

HOW TO SUBSCRIBE FOR UNITS

To subscribe for Units, please:

1. Send the following documents to:

Scotland Campus Partners LLC
3583 Scotland Road
Scotland, Pennsylvania 17254 USA
Telephone: (717) 552-2220

An executed copy of the "Suitability Questionnaire";

An executed copy of the "Subscription Agreement"); and

One or more of the following forms of evidence verifying that you are an "Accredited Investor" (see "Who May Invest" section of this Memorandum):

A. If you are a natural person claiming status as an Accredited Investor based upon your **net worth**:

- 1. A copy of your most recent (within the past 3 months) bank statements, brokerage statements, tax assessments, or other independent documentation showing your assets; and
- 2. A copy of your most recent (within the past 3 months) credit report from one of the national consumer reporting agencies showing your liabilities.

OR

B. If you are a natural person claiming status as an Accredited Investor based upon your **income**:

- 1. A copy of your federal tax returns for the past two (2) most recent years; and
- 2. A written representation from you that you reasonably expect to reach at least the same level of income in the current year as the past two (2) most recent years.

OR

C. A written confirmation from one of the following independent third parties (i.e., who do not work for the Fund or its Affiliates) that they have taken reasonable steps to verify your status as an Accredited Investor:

- FINRA registered broker-dealer or investment advisor;
- Attorney in good standing;
- Certified public accountant (CPA) in good standing; or
- Such other third-party professional deemed reasonable by the Fund.

OR

D. Such other independent documentation or evidence deemed reasonable by the Fund to verify your status as an Accredited Investor.

2. Wire funds in the amount of \$1,000 per Unit (please contact us for wiring instructions).

Applications will be accepted or rejected within fifteen (15) days of their receipt. If rejected, all monies tendered will be returned in full without interest or further obligation.

SUITABILITY QUESTIONNAIRE

IMPORTANT NOTICE TO ALL POTENTIAL SUBSCRIBERS: The Units of Preferred Membership Interest (the “Units”) offered by Scotland Campus Partners LLC, a Pennsylvania limited liability company (“we”, “us”, “our” or the “Fund”), will not be registered under the Securities Act of 1933, as amended (the “Act”), nor under the laws of any state. Accordingly, to ensure that the offer and sale of such securities are exempt from registration, and to determine your suitability to subscribe in the Offering, we must be reasonably satisfied after taking reasonable steps to verify that you are an “Accredited Investor” as that term is defined under the Act. This confidential Suitability Questionnaire is designed to provide us with the information necessary to make a reasonable determination of whether you satisfy these suitability requirements. The information supplied in this confidential Suitability Questionnaire will be disclosed to no one without your consent other than to (i) the Fund and our Managing Member, affiliates, managers, officers, employees, agents, accountants and counsel, (ii) state and federal securities authorities or other regulatory organizations, if deemed necessary to use such information to support exemptions from registration under the Act and other applicable federal and state laws which we claim for the Offering, or (iii) others as may be required by law. **BECAUSE WE WILL RELY ON YOUR ANSWERS IN ORDER TO COMPLY WITH FEDERAL AND STATE SECURITIES LAWS, IT IS IMPORTANT FOR YOU TO CAREFULLY ANSWER EACH QUESTION.**

PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION BELOW:

Full legal name(s) of Subscriber(s): _____

Address: _____ City: _____

State: _____ Zip Code: _____

E-mail (mandatory)*: _____

(*NOTICE: By providing this e-mail address, you authorize us to transmit reports, updates and otherwise communicate with you exclusively using this e-mail address instead of sending paper copies to your physical or mailing address. If this e-mail address does not function or if it changes, you must provide us with an alternate e-mail address.)

Home Phone: _____ Mobile: _____

Taxpayer Identification Number(s) or Social Security Number(s): _____

Subscriber Suitability: (If applicable to you, please **initial and check applicable boxes** as appropriate on the following pages and attach the described evidence in support):

[PLEASE TURN TO NEXT PAGES]