

| 2. Account Ownership Summary | | | | | | | | | | | | | | |
|---|--|--|--|---|--|-------------------------------------|-------------------------------------|--------------------------|------------------------------|---|--------------------------|--------------------------|--------------------------|--|
| Account Name: | | The 2007 Jeffrey E. Epstein Insurance Trust #3 - Deposit | | | | | Acct. Number (if available): | | | | | | | |
| Account Manager: | | stew oldfield | | | | | | | | | | | | |
| What is the purpose of the account (e.g. portfolio management, advisory account, custody services, long-term investment, payment/expense account)? Checking account to hold funds for this trust. | | | | | | | | | | | | | | |
| Indicate from where the assets are expected to arrive? | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> DB Group: Same Booking Center (indicate account number): 42953694 <input type="checkbox"/> DB Group: Other Booking Center (indicate DB location and account details): <input type="checkbox"/> Other Institution – (Indicate name & location): <input type="checkbox"/> Physical Deposits (specify cash, securities, cheques, ...): | | | | | | | | | | | | | | |
| What is the expected size and frequency of regular inflows and outflows for the account (indicate estimated number and volume per month)?: no inflows/outflows | | | | | | | | | | | | | | |
| What is the expected volume of assets and currency for the account approx. 90 days after opening? | | | | 259.05 | | | | Currency | | usd | | | | |
| What is the expected volume of assets and currency for the account approx. one year after opening? | | | | 259.05 | | | | Currency | | usd | | | | |
| Does/will the client have Assets Under Management (AuM) within DB under Eur. 3M? | | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | | | | | |
| Please list all parties related to the account. For each party: • Check if a source of wealth description is required for the party. • Check the appropriate box to describe the relationship of the party to this account (> 1 can be selected). • If none of the check boxes apply, describe the party's relation to the account in the "Other" column. • Always describe the relationship between the parties in the last column. • Please drill down to the ultimate/underlying Beneficial Owner(s). | | | | | | | | | | | | | | |
| Legal Entity | Description of Source of Wealth required | Parties related to this account | Account Holder | PIC Owner | Settlor of Trust / Founder of Foundation | Ultimate Beneficial Owner | Signatory or Full POA | Limited POA | Financial Intermediary (FIM) | Significant Shareholder (>=25%) Non-PIC entity (indicate ownership %) | Legal Representative | Grantor/Settlor | Founding Donor | Other (please describe other roles and/or indicate relationship between parties) |
| 1 | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Beneficiary of The 2007 Jeffrey E. Epstein Insurance Trust #3; |
| 2 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | The 2007 Jeffrey E. Epstein Insurance Trust #3 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Jeffrey E. Epstein | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | grantor; |
| 4 | <input type="checkbox"/> | <input type="checkbox"/> | Darren Indyke | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Trustee;; |
| 5 | <input type="checkbox"/> | <input type="checkbox"/> | Richard D. Kahn | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Trustee;; |