

# Limited Liability Company (LLC) Statement of Members

(Government Code Section 84109)

Type or Print in Ink.

|  |   |
|--|---|
| <b>Amendment</b><br><input checked="" type="checkbox"/> Check box if an Amendment<br><div style="text-align: center; font-size: 24px; font-weight: bold;">7 / 21 / 22</div> Date qualification threshold met<br>(Month, Day, Year) | Date Stamp<br><br><div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 24px;">CALIFORNIA FORM 409</div> For Official Use Only |
|--|---|

## 1. LLC Information

|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
| LEGAL NAME OF LIMITED LIABILITY COMPANY:<br>Penn Interactive Ventures, LLC   |  | NAME OF RESPONSIBLE OFFICER OR PRINCIPAL OFFICER:<br>Benjamin Levy |  | PRINCIPAL/RESPONSIBLE OFFICER PHONE #:<br>(415) 389-6800 |  | PRINCIPAL/RESPONSIBLE OFFICER EMAIL:<br>form410@nmgovlaw.com |  |
| LLC STREET ADDRESS:<br>825 BERKSHIRE BLVD, SUITE 200 Wyomissing PA 19610   |  | CITY:<br>San Rafael CA   |  | STATE:<br>PA   |  | ZIP CODE:<br>19610   |  |
| NAME OF COMMITTEE: YES ON 27 - CALIFORNIANS FOR SOLUTIONS TO HOMELESSNESS AND MENTAL HEALTH SUPPORT, A COALITION OF HOUSING AND MENTAL HEALTH EXPERTS, CONCERNED TAXPAYERS AND DIGITAL SPORTS ENTERTAINMENT AND GAMING COMPANIES |  | COMMITTEE ID:<br>1440682   |  | COMMITTEE PHONE NUMBER:<br>(415) 389-6800                |  | COMMITTEE EMAIL ADDRESS:<br>form410@nmgovlaw.com             |  |
| COMMITTEE STREET ADDRESS:<br>2350 Kerner Blvd., Suite 250 San Rafael CA 94901  |  | CITY:<br>San Rafael CA   |  | STATE:<br>CA   |  | ZIP CODE:<br>94901   |  |

## 2. Members (If any members are other LLCs, further disclosure is required in Part 3.)

| FULL NAME                 | MEMBERSHIP TYPE  | DATE(S) OF CAPITAL CONTRIBUTION (COMPLETE MEMBER AS MET CAPITAL CONTRIBUTION THRESHOLD) | CUMULATIVE CAPITAL CONTRIBUTIONS TO LLC | PERCENTAGE OWNERSHIP INTEREST |
|---------------------------|--|---|---|-------------------------------|
| PENN NATIONAL GAMING INC. | <input checked="" type="checkbox"/> MEMBERSHIP 10% OR GREATER<br><input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE |   | \$539,329,956.93                        | 100%                          |
|                           | <input type="checkbox"/> MEMBERSHIP 10% OR GREATER<br><input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE            |   |   |                               |
|                           | <input type="checkbox"/> MEMBERSHIP 10% OR GREATER<br><input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE            |   |   |                               |
|                           | <input type="checkbox"/> MEMBERSHIP 10% OR GREATER<br><input type="checkbox"/> CAPITAL CONTRIBUTIONS \$10,000 OR MORE            |   |   |                               |

## 3. Names of Member LLCs Listed in Part 2

| NAME OF LLC LISTED IN PART 2 | FULL NAMES OF MEMBERS |
|------------------------------|-----------------------|
|                              |                       |
|                              |                       |
|                              |                       |
|                              |                       |

## 4. Verification

I have used all reasonable diligence in preparing this Statement. I have reviewed this Statement and, to the best of my knowledge, the information contained in it is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 7/9/2024  
DATE

By \_\_\_\_\_  
SIGNATURE

Attach additional information on appropriately labeled continuation sheets.

**Print**

**Clear**