NHCohen CAPITAL LLC
MEMBER FINRA

ACCREDITED INVESTOR SUITABILITY FORM

Please mail or fax this completed form to:
NHCohen Capital LLC 2 Park Avenue – 14th Floor, New York, NY 10016
Member FINRA T (212) 498 6960 F (855) 856 6483 www.nhcohenpartners.com

All responses will be kept confidential

PERSONAL BACKGROUND INFORMATION

Name: (First, MI, Last)		Date of Birth:	Social Security/Tax ID No.:
Home Address:		City:	State: / Zip:
Home Phone:	2nd Phone:	Fax No:	Cell No:
E-mail Address:			In what state are you registered to vote?

Business/Profession:		Title:	Company Name:		Employed Since:
Business Address:					
City:	State:	Zip:	Business Phone:	Business Fax:	Business Cell:

To which address would you prefer that correspondence be sent? Home Address ❑ Business Address ❑

STATEMENT AS TO ACCREDITED INVESTOR STATUS

I am qualified to invest as an accredited investor by reason of at least one of the following (check ALL items that apply):

❑ 1. My net worth (either individually or with my spouse, if any), including investments and all property and other assets **excluding** my primary residence, exceeds $1,000,000 (note: if the mortgage on your primary residence is greater than its value, please subtract such difference from your net worth).
❑ 2. My individual annual income was at least $200,000 in each of the two most recent years, and I expect such income in the current year.
❑ 3. My annual income, jointly with my spouse, was at least $300,000 in each of the two most recent years, and I expect such income in the current year.
❑ 4. All of the undersigned entity's equity owners meet at least one of the three tests listed above.
❑ 5. If the undersigned is a partnership, limited liability company or corporation, it has total assets in excess of $5,000,000.
❑ 6. If the undersigned is a revocable trust, it was created by an investor for his or her own benefit, and such investor meets at least one of the first three tests listed above.
❑ 7. If the undersigned is a trust, it has total assets in excess of $5,000,000 and its investment decisions are directed by a sophisticated person.
❑ 8. If the undersigned is a trust, one or more of its trustees is a bank or similar institution with the authority to direct the trust's investments.

OR

❑ 9. The undersigned is not an Accredited Investor because **None of the Above Apply**.

PRIOR INVESTMENT EXPERIENCE AND GOALS

❑ My business or investment experience is such that I can analyze a prospective investment and determine whether it is suitable for me.
❑ I normally consult with an investment advisor before making an investment decision.
❑ I have experience as an investor in:
  - ❑ Stocks which are listed on a national securities exchange
  - ❑ Mutual funds which hold a portfolio primarily consisting of stocks
  - ❑ Taxable bonds or other debt instruments
  - ❑ Tax exempt bonds
  - ❑ Partnerships, limited liability companies, corporations which invest in real estate or real estate investment trusts (REITs)
  - ❑ Other types of investments not mentioned in any previous category (describe): ______________________

Please indicate your Overall Investment Objectives (Rank from 1 through 4 in order of priority; 1 = highest): _____Growth_____Current Income______Tax Deferral______Liquidity	Risk Tolerance (Check One): ❑ Aggressive ❑ Moderate ❑ Conservative	Do Investment Objectives Allow Speculation? ❑ No ❑ Yes	Primary Source of Income: ❑ Investments ❑ Compensation
Please indicate your Real Estate Objectives (Rank from 1 through 4 in order of priority; 1 = highest): _____Growth_____Current Income______Tax Deferral______Liquidity	Please estimate the percent of real estate in your investment portfolio (excluding personal residence):____________%		

I was referred to NHCohen Capital by:

______________________________ ______________________
Signature Date

Rev 1214

PLEASE COMPLETE REVERSE SIDE

ACCREDITED INVESTOR SUITABILITY FORM

CUSTOMER IDENTIFICATION PROGRAM

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, federal law requires financial institutions to obtain, verify, and record information that identifies each person who opens an account. This Notice answers some questions about our Customer Identification Program.

What types of information will I need to provide?

When you open an account, we are required to collect information such as the following:

- Your name
- Date of Birth
- Address
- Identification Number
    - U.S. Citizen: taxpayer identification number (social security number or employer identification number)
    - Non-U.S. Citizen: taxpayer identification number, passport number, and country of issuance, alien identification card number, or government issued identification showing nationality, residence, and a photograph of you.

      You may also need to show your driver's license or other identifying documents.

A corporation, partnership, trust or other legal entity may need to provide other information, such as its principal place of business, local office, employer identification number, certified articles of incorporation, government-issued business license, a partnership agreement or a trust agreement.

U.S. Department of the Treasury, Securities and Exchange Commission, FINRA, and the New York Stock Exchange rules already require you to provide most of this information. These rules also may require you to provide additional information, such as your net worth, annual income, occupation, employment information, investment experience and objectives, and risk tolerance.

ALL INFORMATION WILL BE USED ONLY BY NHCOHEN CAPITAL LLC. SUCH INFORMATION SHALL REMAIN CONFIDENTIAL AND SHALL NOT BE SHARED WITH ANY OTHER PROVIDER OR VENDOR. PLEASE SEE OUR PRIVACY POLICY.

Please indicate one of the following and enclose a copy of your identification with form.

Driver's License No.______________________________

State of Issuance:________________________________

OR

Passport No. ______________________________________

Other Gov't ID: ___________________________________
(Description and #)

INVESTOR REFERRALS

Do you have family or friends who you think could benefit from learning about real estate investment opportunities presented by NHCohen Capital? (All referrals will be kept confidential.)

Name:	Street Address:	
City:	State:	Zip Code:
Daytime telephone number:	Relationship:	
E-mail Address:		

Name:	Street Address:	
City:	State:	Zip Code:
Daytime telephone number:	Relationship:	
E-mail Address:		

If any question, please contact NHCohen Capital Investor Services at: 212-498-6962 or investorservices@nhcohenpartners.com.

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ACCREDITED INVESTOR SUITABILITY FORM
Completion Guidelines

To establish your eligibility for our new offerings, please complete the Accredited Investor Suitability Form. Your personal information will be treated as strictly private – please see our Privacy Policy.

Determination of Accredited Investor Status

For an **Individual**, please read carefully items 1, 2 and 3, and check ALL items that apply.

For a **Partnership, Limited Liability Company or Corporation**, please read carefully items 4 and 5, and check ALL items that apply.

For a **Revocable Trust,** please complete and sign as Trustee in the name of the Trust.

- Please read carefully items 6, 7 and 8, and check ALL items that apply.
- In addition, please have the Grantor of the Trust complete and sign as an individual a separate Accredited Investor Suitability Form (blank form enclosed).

For an **Irrevocable Trust,** please complete and sign as Trustee in the name of the Trust.

- Please read carefully items 7 and 8, and check ALL items that apply.

If **NONE** of items 1 through 8 apply, please check the box:

"The Undersigned is not an Accredited Investor because None of the Above Apply."

Prior Investment Experience and Goals

Please indicate with a ✓ each area of *Prior Investment Experience and Goals*.

- **Overall Investment Objectives and Real Estate Objectives** should be ranked with a *different* number from 1 through 4 for each item, with "1" being the highest priority. Do not enter a check mark or repeat the same number rank.
- Please answer the remaining questions regarding **Risk Tolerance; Speculation; Primary Source of Income;** and **percent of real estate in your investment portfolio (excluding personal residence).**

Please review to assure **all sections are completed**, sign, date and return the form electronically or print the Accredited Investor Suitability Form and mail to NHCohen Capital LLC, 2 Park Avenue, 14th Floor, New York, NY 10016. If you have any question, please call NHCohen Capital Investor Services at 212-498-6962.

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Completion Guidelines

To Trustees of Irrevocable Trusts:

Please complete and sign as Trustee the suitability form in the name of the Trust. In determining accredited status for the Trust, please:

Check box 4 if such item is correct as to all of the Trust's beneficiaries.

In such case, please have each beneficiary complete and sign as an individual a separate Accredited Investor Suitability Form (blank form enclosed). These additional forms are required for the Irrevocable Trust to qualify as an Accredited Investor.

and/or;

Check box 6 if the Trust has total assets in excess of $5 million and its investment decisions are directed by a sophisticated person.

For both forms, please review carefully and complete all sections of Prior Investment Experience and Goals.

Please call NHCohen Capital at 212-498-6962 with any question.