to Acquiring Persons (as defined in the Rights Agreement) or related persons and subsequent holders thereof may become null and void.

The following abbreviations shall be construed as though the words set forth below opposite each abbreviation were written out in full where such abbreviation appears:

TEN COM	— as tenants in common	(Name) CUST (Name) UNIF GIFT MIN ACT (State)	— (Name) as Custodian for (Name) under the (State) Uniform Gifts to Minors Act
TEN ENT	— as tenants by the entireties		
JT TEN	— as joint tenants with right of survivorship and not as tenants in common	(Name) CUST (Name) UNIF TRANS MIN ACT (State)	— (Name) as Custodian for (Name) under the (State) Uniform Transfers to Minors Act

Additional abbreviations may also be used though not in the above list.

For Value received, _____ hereby sell, assign and transfer _____ Shares represented by the within Certificate unto

PLEASE PRINT OR TYPE:
SOCIAL SECURITY NUMBER OR TAXPAYER IDENTIFYING NUMBER, NAME AND ADDRESS, INCLUDING ZIP CODE, OF ASSIGNEE

SHARES

PLEASE PRINT OR TYPE:
SOCIAL SECURITY NUMBER OR TAXPAYER IDENTIFYING NUMBER, NAME AND ADDRESS, INCLUDING ZIP CODE, OF ASSIGNEE

SHARES

PLEASE PRINT OR TYPE:
SOCIAL SECURITY NUMBER OR TAXPAYER IDENTIFYING NUMBER, NAME AND ADDRESS, INCLUDING ZIP CODE, OF ASSIGNEE

SHARES

and do hereby irrevocably constitute and appoint _____ Attorney to transfer the said shares on the records of the within named Corporation with full power of substitution in the premises.

Dated, _____ _____

_____

IMPORTANT { BEFORE SIGNING, READ AND COMPLY CAREFULLY WITH REQUIREMENTS PRINTED BELOW.

THE SIGNATURE(S) TO THIS ASSIGNMENT MUST CORRESPOND WITH THE NAME(S) AS WRITTEN UPON THE FACE OF THE CERTIFICATE IN EVERY PARTICULAR WITHOUT ALTERATION OR ENLARGEMENT OR ANY CHANGE WHATEVER. THE SIGNATURE(S) SHOULD BE GUARANTEED IN ACCORDANCE WITH THE TRANSFER AGENT'S SPECIFICATIONS.

KRISTIN A. CANTY
ATTORNEY AT LAW LLC

June 25, 2025

Via USPS Regular Mail
Computershare
P.O. Box 43078
Providence, RI 02940-3078

Subject: **Estate of Susan C. Blackwood**
Account No.: C0000620921
Capital One Financial Corporation

To Whom It May Concern:

As you may know, this firm represents Nalla M. Wollen, the Executor of the Estate of Susan C. Blackwood (the "Estate"). The Executor wishes to transfer the decedent's shares of Capital One Financial Corporation held in the above referenced account to the Estate.

To facilitate this transfer, please find enclosed the following documents:

- Transfer Request form
- Form W-9
- Affidavit of Domicile
- Check payable to Computershare in the amount of $50.00 as payment for the Medallion Waiver option.

Should you require any additional documentation or verification, feel free to contact our firm by email at kcanty@kcantylaw.com or by phone at 201-786-2000.

Thank you for your prompt attention to this matter.

Sincerely,

Kristin A. Canty, Esq.

Cc: Nalla M. Wollen

Enclosures

Computershare

Computershare
PO Box 43078
Providence, RI 02940-3078
www.computershare.com/investor

Susan C. Blackwood
Name of Current Account Holder
38 North Road
Address
Haskell, NJ 07420
City, State, Zip
C/o Nalla M. Wollen

Current Holder Account Number
C00006 20921

Company Name
Capital One

Transfer Request — See enclosed instructions

PLEASE PRINT CLEARLY

CURRENT HOLDER INFORMATION

Shares to be Transferred

PLEASE NOTE: Whole shares cannot be divided into fractional shares.

2 Daytime Telephone Number: 201 - 786 - 2000

1 Date of death (mm / dd / yyyy): 10 / 09 / 2023

3 ☒ **Transfer ALL Shares** (all book-entry shares and any certificated shares submitted)
If this box is checked, do not complete sections 4, 5 and 6.

PARTIAL TRANSFER:

4 DRS Book-Entry Shares (number of whole shares to transfer)

5 Certificated Shares (number of whole shares to transfer)

IMPORTANT:
Original certificate(s) must be submitted for your transfer to be executed.

6 Investment Plan Book-Entry Shares (number of whole and/or fractional shares to transfer, if applicable)

7 ☐ **Check Replacements:** Check this box to have uncashed checks in the account reissued in the original issued name.

8 Authorized Signatures — This section must be signed and stamped for your transfer to be executed.

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.

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).**

Required ► Medallion Guarantee Stamp
(Notary Seal Is Not Acceptable)

Affix the medallion stamp below OR if your total account value is under $10,000, and you live in the United States, you may be eligible to utilize the Medallion Waiver option. See the cover letter for further details and instead use this box to record the check number you will be enclosing in non-refundable payment of the Medallion Waiver option, along with a copy of a government issued photo ID if electing the option not to provide a Medallion Signature Guarantee stamp.

Fee Received
$50
Ck # 1085

Signature of All Current Holders or Legal Representatives

Date (mm / dd / yyyy): 06 / 25 / 2025

IMPORTANT ► You must complete both sides of this form for it to be valid.

E278UTR

0251OB_GEN_PRV78_WEB_ONLY

Computershare

Transfer Request — See enclosed instructions

PLEASE PRINT CLEARLY

NEW HOLDER / RECIPIENT INFORMATION

• Please complete for each new holder • Use additional pages as necessary

9 Account Type (mark only one box with an "X"):

- [ ] Individual (complete A, B, C, G & H)
- [ ] Custodial with Minor (complete A, B, C, D, G & H)
- [ ] Trustee/Trust (complete A-H)
- [ ] Joint (complete A, B, C, D, G & H)
- [x] Estate (complete A, B, C, E, G & H)
- [ ] Other (indicate type and complete A, B, C, D, G & H) _____

A New Holder's Existing Account Number (if applicable):

B *Social Security Number (SSN) or Employer Identification Number (EIN) *(do not use hyphens)*: 336556451

SSN [ ] EIN [x] (check one box above)

C Name (First, MI, Last) - Individual / Custodian / Trustee / Executor / Other: NALLA M WOLLEN EXECUTOR

D Name (First, MI, Last) - Joint Holder / Minor / Co-Trustee / Other (if applicable):

E Trust / Estate Name (if applicable): ESTATE OF SUSAN C BLACKWOOD

Trust / Estate Name - *continued*:

F Date of Trust (mm / dd / yyyy) (if applicable):

G Address Number and Street Name / PO Box: 38 NORTH ROAD

Apt. / Unit Number:

H City: HASKELL

State: NJ

Zip Code: 07420

10 Purpose for Transfer/Cost Basis Data

Please check off the applicable purpose of 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 receive documentation that this is a decedent transfer (i.e. Affidavit of Domicile) in which case the transfer will be treated as an inheritance. We recommend that you consult with your tax advisor regarding the tax implications for each type of 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 selection. Please see section 10 of How to Complete the Transfer Request Form for further details.

- [ ] Private Sale — Date of Sale: _____ Cost Per Share: _____ US Dollars
- [ ] Gift — Date of Gift: _____
- [x] Inheritance — Date of Death: 10/09/2023 Value Per Share: _____ US Dollars
  (If blank we will default to the effective date of the transfer.)
- [ ] No Change of Ownership *(please specify)* _____

E279UTR

Computershare

Computershare
PO Box 43078
Providence, RI 02940-3078
www.computershare.com/investor

Estate of Susan C. Blackwood
Name
38 North Road
Address
Haskell, NJ 07420-1455
City, State, Zip

Use black ink. Print in CAPITAL letters inside the grey areas as shown in this example. ABC 123 X

Form W-9 Request for Taxpayer Identification Number and Certification

Dear Shareholder:

Our records indicate that your U.S. Social Security Number or Employer Identification Number is not certified. If this Form W-9 is not completed and returned, your account may be subject to backup withholding at the applicable tax rate on all dividends and sale proceeds.
For joint tenant accounts, the TIN provided must belong to the first owner listed above to avoid backup withholding.

A Taxpayer Identification Number (TIN)

Enter your TIN for the above registered name and address in the appropriate box. For individuals, this is your Social Security number (SSN). For other entities, it is your Employer Identification Number (EIN). COMPLETE ONLY ONE BOX.

Social Security Number

OR

Employer Identification Number: 33 6556451

B Federal Tax Classification

Check appropriate box (required); check only **ONE** of the following boxes:

- [ ] Individual/Sole Proprietor or Single-Member LLC
- [ ] C Corporation
- [ ] S Corporation
- [ ] Partnership
- [x] Trust/Estate

Note: For a single-member LLC that is disregarded, check the appropriate box above for the tax classification of the single-member owner.

Limited Liability Company or 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 www.irs.gov. See "Limited Liability Company or Other Classification" on the back of this form for more information.

C Exempt Payee Code (if any)

If you are exempt from backup withholding, enter in the Exemptions box, any code that may apply to you. See Exempt payee codes on the back of this form.

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 Identification Number, and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined on reverse).
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct (defined on reverse).

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

This form must be signed and dated for us to accept as proper certification.

Sign Here Signature of U.S. Person - Please keep signature within the box | Date (mm/dd/yyyy): 06/25/25 | Daytime Telephone Number: 2017862000

Send form to Computershare. Do not send to the IRS.

E23UW9

022W0A_PRV78_TR_WEB

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 party 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 www.irs.gov. 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.

Please return the completed form to:

Computershare Tax Operations
PO Box 43078
Providence, RI 02940-3078

DID YOU KNOW?
You can certify your account online by visiting us at the website on the reverse side of this form.
While online, join the thousands of shareholders that have signed up for electronic delivery!

AFFIDAVIT OF DOMICILE

To be completed for decedent transfers only.

Account Name: Susan C. Blackwood Account Number: C 0000620921

Name of Stock: Capital One

Deceased Holder's Taxpayer Identification or Social Security Number: 140-32-3243

The undersigned, Nalla M. Wollen

residing at 38 North Road, Haskell, NJ 07420-1455

being duly sworn, deposes and says that he/she is the Executor

Describe your status, i.e. Executor, Administrator, Survivor in Joint Tenancy, etc.

(If a corporate fiduciary show title of affiant and name of corporation)

of (the estate of) Estate of Susan C. Blackwood

who died on October 9, 2023

that at the time of death the domicile (legal residence) of said decedent was at

1010 Kendall Way, Sleepy Hollow, NY 10591-1055

and that (s)he resided in the State of New York

for 2 years prior to death and was not a resident of any (other) state within the United States of America at time of death.

Signature: Nalla M Wollen

Raised Seal

Sworn to before me, a notary public, this

25 day of June, 20 25

AFFIX SEAL

Signature: Kristin A Canty

(official administering oath)

Title: NJ Notary Public

My commission expires 10/24/26

KRISTIN A. CANTY
NOTARY PUBLIC
State of New Jersey
ID # 50048306
My Commission Expires 10/24/26

00TH4A

EQSAFF 12-04-07

Computershare

How to Complete the Transfer Request Form

SEE FAQs FOR MORE INFORMATION

CURRENT HOLDER INFORMATION

Shares to be Transferred

See the following Frequently Asked Questions (FAQs) section for more information about number and type of shares. All shares transferred will be in book-entry form unless otherwise requested in writing.

1 Enter date of death as recorded on the death certificate.

2 Enter a daytime telephone number where you can be reached should we have any questions regarding this transfer request.

3 Check this box only if you wish to transfer all of the shares in the decedent's account. These shares include Direct Registration System (DRS) and investment plan shares held in book-entry form, as well as any certificates submitted. **If this box is checked, do not complete sections 4, 5 and 6.**

4 Enter the number of DRS book-entry shares you wish to transfer.

5 Enter the number of certificated shares you wish to transfer. IMPORTANT: In order to transfer certificated shares, you must submit the original certificates with this form. If the number of shares to transfer is less than the number of shares on the certificate, the balance will be put into DRS book-entry form in the name of the current holder and a statement will be mailed.

6 Enter the number of investment plan book-entry shares you wish to transfer. If you would like to transfer all of the decedent's investment plan shares, you must enter the exact number of shares the decedent held including any partial share amount.

7 Check Replacements: Check this box with an 'X' to replace any checks that may be outstanding on the account (please see FAQ for details). Reissued checks will be made payable as originally issued. Not all accounts will have outstanding checks but Computershare will review and replace if applicable. Checks are sent to the address of record for the original account.

8 **Authorized Signatures – This section must be completed for your transfer to be executed.**

After reviewing the form to ensure that all information provided is correct, please sign and date the form in the appropriate boxes. Please note, if you are signing on behalf of the current registered holder you must indicate your capacity (e.g. John Smith, Executor).

Signature(s) must be stamped with a Medallion Signature Guarantee from a qualified financial institution, such as a commercial bank, savings bank, savings and loan, US stockbroker and securities dealer, or credit union that is participating in an approved Medallion Signature Guarantee Program. The guarantor institution should verify the medallion stamp is sufficient to cover the value of assets being transacted upon. **A Notary Seal is NOT acceptable.**

NEW HOLDER/RECIPIENT INFORMATION

If you are transferring to multiple new holders, feel free to photocopy the "New Holder/Recipient" page of the form prior to completion. This page must be completed for each new holder. Please be sure to clearly note the top of each page with the number of shares (not a percentage) to be transferred to each recipient.

9 **Account Type** – Mark only one box with an "X" indicating the type of account into which you are transferring shares. Complete additional sections as indicated.

Definitions of Account Types:

- An **individual** registration, e.g. John T. Smith, is used if there is only one account holder. There is only one individual listed on the account.
- A **joint tenant** registration with right of survivorship, e.g. John T. Smith and Jane T. Doe JT TEN, is used if there are two or more equal holders listed on the account. Please note, the registration must read "and." The word "or" cannot appear in the registration. In the event of the death of one of the listed holders, the securities in the account become the property of the surviving joint holder.
- A **trust** registration, e.g. John T. Smith and Jane T. Doe TR UA 4-3-66 Smith Family Trust, is used to allow the appointed trustees to handle the securities. All acting trustees are listed on the account, which also names the legal name and date of the trust agreement. To register shares under a trust, a legal trust agreement must exist.
- A **custodial with minor** registration under the Uniform Gifts to Minors Act (UGMA) or Uniform Transfer to Minors Act (UTMA) of the state of the donor, the state of the custodian or the state of the minor, e.g. John Doe Custodian for Jonathan Doe UTMA NY, is used if the securities are held by a custodian on behalf of a minor. The named custodian is given the legal authority to act on the account on behalf of the minor, until the minor reaches the age of majority under the applicable state's law. The Social Security number associated with the account is that of the minor.
- An **estate** registration, e.g. John Smith Executor for the Jane Doe Estate, is used to allow a court-appointed legal representative to act on the account. The account is registered in the decedent's estate.
- A **transfer on death** (TOD) registration is a type of account registration that allows account owners (individual or joint owners with rights of survivorship) to designate beneficiaries to receive certain assets at the time of their respective deaths, without going through probate. Please note, the transfer of stock to a beneficiary or beneficiaries is not automatic and will require notification of death of the account owner(s) and certain documentation to be sent to the transfer agent. To register a TOD account and designate a beneficiary or beneficiaries, go to www.computershare.com/TOD.
- **Other** common registrations include community property, Limited Liability Company (LLC), nominee, partnership, tenants by entireties and unincorporated association.

A If the new holder already owns stock in the company under the exact account name being requested, transfer the shares to the existing account by entering the new holder's 11-digit Computershare account number, which starts with a "C".

B Enter the new holder's 9-digit Social Security Number (SSN) or Employer Identification Number (EIN). Do not include hyphens. If the new account will be in more than one person's name, provide the information for the first name on the account or for the person who will be responsible for paying taxes. If the account is being registered as a custodial account, provide the Social Security Number of the minor.

C Enter the new holder's name (first, middle initial, last) if the account type is individual, custodial, trustee, executor or other.

D Enter the name (first, middle initial, last) of the second new holder on the account if the account type is joint, minor, co-trustee or other (if applicable).

E Enter the name of the trust or estate (if applicable).

F If a trust is entered in section 9E, enter the date of the trust. Leave this section blank if the new account is for an estate or another type of account.

G Enter the street address or PO Box for the new holder whose Social Security Number or Employer Identification Number was entered in section 9B. If applicable, enter apartment or unit number.

H Enter the new holder's city, 2-letter state abbreviation and 5-digit postal zip code.

10 Enter **Purpose for Transfer/Cost Basis Data** instructions for shares acquired after 12/31/2010. Please check off the applicable purpose of the transfer. If this section is not fully completed, all transfers will be treated as Gifts, unless we receive documentation that this is a decedent transfer (i.e. Affidavit of Domicile) in which case the transfer will be treated as an inheritance. We recommend that you consult with your tax advisor regarding the tax implications for each type of transfer.

- Private Sale: Include the Date of Sale and the Cost Per Share.
- Gift: Include the Date of Gift was received or the gift date will default to the date that the transfer is processed.
- Inheritance: Include the Date of Death and Cost per Share or it will default to the date that the transfer is processed.
- No Change of Ownership: Change of name in cases of marriage or divorce, minor coming of age, addition of spouse to registration, etc. Existing cost basis of shares will be carried over to the new account.