

| Cohort 2 Web Application Questions |  |   |
|------------------------------------|--|---|
| Category                           | Phase 1  |   |
|                                    | Questions / Field  | Selection or Text Input                   |
| General Info                       | Company Name   |   |
|                                    | Company Website  |   |
|                                    | Social media links   | Twitter                                   |
|                                    |  | Facebook                                  |
|                                    |  | Instagram                                 |
|                                    |  | LinkedIn                                  |
|                                    |  | Other                                     |
|                                    | Please upload a pitch deck   |   |
|                                    | 1 sentence description of your company   |   |
|                                    | The program cost is \$100 per participant per month. How do you plan to cover this cost? |   |
|                                    |  |   |
| Founding Team                      | Name 1   |   |
|                                    | Preferred Pronouns   |   |
|                                    | Title  |   |
|                                    | Email  |   |
|                                    | Phone  |   |
|                                    | Are you a veteran?   | Yes                                       |
|                                    |  | No  |
|                                    |  | American Indian or Alaska Native          |
|                                    |  | Asian                                     |
|                                    |  | Black or African American                 |
|                                    |  | Hispanic or Latino                        |
|                                    |  | Native Hawaiian or Other Pacific Islander |
|                                    |  | White                                     |
|                                    | Name 2   |   |
|                                    | Preferred Pronouns   |   |
|                                    | Title  |   |
|                                    | Email  |   |
|                                    | Phone  |   |
|                                    | Are you a veteran?   | Yes                                       |
|                                    |  | No  |
|                                    |  | American Indian or Alaska Native          |
|                                    | Asian  |   |
|                                    | Black or African American  |   |
|                                    | Hispanic or Latino   |   |

|   |   |   |
|---|---|---|
|   | <div> <input type="checkbox"/> </div>   | <div>Native Hawaiian or Other Pacific Islander</div> <div>White</div> |
|   | Name 3  |   |
|   | Preferred Pronouns  |   |
|   | Title   |   |
|   | Email   |   |
|   | Phone   |   |
|   | Are you a veteran?  | <div>Yes</div> <div>No</div>  |
|   | How do you identify racially? [Select all that apply]   | American Indian or Alaska Native                                      |
|   |   | Asian   |
|   |   | Black or African American   |
| Hispanic or Latino                        |   |   |
| Native Hawaiian or Other Pacific Islander |   |   |
|   | White   |   |
| Team                                      | Provide examples of how your company understands and practices diversity, equity and inclusion?   |   |
|   | How many people from your team will need dedicated space at Lunar Startups in Osborn370?  |   |
| Problem & Vision                          | What problem does your company address?   |   |
|   | Why are you best suited to solve this problem?  |   |
|   | How does your company solve this problem?   |   |
|   | What does the world look like if you succeed?   |   |
|   | What evidence have you collected from customers that your solution solves their problem significantly better than others in the market? |   |
|   | How will you know the world has changed because of your company?  |   |
| Product / Service                         | How many paying customers have you acquired to date?  |   |
|   | How much revenue do you make per month?   |   |
|   | What is the current valuation of your company? (If you have calculated it)  |   |
|   |   |   |
|   |   |   |

|                |   |   |
|----------------|---|---|
| Market         | To what extent does your team know the regulatory hurdles will you need to overcome to grow? (Check all that apply)                                       | We have a list of potential hurdles we will face.             |
|                |   | We have a plan to address the potential hurdles we will face. |
|                |   | We have not yet researched potential hurdles we will face.    |
|                |   | What are regulator hurdles?                                   |
|                | To what extent are you leveraging strategic partnerships to capture market faster/cheaper?  |   |
|                | How much money do you spend monthly on advertising?   |   |
|                | Who is the target market for your product (s)?  |   |
|                | To what extent does your leadership team reflect the market you're trying to serve?   |   |
|                | Describe your traction and growth over the past 6 months including users / customers, revenue growth, letters of intent, and or attracting new resources. |   |
| Business Model | How do you define your company? Select all that apply   | B2B   |
|                |   | B2C   |
|                |   | Other   |
| Scale          | How do you want to finance the growth of your company? (Select all that apply)  | Venture Capital   |
|                |   | Customer Acquisition  |
|                |   | Loans   |
|                |   | Grants  |
|                |   | Crowdfunding  |
|                |   | Other   |
|                | Are you currently seeking funding?  | Yes   |
|                |   | No  |
|                | If so, how much?  |   |
|                | If not, do you intend to seek capital support in the next 6 months?   | Yes   |
|                |   | No  |
| Exit           | What is your end goal with your company?  | Acquisition / Sale  |
|                |   | Lifestyle Business  |
|                |   | Unsure  |