

FORTRESS CAPITAL, INC.

PROSPECTIVE CLIENT QUESTIONNAIRE

Clients that enter into a Trading Advisory Agreement with Fortress Capital, Inc. ("FC") must meet the definition of a qualified eligible person ("QEP") as defined in CFTC Regulation 4.7.

Your answers will be kept strictly confidential by FC; however, the undersigned acknowledges and agrees that FC may disclose information in this Questionnaire to such parties as it deems appropriate to enable it to provide services to the account of respective Client (an "Account") pursuant to a Trading Advisory Agreement with such Client or as may be necessary to comply with applicable rules or regulations.

I. GENERAL INFORMATION:

Name(s): _____

Nominal Account Size US\$: _____

Social Security No./EIN (Entity): _____

Are you a U.S. Citizen or Resident?

YES NO

If not, please state country of residence: _____

Address:

Telephone: _____

Facsimile: _____

E-Mail: _____

Additional Information Required from Entities (please check as applicable):

Form of Entity:

- | | |
|---|--|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Limited Partnership |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> General Partnership |
| <input type="checkbox"/> Trust (Other than an employee benefit trust) | <input type="checkbox"/> Other: _____ |

State/Jurisdiction of Formation _____

Formation Date: _____

Principal Place of Business: _____

List of Beneficial Owners:

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |

List of Directors/Trustees/Managers:

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |

Is the entity an investment pool?

- YES NO

If the entity is an investment pool, is its manager or its operator registered with CFTC or SEC:

- YES NO

Describe Registration Status of Manager or Operator: _____

II. BACKGROUND INFORMATION:

1. Please indicate the highest educational degree you hold.
2. Describe your principal occupation and/or business activities during the last five years.
3. Check below the types of investments made by you during the past 5 years for your own account, the account of your spouse and/or family members residing at the same residence as you, or the

account or a trust, corporation, or partnership for which you or your spouse are the principal beneficial owner(s):

- | | |
|---|---|
| <input type="checkbox"/> U.S. government and federal agency securities | <input type="checkbox"/> Interests in REITs/real estate investment entities |
| <input type="checkbox"/> State and local government securities | <input type="checkbox"/> Interests in limited partnerships or LLCs |
| <input type="checkbox"/> Corporate stocks or options on corporate stocks | <input type="checkbox"/> Commodities, futures contracts and/or options |
| <input type="checkbox"/> Corporate bonds, debentures and notes | <input type="checkbox"/> Annuities |
| <input type="checkbox"/> Interests in mutual funds (including money market funds), unit investment trusts and closed-end investment companies | |
| <input type="checkbox"/> Interests in Real Estate (land, buildings, cooperative apartments, condominium units) | |
| <input type="checkbox"/> Other investments (please specify): | |

4. Please indicate your estimated net worth.

\$ _____

5. In evaluating the merits and risks of this investment, will you seek the advice of any other person?

YES NO

(a) If yes, please identify each such person, firm affiliation and business address below.

(b) If yes, has such person disclosed to you whether or not he or she expects to receive any compensation as a result of your establishment of an account with PAM?

YES NO

III. QUALIFIED ELIGIBLE PERSON STATUS

1. Qualified Eligible Person. The undersigned, by initialing the applicable paragraph below, certifies that it is a "qualified eligible person" as defined in CFTC Regulation 4.7. Place your initials in the space provided in the beginning of each applicable paragraph:

[] (a) A natural person whose individual net worth, or joint net worth with his or her spouse, exceeds \$1,000,000 and who owns securities (including pool participations) of issuers not affiliated with the undersigned and other investments having an aggregate market value of at least \$2,000,000.

[] (b) A partnership, limited partnership, corporation, Massachusetts or similar business trust, other than a pool, which has total assets in excess of \$5,000,000, owns securities (including pool participations) of issuers not affiliated with the undersigned and other investments having an aggregate market value of at least \$2,000,000, and was not formed for the specific purpose of participating in the Fund.

[] (c) An employee benefit plan within the meaning of the ERISA, provided, that the investment decision is made by a plan fiduciary, as defined in section 3(21) of ERISA, which is a bank, savings and loan association, insurance company, or registered investment adviser; or that the employee benefit plan has total assets in excess of \$5,000,000; or, if the plan is self-directed, that investment decisions for, or the decisions as to the types of investment alternatives under, the plan are made solely by persons that are qualified eligible persons. The plan, or the individual directing the investments if the plan is self-directed, owns securities (including pool participations) of issuers not affiliated with the undersigned and other investments having an aggregate market value of at least \$2,000,000.

[] (d) A pool, trust, insurance company separate account or bank collective trust, which has total assets in excess of \$5,000,000, owns securities (including pool participations) of issuers not affiliated with the Fund and other investments having an aggregate market value of at least \$2,000,000, was not formed for the specific purpose of participating in the Fund, and whose participation in the Fund is directed by a qualified eligible person.

[] (e) The undersigned certifies that it is not a United States Person for purposes of CFTC Regulation 4.7.

[] (f) The undersigned is an exempt pool.

IV. ANTI-MONEY LAUNDERING CERTIFICATION

The undersigned is not, and is not acting on behalf for any person or entity that is: (i) in contravention of any applicable laws and regulations, including anti-money laundering regulations or conventions; ii) included on the List of Specially Designated Nationals and Blocked Persons maintained by the U.S. Treasury Department's Office of Foreign Assets Control ("OFAC"), as such list may be amended from time to time, (iii) a senior foreign political figure, any member of a senior foreign political figure's immediate family or any close associate of a senior foreign political figure, or (iv) for a foreign shell bank.

V. EXECUTION

The undersigned represents and warrants that the foregoing statements are true and accurate in all material respects and will promptly notify FC of any changes in the foregoing answers.

(Signature)

(Print Name & Title, if applicable)

Dated: _____