
Deutsche Bank
Wealth Management
Business Deposit Account Opening Application
0_4/25/2012
Date of Incorporation
Gratitude Amejica, J_td
Account Title
Gratitude America,J_td_
Entiyy/Company Name
_____ .6.6-.0789697 _____
Taxpayer ID Number (TIN)
.6.10.0.Red,HDok_Quarter,3.3_
Mailing Address
. StJ.homas
USVL
„ . 0.0802
City
State
Zip
(212).97_lT«Ber
(212) 971 1314
Busine^Telephone Number
Business Fax Number
Other Number
U5\/[
'910U..P6'rt orijaie Mall, stejs
Legal Address (if different from mailing address)
. .St. Tbomas_ _
00802
City
State
Zip
Client Relationship
U Limited Liability Company (LLC)
L- Partnership
il' Limited Liability, Partnership (LLP)
Corporation
-Foundation
Non-Profit Organization
' Attorney Escrow Account
LJ Landlord Master Escrow
Trust
____ Estates
Private Wealth Premium'™
DBTCA Accounts
Deutsche Bank AG NY Branch Accounts
Deutsche Bank AG NY Preferred Banking Account

V Deutsche Bank AG NY Preferred Certificate of Deposit

Checking Account

Checking with Interest

2.60%

6 month

Money Market Deposit

APY

Term

Promo term

. ■ DBTCA Certificate of Deposit

(DBTCA deposit account required, along with a DB AG Preferred Terms and Conditions)

APY

Term

Cash Master Sweep Account

Target Amount

Trigger Amount

Banking Services

Deluxe Checkbook

■ i Debit Cards—Business Debit Card

C Name Only .. Name and Address

Duplicate Statement

Style

Color

Code

Name

Internet Banking Services

Address

_ DB Private Wealth Online Plus

. Link to existing online relationship:

City

State

Zip Code

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NAOSOD00027554-000200696

Notice of Customer Identification Policy

Important Information

To help the government fight the funding of terrorism and money laundering activities. Federal law requires all financial

institutions to obtain, verify and record information that identifies each person who establishes an account, investment

or other business relationship with a financial institution. This means that we will ask for your name, address and other

information that will allow us to identify you. We may also ask to see identifying documents such as a certificate of

formation or good standing (legal entities) or a passport or other photo identification (individuals).

Information Sharing

You authorize Deutsche Bank to share information about you and your Account as set forth in our Privacy Policy, including

any disclosures that (1) Deutsche Bank believes are required by applicable law and regulations that apply to Deutsche Bank or others, including disclosure of information about you and your Account to any government agency or self-regulatory body on request, (2) is necessary or appropriate in connection with Deutsche Bank's provision of services under this Agreement, or (3) is requested by a financial institution, financial intermediary, or other third party in order to assist such person with compliance with law applicable to such person in connection with services provided to you or on your behalf.

3rd EU Notice

Governmental rules have also broadened the scope of the Bank's obligations to aid in the fight against money laundering and terrorist financing; these rules call for an active involvement of both asset management firms and their clients. For new and existing clients we currently have a legal obligation to ask our customers questions regarding their identities, addresses, source of funds and, if necessary, legal representatives, authorized signatories, beneficial owners or control structures and to collect requisite documentation to substantiate the information. Also, enhanced anti-money laundering requirements require that should any of the above personal or institutional information change, our clients would be obliged to immediately notify us of the change(s) and provide us with relevant documentation to verify these changes.

ATM/Debit Service

You agree that the retention or use of the ATM/Debit card constitutes acceptance of the terms and conditions of the Cardholder Agreement contained in the Terms and Conditions of Deposit Accounts.

Internet Banking Service

If you have selected to receive Internet Banking Services, you understand that you will be required to enter into a separate Internet Banking Services Agreement with DBTCA before you can access the Internet Banking Service.

Acknowledgement of Receipt of Privacy Notice

By signing below, you acknowledge receipt of DBTCA's Privacy Notice included in the Application Package.

Non-U.S. Organizations:

Confirmation of Tax and Compliance Responsibilities

You confirm that it is your responsibility to fulfill any tax obligations and any other regulatory reporting duties applicable to it in any relevant jurisdictions that may arise in connection with assets, income or transactions in your account(s) and your business relationship with DBTCA. Furthermore, you confirm that the necessary information (to the best of your knowledge and capabilities) is made available no less than annually to the relevant beneficial owner(s), settlor(s), beneficiary(ies), partner(s), etc., to enable him/her/them to fulfill any respective tax obligations that may arise for him/her/them in connection with your business relationship with DBTCA.

Please complete and attach separate W-8 or W-9 documentation as applicable.

Terms and Conditions and Representations

By signing below, you acknowledge receipt of the Terms and Conditions for Deposit Accounts attached to this Application

and agree to be bound by them. In addition, you agree to notify us immediately of any material change to the Information provided by you on this Application.

You represent and warrant that all of the information provided by you on this Application is accurate.

The Terms and Conditions for Deposit Accounts are subject to change.

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Acceptance

You understand that this application is subject to acceptance by DBTCA.

Authorized Signer

Authorized Signer

Darren |ndxke_

Print Name

Print Name

Date

Date

For Bank Use Only

Reviewed by:

Signature

Name

Title

Date

Accepted by DBTCA:

Signature

Name

Title

Date

Account numbers:

DDA

NOW

MMDA

C0/DBA6

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W-9

Request for Taxpayer

Identification Number and Certification

Give Form to the requester. Do not

send to the IRS.

Form

(Rev. November 2017)

Department of the Treasury

Internal Revenue Service

► Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your Income tax return). Name is required on this line: do not leave this line blank.

Gratitude America, Ltd

2 Business name/disregarded entity name, if different from above

n

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

i I Individual/sole proprietor or Q C Corporation Q S Corporation 0 Partnership

single-member LLC

4 Exemptions (codes apply only to certain entities, not individuals: see instructions on page 3):

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n Trust/estate

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4) C

a o

Exempt payee code (if any)

I I Limited liability company. Enter the tax classification (C=Corporation, S=S corporation, P=Partnership) ▶

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check

LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is

another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that

is disregarded from the owner should check the appropriate box for the tax classification of its owner.

f7| Other (see instructions) ▶

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Exemption from FATCA reporting code (if any) _____

S:

Exempt Private Organization

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5 Address (number, street, and apt. or suite no.) See instructions.

Requester's name and address (optional)

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03

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9100 Poart of Sale Mall. Ste 15

CO

6 CKy. state, and ZIP code

St. Thomas, USVI00802

7 List account numb'er(s) here (optionaQ

Taxpayer Identification Number (TIN)

Parti

Social securfty number

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid

backup withholding. For individuals, this is generally your social security number (SSN). However, for a

resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other

entities, it is your employer identification number (EIN). If you do not have a number, see How to get a

TIN, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and

Number To Give the Requester for guidelines on whose number to enter.

or

Employer identification number

██████████
████████████████████

Part II

Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me): and

2.1 am not subject to backup withholding because: (a) I am exempt from backup withholding, or ^) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am

no longer subject to backup withholding; and

3.1 am a U.S. citizen or other U.S. person (defined below); and

4. The FATCA code{s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because

you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments

other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

/

Sign
Here

Signature of
U.S. person
Date
I J P I

General Instructions

* Form 1099-DIV (dividends, including those from stocks or mutual funds)

- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property]

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What Is backup withholding, later.

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

Form W-9 (Rev. 11-2017)

Cat. No. 10231X

Signature Card

Deutsche Bank Trust Company Americas

Account I loldur Tntc

Accfluni Number

i

Ltd

Gratitudej^me

' ' Limited Liability
Corporation
iv^Other:No*i*'^^ AV C**^i*>'vte<"Vvo»^
Jeffrey E. Epstein
print Name
DarrenJndyke
Prim Name
Number of Signatures
Required: 1
Individual
irate
fants i ■ Pa^nership
Jorii. witi Rights
of SufvK'urship
immon
Signature
Punt Name
Signatutc
Print Name
Approved
Power of Attorney
f^tc
Soocimen Signature
• For ITF/POD/ATF See Supplemr>ntijl Terms and Conditions
Date of Potver of Attnrrtcy
e< 2018 Deutsche Bank AG. All rights reserved. WM189885 00G57B.062918

Signature Card
Deutsche Bank Trust Company Americas
,^Accounl Number
Accouni Holdci TUK;
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Gratitude Ainecica Ltd
■;
I ; itC/POD/ATJ
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CorporaU
Number of Signatures
Required; .1.
V other:
Jeffrey E. Epstein
prim Nam*
Darren Indyke
Print Name
: Limilnd Liability
Corporation
ioint, 'Arith Rights
jf Survivorsl^ip
; JpiraTTenants ; .. Partiuikhip
y^\\\ Common /

Email: [REDACTED]

Postal address;

Postfach110448

10834 Berlin

More information;

[REDACTED]

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CompanyName oi the- Ooposilor:

Gratitude America. Ltd

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Additional Information

'Your deposit is covered by a statutory Deposit Guarantee Scheme and a contractual Deposit Guarantee Scheme. If insolvency of your credit inslitulion should occur.

your deposits would In any case be repaid up to EUR 100 000.

*lf a deposit is unavailable because a credit institution is unable to meet its financial obligations, depositors are repaid by a Deposit Guarantee Scheme. This repayment

covers at maximum EUR 100 000 per credit institution. This means that all deposits at the same credit institution are added up in order to determine the coverage level.

If. for instance, a depositor holds a savings account with EUR 90 000 and a current account with EUR 20 000, he or she will only be repaid EUR 100000.

'In case of joint accounts, the limit of EUR 100 000 applies to each depositor.

Deposits in an account to which two or more persons are entitled as members of a business partnership, association orgrouping of a similar nature, without legal personal*

ily, are aggregated and treated as if made by a single depositor for the purpose of calculating the limit of EUR 100 000.

In the cases listed in Section 8 (2) to (4) of the German Deposit Guarantee Act (Einlagensicherungsgesetz), deposits are protected above EUR 100 000.

More information

can be obtained from the website of EntschSdigungseinrichtung deutscher Banken GmbH at www.edb-banken.de.

'Reimbursement

The responsible Deposit Guarantee Scheme is;

Enlschadigungsernrichtung deutscher Banken GmbH

Postal address;

Postfach 11 04 48

10834 Berlin

Burgslraile 28

10178 Berlin

Germany

g

Telephone: [REDACTED]

Email; [REDACTED]

It will repay your deposits (up to EUR 100 000) within 7 working days. If you have not been repaid mlhtn this deadline, you should contact the Deposit Guarantee Scheme since The lime to claim reimbursement may be barred aflera

certain lime limit. More information can be obtained from the website of EntschSdigungseinrichtung deutscher Banken GmbH at www.edb-banken.ds.

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Other important information

In general, all retail depositors and businesses are covered by Deposit Guarantee Schemes. Exceptions for certain deposits are stated on the website of the respon- sible Deposit Guarantee Scheme. Your credit institution will also inform you on request whether certain products are covered or not. If deposits are covered. The credit institution shall also confirm this on the statement of account.

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Wealth Management
Not-For-Profit Organization Resolution-Deposit Account

Secretary of Gratitude America Ud____
{a corporation}

[an unincorporated association] duly organiad and existing under the laws of O^jrgin Islancfe described herein as

"this organization," hereby certify that the following is a true copy of resolutions adopted by the Board of Directors of this ot^anization at a meeting duly held, a quorum being present on are now in full force and effect:

"RESOLVED, that Deutsche Bank Trust Company Americas, New York, N. Y. or any of its affiliates or subsidiaries (the "Bank"), is designated a depository of this organization for each account of this organization now or hereafter opened and maintained at the Bank (whether one or more, the "Account"); in accordance with all applicable lav/s, regulations and Bank and this organization's policies; and

"FURTHER RESOLVED, that all drafts, checks and other written instruments or orders for the payment of money drawn

(i) against the Account or (ii) to or otherwise made payable to this organization shall be signed or endorsed (for .-,20.

. and that such resolutions

\
transfer or encashment) by any
of the following*; (insert titles but not names of officer);
, fmseft number)

authorized and directed to honor all orders for the payment of money by wire or other electronic means made or issued in this organization's name on the Account: (i) when transmitted and delivered to the Bank by telex, cable, facsimile or other mechanical or electronic transmission; letter or other written communication; or telephonic or other oral

communication;

and "FURTHER RESOLVED, that the Bank is hereby requested.

\
communication; and (ii) when separately authorized in writing by any of officer(s) designated in the preceding

{insert number)

"RESOLVED" clause and the Bank shall be entitled to honor and charge the Account for all such orders which it believes in good faith to be genuine regardless of by whom or by what means such orders may have been issued. The authorization provided in this clause shall include, without limitation, the right to enter into any agreement(s) with the Bank, from time to time, containing such indemnities in favor of the Bank as it may require and such other provisions in order to effectuate the purpose hereof; and

"FURTHER RESOLVED, that the Bank is authorized to place to the credit of the Account, funds, drafts, checks, credits or other property by whomsoever delivered or transmitted to the Bank for deposit for account of this organization. endorsed with the name and/or Account number of this organization or other agreed-upon symbol or identifying mark by rubber stamp, facsimile, mechanical, manual or other signature (and any such endorsement by whomsoever affixed shall be the endorsement of this organization), or otherwise endorsed, or unendorsed, provided that if any such item shall bear, or be accompanied by, directions (by whomsoever made) for deposit to a specific Account, then such deposit shall be to the credit of such specific Account; the Bank may at any time refuse any such deposit or credit to the Account and/or may return by mail or otherwise the whole or any part of a deposit to this organization; and

"FURTHER RESOLVED, that the Bank is hereby directed to accept, and/or apply any draft, check or other instrument or order for the payment of money, or any proceeds thereof, including any order for the transfer thereof by wire or other electronic means, drawn, made or issued on such Account or drawn to or

otherwise made payable to this organization (each such payment order herein an "Order") when signed or endorsed, made or issued as required by these resolutions without limit as to amount, without inquiry and without regard to the disposition of any such item or any proceeds thereof, and the Bank shall not be liable in connection therewith notwithstanding that such Order: (i) may be payable or endorsed to the order of a person whose signature appears thereon or who otherwise made or issued such Order or of any other officer(s) or agent(s) of this organization, or (ii) or any proceeds thereof may be used or disposed of for the personal credit or account of any such person(s), officer(s) or agent(s) with the Bank or otherwise or in payment of the individual obligation of any such person(s), officer(s) or agent(s) to the Bank or otherwise, or (iii) may cause or increase an overdraft on the Account; and

"FURTHER RESOLVED, that the Account and all transactions related thereto, the authorities, specifications, agreements and services herein provided shall also be subject to all other agreements, rules, regulations and conditions set forth in any signature card, deposit ticket, passbook, instrument, receipt, statement of Account and all state and federal laws, rules and regulations applicable to the subject matter hereof."

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I further certify that this organization is operated primarily for religious, philanthropic, charitable, educational, fraternal or other similar purposes and is not operated for profit.

I further certify that the following persons hold in this organization the positions indicated below:

Tillo

Name

1

M.,

(Complete only if doing business under assumed name; otherwise disregard.)

I further certify that this organization is (1) doing business under the name of

(Assumed Name)

as shown by the annexed Certificate of the Secretary of State; (2) the sole owner of the above assumed name; and (3) will be the owner of each check, draft or other item drawn or made payable to, said assumed name and deposited to the credit of the Account

IN WITNESS WHEREOF, I have hereunto subscribed my signature and affixed the seal of this organization this day of -

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\ tSEAL]: '

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* If two signatures are desired, with one signature from each of two groups, strike out the underlined words and insert

"by one from each of the following two groups, respectively;" then list the groups separately.

If two signatures are desired, but as a signature and countersignature, with authority limited accordingly, strike out the

underlined words and add "and signed and countersigned by one from each of the following two groups, respectively;"

then arrange signature and countersignature groups accordingly.

" If the Secretary conferred by the above resolutions is authorized to sign alone, the certification of resolutions must be

confirmed below by another officer.

Confirmed (Official title)

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