DISCLOSURE OF OWNERSHIP/PRINCIPALS

| Business Entity | Type | (Please selec | t one) | | | | | | | | | |
|---|---------|---------------------------------------|--|------------------------------|---------------|--|-------------------------------------|--|------------------------------|------|--------------|----------------------------|
| Sole Proprietorship | | tnership | | imited ility Company | X Corporation | n | ☐ Trus | | ☐ Non-Profit Organization | | ☐ Other | |
| Business Designation Group (Please select all that apply) | | | | | | | | | | | | |
| | MBE WBE | | | □ SBE | □ PBE | | | □ VET | | DVET | | □ ESB |
| Minority Business Enterprise | | Women-Owned Business Enterprise | | Small Business Enterprise | | Physically Challenged Business Enterprise | | | eteran Owned usiness | | | Emerging Small Business |
| | | | | | | | | | | | | |
| Number of Clark County Nevada Residents Employed: 4 | | | | | | | | | | | | |
| | | | No. 1. 10. 10. 10. 10. 10. 10. 10. 10. 10. | | | | | | | | | |
| Corporate/Business Entity Name: | | | Meeder Public Funds, Inc. d/b/a Meeder Investment Management, Inc. | | | | | | | | | |
| (Include d.b.a., if applicable) Street Address: | | | 6125 Memoriał Drive | | | , | Website: meederinvestment.com | | | | | |
| City, State and Zip Code: | | | Dublin, OH 43017 | | | | | POC Name: Tonya Dazzio Email: tdazzio@meederinvestment.com | | | | |
| Tala hana kia | | | 614.766.7000 | | | | | Fax No: | | | | |
| Nevada Local Street Address: | | | 10655 Park Run Drive, Suite 120 | | | | | Website: meederinvestment.com | | | | |
| (If different from above) | | | | | | | | | | | | |
| City, State and Zip Code: | | | Las Vegas, NV 89144 | | | | | Local Fax No: Local POC Name: Tonya Dazzio | | | | |
| Local Telephone No: | | | 702.575.6592 | | | - 1 | Email: tdazzio@meederinvestment.com | | | | | |
| All entities, with the exception of publicly-traded and non-profit organizations, must list the names of individuals holding more than five percent (5%) ownership or financial interest in the business entity appearing before the Board. Publicly-traded entities and non-profit organizations shall list all Corporate Officers and Directors in lieu of disclosing the names of individuals with ownership or financial interest. The disclosure requirement, as applied to land-use applications, extends to the applicant and the landowner(s). Entities include all business associations organized under or governed by Title 7 of the Nevada Revised Statutes, including but not limited to private corporations, close corporations, foreign corporations, limited liability companies, partnerships, limited partnerships, and professional corporations. | | | | | | | | | | | | |
| Full Name | | | Title | | | | Title | % Owned (Not required for Publicly Traded Corporations/Non-profit organization | | | licly Traded | |
| The Robert Meeder, Jr. Restated Trust, u | | | u/l/a/ dated President & CEO | | | | 68.25% | | | % | | |
| The Robert S. Meeder, Sr. 2019 Irrevoca | | | ible Trust. CEO Emeritus | | | | | 14.20% | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | _ | | |
| This section is no | | | | | | | | | | | I No | |
| Are any individual members, partners, owners or principals, involved in the business entity, a Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)? | | | | | | | | | | | | |
| Yes No (If yes, please note that County employee(s), or appointed/elected official(s) may not perform any work on professional service contracts, or other contracts, which are not subject to competitive bid.) | | | | | | | | | | | | |
| Do any individual members, partners, owners or principals have a spouse, registered domestic partner, child, parent, in-law or brother/sister, half-brother/half-sister, grandchild, grandparent, related to a Clark County, Department of Aviation, Clark County Detention Center or Clark County Water Reclamation District full-time employee(s), or appointed/elected official(s)? | | | | | | | | | | | | |
| Yes No (If yes, please complete the Disclosure of Relationship form on Page 2. If no, please print N/A on Page 2.) | | | | | | | | | | | | |
| I certify under penalty of perjury, that all of the information provided herein is current, complete, and accurate. I also understand that the Board will not take action on land-use approvals, contract approvals, land sales, leases or exchanges without the completed disclosure form. Signature Print Name | | | | | | | | | | | | |
| Title Date | | | | | | | | | | | | |

DISCLOSURE OF RELATIONSHIP

List any disclosures below: (Mark N/A, if not applicable.)

Signature

Print Name Authorized Department Representative

| NAME OF BUSINESS OWNER/PRINCIPAL | NAME OF COUNTY* EMPLOYEE/OFFICIAL AND JOB TITLE | RELATIONSHIP TO COUNTY* EMPLOYEE/OFFICIAL | COUNTY* EMPLOYEE'S/OFFICIAL'S DEPARTMENT | | | | | |
|--|---|---|--|--|--|--|--|--|
| N/A | N/A | N/A | N/A | | | | | |
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| Reclamation District. "Consanguinity" is a relations "To the second degree of con • Spouse – Registered | ship by blood. "Affinity" is a re | elationship by marriage. didate's first and second degr n – Parents – In-laws (first de | | | | | | |
| For County Use Only: | | | | | | | | |
| f any Disclosure of Relationship is noted above, please complete the following: | | | | | | | | |
| ☐ Yes ☐ No Is the County emp | ployee(s) noted above involved in the | contracting/selection process for thi | s particular agenda item? | | | | | |
| ☐ Yes ☐ No Is the County emp | ployee(s) noted above involved in any | y way with the business in performar | nce of the contract? | | | | | |
| Notes/Comments: | | | | | | | | |
| | | | | | | | | |

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REVISED 7/25/2014