

ACCOUNT # _____

G. CLIENT / BENEFICIAL OWNER / AUTHORIZED PARTIES

This information must be filled out for EACH Individual. Please use a separate page for each Individual.

For US Individuals: No documentation required at account opening. A copy of a driver's license or other valid, government-issued picture ID may be requested for verification purposes upon review of the account.

For Non-US Individuals, and for all Non-U.S. Beneficial Owners of PIV Accounts: Please attach to this form a copy of a valid, government-issued picture ID evidencing nationality for each individual. The documentation must be presented prior to account opening.

For Non-U.S. PIV Accounts: Please attach 1st and Signature Page of organization document and pages showing ownership of the entity. For Hedge Funds, Funds and Non-Profits, see Page 6 for instructions.

For Trading Authority / Power of Attorney / Investment Advisor only questions 1, 1a, 10, 18 and 19 are required.

For Principal / Director / Officer only questions 1, 1a, 10, 18 and 19 are required.

1. Name of Individual (First, Middle, Last Name) (or Entity Name) <p style="font-size: 1.2em; margin: 0;">Jeffrey E Epstein</p>	1a. Type of Client/Beneficial Owner/Authorized Party: <p style="font-size: 1.2em; margin: 0;">Individual</p>
2. Has an Account for this Individual been established since 10/01/03? If Yes, list Account Numbers:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Date of Birth: <u>1/20/63</u>	5. SSN/Tax ID Number: (Required for US Citizens) [REDACTED]
4. Is the Individual a US Citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, Country of Citizenship:	5a. If SSN/Tax ID is not available, Passport No./Alien Reg. No./Other Valid Gov't-Issued ID No. 5b. Type of ID, if not Passport or Alien Reg. Card:
6. Home Address: <p style="font-size: 1.1em; margin: 0;">6100 Red Hook Qtr. B-3 St. Thomas, USVI 00802</p>	7. Home Mailing Address: <p style="font-size: 1.2em; margin: 0;">Same</p>
8. Home Phone: [REDACTED]	9. Bu [REDACTED]
10. Principal Business Address: <p style="font-size: 1.2em; margin: 0;">Same</p>	11. B [REDACTED] (Principal Business) <p style="font-size: 1.2em; margin: 0;">Same</p>
12. Employment Status: <input checked="" type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Unemployed Employer's Name: <u>Financial Trust Company, Inc.</u> Member Firm? <input type="checkbox"/> Yes <input type="checkbox"/> No Occupation: <u>Financial Consultant</u>	13. Marital Status: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married 13a. If married, Spouse's Occupation:
14. Estimated Net Worth: (US \$) <u>\$100mm +</u>	15. Annual Income: (US \$)
16. Sources of Wealth: <input checked="" type="checkbox"/> Employment <input type="checkbox"/> Inheritance <input type="checkbox"/> Investment <input type="checkbox"/> Other, Explain:	17. Sources of Assets on Deposit: <input checked="" type="checkbox"/> Employment <input type="checkbox"/> Inheritance <input type="checkbox"/> Investment <input type="checkbox"/> Other, Explain:
18. Is the Individual currently or formerly a Foreign Political Figure, an Immediate Family Member or a Known Close Associate? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Please contact Compliance Officer and Anti-Money Laundering Group in the Legal Dept. before conducting trading activity.	
19. Is any Citizenship, or Address associated with this account from a country included in the High Risk List? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Please contact Compliance Officer and Anti-Money Laundering Group in the Legal Dept. before conducting trading activity.	