



Please complete the Section that apply to the assets you want to donate.

**5. ASSETS TO BE DONATED (WHOLE SHARES ONLY EXCEPT FOR MUTUAL FUNDS)**

| Transfer All Positions? |                  | If No, provide the lot details below and the total stocks to transfer: |            |
|-------------------------|------------------|--|------------|
| Symbol                  | Number of Shares | Purchase Date  | Price Paid |
| Symbol                  | Number of Shares | Purchase Date  | Price Paid |
| Symbol                  | Number of Shares | Purchase Date  | Price Paid |

**6. EMPLOYEE STOCK PLANS SHARES TO BE DONATED (WHOLE SHARES ONLY)**

**6A. ESPP SHARES**

| Transfer All ESPP Shares? |                  | If No, provide lot details below and the total ESPP Shares to transfer: |                |
|---------------------------|------------------|---|----------------|
| Symbol                    | Number of Shares | Purchase Date   | Purchase Price |
| Symbol                    | Number of Shares | Purchase Date   | Purchase Price |

**6B. RESTRICTED STOCK/PERFORMANCE GRANTS**

| Transfer All Grants? |                  | If No, provide lot details below and the total RSU/PSU shares to transfer: |           |
|----------------------|------------------|--|-----------|
| Grant Type (RSU/PSU) | Grant Date       | Grant Number   | Vest Date |
| Symbol               | Number of Shares | Estimated Cost Basis   |           |

**6C. EXERCISED SHARES**

| Transfer All Exercised Shares? |                  | If No, provide lot details below and the total Exercised Shares to transfer: |  |
|--------------------------------|------------------|--|--|
| Grant Date                     | Grant Number     | Exercise Date  |  |
| Symbol                         | Number of Shares | Estimated Cost Basis   |  |

**7. ACCOUNT HOLDER SIGNATURES**

I authorize E\*TRADE Securities LLC to transfer the securities or cash as listed above. I understand that upon receiving this form, E\*TRADE Securities will cancel any open orders that will affect the transfer.

X

Signature of Primary Account Holder                      Date (MM/DD/YY)

X

Signature of Co-Account Holder                      Date (MM/DD/YY)

Please print your name here

Please print your name here

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