

**FINANCIAL DISCLOSURE FORM  
COVER PAGE**

The Financial Disclosure Form ("Form") must be accurately completed and submitted by each Disclosing Entity. The requirement of disclosure of financial interests is a continuing obligation. If circumstances change and the disclosure is no longer accurate, Disclosing Entities must provide an updated form within three (3) business days of the change. The Form must also be updated annually by July 1. Upon review of the Form, CMS and IOC may request additional information to clarify and/or complete the submission.

Separate forms are required for the QP and Sub-Participant; additional disclosures may be required for parent entities, upon request of CMS or IOC.

This disclosure is submitted for (check one):

- Qualified Purchaser
- Sub Participant

Qualified Purchaser Name: VAP Funding Master Note Trust

Doing Business As (DBA): N/A

Disclosing Entity Name: VAP Funding Master Note Trust

Dates and Jurisdiction of business formation or incorporation, if applicable: 11/30/2012 Delaware Trust

Instrument of Ownership or Beneficial Interest (check one):

- Sole Proprietorship
- Corporate Stock (C-Corporation, S-Corporation, Professional Corporation, Service Corporation)
- Limited Liability Company Membership Agreement (Series LLC, Low-Profit Limited Liability Partnership)
- Partnership Agreement (General Partnership, Limited Partnership, Limited Liability Partnership, Limited Liability Limited Partnership)
- Trust Agreement (Beneficiary)
- Other

If you selected Other, please describe: \_\_\_\_\_.

**STEP 1**  
**SUPPORTING DOCUMENTATION SUBMITTAL**

- All Disclosing Entities must provide a current organizational chart showing its ownership structure and composition.

Disclosing Entities must select one of the options below and select the documentation you are submitting. You must provide the documentation the applicable section requires with this form.

- Option 1 – Publicly Traded Entities
  - 1.A.  Complete Step 2, Option A for each qualifying individual or entity holding any direct or indirect financial interest in the Disclosing Entity.
  - OR
  - 1.B.  Provide a copy of the federal 10-K (attached or electronically), and skip to Step 3.
  
- Option 2 – Privately Held Entities with more than 200 Shareholders
  - 2.A.  Complete Step 2, Tables 1 and 2 for each qualifying individual or entity holding any direct or indirect financial interest in the Disclosing Entity.
  - OR
  - 2.B.  Complete Step 2, Tables 1 and 2 for each qualifying individual or entity holding any direct or indirect financial interest in the Disclosing Entity and attach the information federal 10-K reporting companies are required to report under 17 CFR 229.401.
  
- Option 3 – All other Privately Held Entities
  - 3.A.  Complete Step 2, Tables 1 and 2 (and Table 3 if a TRUST) for each qualifying individual or entity holding any direct or indirect financial interest in the Disclosing Entity.

**STEP 2**  
**DISCLOSURE OF FINANCIAL INTEREST OR BOARD OF DIRECTORS**

Complete for all entities. Additional rows may be inserted into the tables or an attachment if needed.

**Ownership Share and Distributive Income** –Provide the name and address of each person, director, owner, officer, association, financial backer, partnership, other entity, corporation or trust with an indirect or direct financial interest in each qualified purchaser, or entity. If you checked **3.A.** and the entity is a **TRUST** also complete **TABLE 3.**

- Check here if including an attachment with requested information in a format substantially similar to the format below.

TABLE – 1					
Name (first, middle, last, maiden, aliases)	Mailing Address	Percentage of Ownership/Interest	Type of Ownership	Class of Stock	Indirect Earnings

**Distributive Income** – If you selected Option 1.A., 2.A, 2.B. or 3.A. in Step 1, provide the name and address of each individual or entity and their percentage of the Disclosing Entity’s total distributive income.

- Check here if including an attachment with requested information in a format substantially similar to the format below.

TABLE – 2			
Name (first, middle, last, maiden, aliases)	Mailing Address	% of Distributive Income	\$ Value of Distributive Income (Direct and Indirect)

- Check here if including an attachment with requested information in a format substantially similar to the format below.

TABLE – 3		
Name (first, middle, last, maiden, aliases)	Date of Birth	Mailing Address

Certify that the following statements are true.

I have disclosed all individuals or entities that hold an indirect or direct ownership interest in the Disclosing Entity.

Yes  No

I have disclosed distributive income for all individuals or entities that hold an indirect or direct ownership interest in the Disclosing Entity.

Yes  No

I have disclosed any earnings associated with the Vendor Payment Program to any parties not previously disclosed.

Yes  No

**STEP 3**  
**DISCLOSURE OF LOBBYIST OR AGENT**

Yes  No. Have you previously or currently retained or contracted any registered lobbyist, lawyer, accountant, or other consultant to prepare the financial disclosure required under 30 ILCS 540/9?

**STEP 4**  
**SIGN THE DISCLOSURE**

This disclosure is signed, and made for all entities, by an authorized officer or employee on behalf of the Disclosing Entity. This disclosure information is submitted on behalf of:

Name of Disclosing Entity:

BY: U.S. Bank Trust National Association, Trustee

Signature: \_\_\_\_\_

Date: October 19, 2018

Printed Name: Julia Linian

Title: Vice President

Phone Number: 312 332-7539

Email Address: Julia.linian@usbank.com

VAP Funding Master Note Trust  
 Table 1 and Table 2  
 Ownership Share and Distributive Income  
 07/01/18 - 09/30/2018

TABLE - 1 and 2							
Name (first, middle, last, maiden, aliases)	Mailing Address	% of Ownership/Interest	Type of Ownership	Class of Stock	Earnings (1)	% of Distributive Income	\$ Value of Distributive Income (Direct and Indirect) (2)
Bluestone Capital Markets, LLC	700 W. Morse Blvd, Suite 220, Winter Park FL 32789	100%	Certificate	N/A	\$ -	100%	\$ 5,488,245

(1) Accrued certificate income from 7/1/2018 to 9/30/2018.

(2) Certificate income paid to the certificate holder from 7/1/2018 to 9/30/2018.

VAP Funding Master Note Trust  
 Table 3  
 Additional information for Trusts  
 07/01/18 - 09/30/2018

TABLE - 3		
Name (first, middle, last, maiden, aliases) (Certificate Holder)	Closing Date	Mailing Address
Bluestone Capital Markets, LLC	11/30/2012	700 W. Morse Blvd, Suite 220, Winter Park FL 32789