| • | | ~ | |
|---|--|---|--|

| Prod Date: Mare | ch 27, 2017 | | | | | | | | | | | |
|------------------------------|----------------------------------|--------------------|--------|------------------------------------|---------|-----------|------------------|-------------------|----------------|--------------|-------------|-------------|
| | nme: MICHAEL COHEN | | | a HH Officer lient Officer | | | | Mega H Custome | | | | |
| Accounts as Pri | mary Accountholder Account Numbe | r Name | VW-1 | Status | Оре | en Date | Interest Rate | Prior Day 8 | 12 Month A | wa Bal Com | mitment Bai | b6 per FBI |
| Checking | | COHEN MIC | 0 | pen | 6/13/11 | | | | | | | b/C per FBI |
| Checking | 1 1 | COHEN MIC | | pen | 8/15/11 | l | | 1 1 | | | | |
| HELOC | 1 1 | COHEN MIC | 0 | pen | 2/29/16 | l | | 1 1 | | | | |
| HELOC - Checking | | COHEN MIC | 0 | pen | 2/29/16 | | | | | | | |
| Single Family Residence | | COHEN MIC | 0 |)pen | 5/3/13 | | | | | | | |
| Single Family Residential | | COHEN MIC | 0 | pen | 7/21/11 | | | | | | | |
| Accounts as Se | condary Accountholde | r | | | | | | | | | | |
| Product | Account Number | Name | Status | Relationshi | рС | Open Date | Interest Rate | Prior Day Bal | 12 Month Avg | Commitment 8 | Bal Officer | E 2 |
| Checking | | ESSENTIAL CONSU | Open | Authorized Signer (Business) | | 10/26/16 | | | | \$0. | 00 | b6 per FBI |
| Checking | | BO AND ABE REAL | Open | Authorized Signer (Business) | | 8/1/13 | | | | \$0. | 00 | b7C per FBI |

b6 per FBI b7C per FBI

BUSINESS MASTER SIGNATURE CARD RESOLUTION AND AGREEMENT TO OPEN ACCOUNTS AND SERVICES



| HITE GERTICES | | | | | | | o a privince | e to serve you | |
|--|--|---|---|------------------------------------|------------------------------|-----------------|---------------------|--------------------|-------------|
| Please check the Note: If neither box is c | e applicable hecked, this Resol | box: | Single Accounts will be used f | count or multi | or M | Iultiple Acco | unts | | b6 per FBI |
| Type of Busines | | | | □Pro | ofit Sharing/I | Pension/Retire | nent Plan | □Fiduciary/Tr | b7C per FBI |
| □Other | | | - | | | | | , | |
| | ESS | SENTIAL C | ONSULTAN | ITS L | LC | | | | |
| | | | | | - | | | | |
| Account Name & Ad | dress: | | | US | | | | | |
| | | | | | | | | | |
| Mailing Address (if di | fferent): | | | | | | | | |
| Tax Identification #: | | | Tax ID (EIN | I/SSN) | Belongs To: | ESSENTIAL CO | NSULTAN | TS LLC | |
| Business Phone: | | | Fax #: | | | Cell 7 | # : | | |
| Type of Business | 541690 Cons | ulting | | | | | | | |
| named abo 2. The follov 3. Pursuant to with the ap 4. The follov a) Micha b) | uly authorized ove ("Entity"). ving Resolution to this Resolution opplicable terms ving individuals el Cohen | n is duly adopt on, the Entity and condition will be the A | ted and authorize shall establish de | ed by to posit a son the go h) i) | he Entity. ccount(s) wit | h First Republi | c Bank, (" Bank: | Non-Personal Enti | • |
| a. open ad b. sign che c. negotiat d. amend a e. execute | cks on, issue sto e items made p outhorized signo | ts with the Ba op payment or ayable to the I er authority fo | Entity; or the Entity's acc | or with | draw funds f with the Ban | ık; and | | name of the Entity | ; |

connection with accounts opened under this Resolution, except as may be caused by the Bank's gross negligence or unlawful 7. If the Entity's internal operating procedures require the signature of more than one Authorized Signer for withdrawals, on

6. The Bank may honor all checks or withdrawals made on this (these) accounts on the signatures of Authorized Signers and shall not be liable for any direct or consequential loss the Entity may incur as a result of any act by any such Authorized Signer in

behalf of the Entity I/we acknowledge that the Bank has no responsibility to monitor this requirement. The authority conferred in this Resolution will be deemed retroactive and any authorized acts that were performed prior to the execution of this Resolution are approved and ratified.

This Resolution has not been amended or rescinded, is in full force and effect, and does not conflict with any provision of the Entity's Articles/Bylaws/Operating Agreements, or laws of the state where formed. The Bank is authorized to rely upon this Resolution until the Bank has received written notice of any amendment or rescission of this Resolution, and until it has acknowledged in writing receipt of such notice.



FRB 1249A E - 08/14 Page 1 of 2

Business Master Signature Card Resolution and Agreement to Open Accounts and Services



Acknowledgement/Agreement By signing below, I hereby acknowledge receipt of the Bank's current Account Disclosure and Agreement ("Agreement") and Rate Sheet prior to the opening of these accounts. I acknowledge that rates are subject to change without notice. I agree to open all accounts with the same vesting using one Master Signature Card ("Card") and that all such accounts are subject to the terms and conditions contained in the Card and Agreement. The Bank may terminate this Agreement at any time with or without notice. I may terminate this Agreement upon providing written notice to the Bank. Such termination shall be effective on the next Business Day following the day the Bank receives written notice of such termination (unless the Bank otherwise specifically agrees to an earlier termination) or such later date as specified in that notice.

By signing below, I authorize the Bank to obtain verifications and reports on my accounts and financial affairs, such as credit bureau and account status reports on the above referenced business and me as an individual, in connection with the business identified above. I understand that the Bank requests this information for legitimate business reasons. Should the information obtained from any such verification or report cause the Bank to decide to deny the application for an account or take any other action with respect to an account of the above-named business, I also authorize the Bank to communicate to any co-applicant and to any co-owner, director, or officer of the business that the denial was based in whole or in part on such information.

The undersigned hereby applies for accounts with the Bank of the type designated on the reverse of this Card and certifies that the signature(s) appearing on the reverse is/are genuine signature(s) for the account. I understand that the Bank will handle my/our funds according to the Bank agreements for services of this type. I understand that the Bank will inform me/us of any changes that affect my/our rights as an accountholder.

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. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) 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. I am a U.S. citizen or other U.S. person (defined in IRS instructions), and

4. I am exempt from FATCA reporting.

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

If you request access to the Bank's products and services, you will be provided with the Business Product Terms and Conditions booklet or other applicable disclosures. By executing this Card, you agree to be bound by the terms of use for the chosen product(s) or service(s). Your use of the product or service will be evidence of your agreement to its terms. If you request additional services in the future, they will be governed by the Agreement and the applicable product or service disclosure, unless we advise you otherwise.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

| Print Name(s) | , | Title: (Check at | least one) | | | |
|-------------------|------------------------------|-----------------------------|----------------------------------|------------------------------|--------------------|-------|
| | | ☐ President | ☐ Secretary | ☐ Managing Member | Other: | |
| Michael | Cohen | General Partner | All Partners (Informal | ☐ Trustee | (DI D "1\ | |
| | - 1// | (GP/LP/LLP) | Partnership/Joint Venture) | 15 | (Please Describe) | |
| Signature(s) | • M | | | Date | | |
| | 1 h | | | 10-26- | | |
| Upon execution th | greenent may be delivered by | facsimile copy or email att | achment and the copy shall be de | eemed to have the same effec | t as the original. | |
| | INITIAL ACCOUNT(S | OPENED LINDS | ER THE MASTER SIG | CNATURE CARD | b6 pe | r FBI |
| | INI JUAN ACCOUNT | , OI LINED ONDI | ac iii iiiisilic oic | Jiviii Okt. Cilido | _ | er FB |
| | | FOR FRB U | JSE ONLY | | | |
| Account Number | Account Subtitle | | Open Date | Open By | | |
| | | | 10/26/2016 | 5 | | |
| | | | | | |] |
| | | | | | | 1 |
| | | | | | | 4 |
| | | | | | | |
| | | | | | | 7 |
| | | | | L | | J |
| | | Member | FDIC | | | |

Page 2 of 2

FRB 1249A E - 08/14

Addendum to Business Master Signature Card Resolution and Agreement to Open Accounts and Services





| Account Name: | ESSENTIAL | CONSUL | TANTS | LLC |
|---------------|-----------|--------|-------|-----|
|---------------|-----------|--------|-------|-----|

The individual named below is an Authorized Signer on the deposit account(s) listed on the Business Master Signature Card Resolution and Agreement.

To be completed by Authorized Signer:

| Legal Name | Michael C | ohe | en | | |
|---|-----------------|-----|----|--|--|
| Home Address | | | | | |
| | | | | | |
| Mailing Address (if different from above) | | | | | |
| SSN | | | | | |
| Date of Birth | | | | | |
| Mother's Maiden Name | | | | | |
| ID Type and Number | Drivers License | | | | |
| Home Phone Number | | | | | |
| Cell Phone Number | | | · | | |
| Work Phone Number | · | | | | |
| Fax Number | | | | | |
| Employer's Name | | | | | |
| Occupation | LAW | | | | |
| Email Address | | | | | |
| Email Address (Alternate) | | | | | |

b6 per FBI b7C per FBI

| By signing below, I authorize First Republic Bank to obtain verifications and reports on my accounts and financial affairs, such as |
|--|
| credit bureau and account status reports on the above referenced business and me as an individual, in connection with the business |
| identified above. I understand that First Republic Bank requests this information for legitimate business reasons. Should the |
| information obtained from any such verification or report cause First Republic Bank to decide to deny the application for an account |
| or take any other action with respect to an account of the above-named business, I also authorize First Republic Bank to |
| communicate to any co-applicant and to any co-owner, director, or officer of the business that the denial was based in whole or in |
| part on such information. |
| ^ |

| | ~ | Michael Cohen | 10-26-16 |
|-------------------------------|---|--|------------------------------|
| Signature of Authorized | \$jgner | Print Full Name | Date |
| Upon execution this agreement | en may be delivered by facsimile copy or email attachment | and the copy shall be deemed to have the | same effect as the original. |

Page 1 of 1 FRB 1249B E - rev. 08/14

<u>Delaware</u>

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "ESSENTIAL CONSULTANTS LLC", FILED IN THIS OFFICE ON THE SEVENTEENTH DAY OF OCTOBER, A.D. 2016, AT 10:21 O'CLOCK A.M.

6185135 8100 SR# 20166361436

You may verify this certificate online at corp.delaware.gov/authver.shtml



Jeffrey W. Ballock, Secretary of State

Authentication: 203225394 Date: 10-26-16 State of Delaware
Secretary of State
Division of Corporations
Delivered 10:21 AM 10/17/2016
FILED 10:21 AM 10/17/2016
SR 20166222994 - File Number 6185135

STATE of DELAWARE LIMITED LIABILITY COMPANY CERTIFICATE of FORMATION

ESSENTIAL CONSULTANTS LLC

First: The name of the limited liability company is Essential Consultants LLC.

Second: The address of its registered office in the State of Delaware is 160 Greentree Drive, Suite # 101 in the City of Dover, County of Kent, Zip code 19904. The name of its registered agent at such address is National Registered Agents, Inc.

In Witness Whereof, the undersigned has executed this Certificate of Formation this 17th day of October, 2016.

By: /s/ Michael Cohen
Authorized Person

Name: Michael Cohen

b6 per FBI b7C per FBI

| | Know You reated By 10/26/2016 10:52 AM PDT | Last (| F (KYC) Updated By 0/26/2016 11:04 AM PDT | b6 per FBI b7C per FBI |
|---|--|---|---|--|
| Roles Legal Entity - Completed | | EDD Referer N/A | nce ID | |
| Customer Identification Prog | TIN | nary Address | United States | b6 per FBI b7C per FBI |
| CIP Verification Document Type Provided Articles or Certificate of Incorporation/Formation | Date of Formation | Country of Formation United States | Expiration Date | 10000000000000000000000000000000000000 |
| Customer Due Diligence Years at current principal place of business 0 to 1 Years Is the entity a Nonbank Residential Mortgage Originator loan or finance company? No Is 10% or more of this entity foreign government | First P Lender & Nan MICI Referent owned? more | erral Source Republic Client ne of Referral Source HAEL COHEN erral Source's Length of Relation of this, 3 years, etc.) ty type ted Liability Company (LC, LLC) ty sub-type | onship with the Bank (i.e. 2 | b6 per FBI b7C per FBI |

Page 2 of 4

b6 per FBI b7C per FBI

| ٠ | ٠ | _ | _ | |
|---|---|---|---|--|

Is this Entity considered a non-operational personal estate planning or asset protection vehicle, commonly referred to as a Personal Investment Company(PIC) or Private Investment Vehicle(PIV)?

No

Is the entity engaged in any of the below types of activities?

(Check all that apply)

No

Does the entity derive income/funds, including investment in or loan repayment, (either directly or indirectly) from any of the below types of activities? (check all that apply)

No

Is the entity associated with Political Fundraising/Political Action

Committee (PAC)?

No

Industry / Activity

Entity NAICS Category

Professional Services - Other

Entity NAICS description

Management Consulting (including HR and Marketing) - 541611

Business Narrative

| lander of | Business Narrative . | Date Entered | and the same |
|-----------|---|--------------|-----------------------|
| 1 | MICHAEL COHEN IS OPENING ESSENTIAL CONSULTANTS LLC AS A REAL ESTATE CONSULTING COMPANY TO COLLECT FEES FOR INVESTMENT CONSULTANTING WORK HE DOES FOR REAL ESTATE DEALS. | 10/26/2016 | THE STREET STREET ST. |

Privately-Owned ATM

Does the Entity have a privately owned ATM at any of their

business locations?

No

Does the Entity provide check cashing, sell monetary instruments, or sell lottery tickets at any of their business locations?

No

Nο

Bearer Shares

Does the entity permit issuance or conversion of its ownership

shares in bearer form (i.e. a bearer share entity)?

No

Does any entity within the accountholder's ownership structure permit issuance or conversion of its ownership shares in bearer

form (i.e. a bearer share entity)?

Other Information

Business Operations

Service Provider

Country of Headquarters

Countries of Primary Trade and Operations

United States

| 2000279045 - | ESSENTIAL | CONSULTANTS | LLC - TIN: | |
|--------------|------------------|-------------|------------|--|

Page 3 of 4

b6 per FBI b7C per FBI

| | ite | | |
|--|-----|--|--|
| | | | |

Does any signer for this entity act as an agent on behalf of a company whose business is to establish, organize and manage corporations (i.e. Nominee Company - act as a Registered Agent, or to perform UCC search and filing, compliance and entity services)?

No

For non-public companies, identify the top individual in Executive/Senior Management (Chairman, Chief Executive Officer (CEO), President, Chief Operating Officer (COO), Chief Financial Officer (CFO), or equivalent such as General Partner)

| Full Legal Name | Position Held | Country of Residence |
|-----------------|---------------|----------------------|
| MICHAEL COHEN | OWNER | United States |

SFPFs/PEPs Information

Is the entity a state-owned enterprise or an entity that has been formed by, or for the benefit of, a senior foreign political figure defined as the below? Or are any of the beneficial owners, Board members, senior managers, or signers of the client a senior foreign political figure defined as the below?

- 1) A current or former:
- Senior official in the executive, legislative, administrative, military, or judicial branches of a foreign government (whether elected or not).
- Senior official of a major foreign political party.
- Senior executive of a foreign-government-owned commercial enterprise.
- 2) An immediate family member (including spouses, parents, siblings, children, and a spouse's parents and siblings) of any such individual.
- 3) A person who is widely and publicly known (or is actually known by the relevant bank) to be a close associate of such individual.

(For purposes of this definition, the terms "senior official" or "senior executive" mean an individual with substantial authority over policy, operations, or the use of government-owned resources.)

No

Beneficial Owner

Does the Entity have applicable Beneficial Owners?

Νo

Account Details

Purpose of Account(s)

Source of Funds?

Deposits - Operating

Royalties/residuals

Is the source of funds/income primarily derived from within the

U.S. or a U.S. based company?

Yes

Does this Entity/Individual support FBO account?

No

Products and Expected Activity

https://flightpath.corp.firstrepublic.com/suite/tempo/records/item/lsBxoKePcTeYM4x-adh... 7/21/2017
-Confidential - Not For Publication FBI (19cv1278)-13923
-FRBSPC-00020299

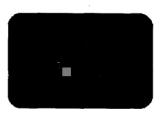
| 4000412042 - EGGERTIME CONGOLIMINIA LEC - ITINI | 2000279045 | - ESSENTIAL | CONSULTANTS LLC - TIN: | |
|---|------------|-------------|------------------------|--|
|---|------------|-------------|------------------------|--|

Page 4 of 4

b6 per FBI b7C per FBI

| Vires | | |
|---|--|--------------|
| | | |
| ncoming: Total dollar range per Month | Outgoing: Total dollar range per Month | |
| 1-\$10,000 | None | , |
| ncoming: Total transactions per Month | Outgoing: Total transactions per Month | |
| -20 | None | |
| ist any/all countries Electronic Debits / Credits (Wires) will be | | |
| ransacted | | |
| Inited States | | |
| ACH / Electronic Transfers | | |
| redits (Receiving): Total dollar range per Month | Debits (Sending): Total dollar range per Month | |
| 1-\$10,000 | None | |
| redits (Receiving): Total transactions per Month | Debits (Sending): Total transactions per Month | |
| -20 | None | |
| ist any/all countries Electronic Debits/Credits (ACH) will be | | |
| ransacted | | |
| Inited States | | |
| | | |
| | | |
| | | |
| xpected Activity Narrative(s) | | |
| Expected Activity Narrative | | Date Entered |
| THIS ENTITY WILL BE SET UP TO RECEIVE CONSULTING FEES IN | N THE FORM OF WIRES AND ACH - ALL UNDER 10K 1-2 A ULTING WORK FROM PERSONAL CLIENTS ALL DOMESTIC. | |

| From: To: Cc: Subject: Date: Attachments: | Essential Consulting Monday, December 19, 2016 8:00:26 PM kvc.ndf | b6 per FBI b7C per FBI |
|--|---|---------------------------|
| Hi | | |
| I just resubmitted t | this in Flightpath for Essential Consulting – | |
| The NAICS should l | pe 541611 – I will fix the signature card and scan tomorrow. | |
| All the best, | b6 pe | r FRT |
| | b/70 p | er FBI |
| Preferred Banking (First Republic | Offices | |
| 575 Madison Avenu Office: | New York, NY 10022 Fax: | |





Know Your Customer (KYC)

| Party ID | Created By | | | Last Updated By | |
|--|--|---|--|--|--|
| Description of the second of t | 10/26/2016 10:52 | 2 AM PDT | | 12/19/2016 4:49 PM PST | Commercial of |
| | | | | | |
| Roles | | WT I REGISTER II Advantage VIII VIII WAS AN INCIDENTAGE AND ADVANCED BY | EDD Refer | ence ID | b6 per FBI |
| Legal Entity - Completed | | | N/A | | b7C per FB |
| Customer Identification Program | (CIP) | | ende liken sellen met synden den like denlem staten met se | | 198 |
| Legal Entity Name ESSENTIAL CONSULTANTS LLC | | TIN | | | b6 per FBI |
| | | Primary Addres | • | | b7C per FB |
| | | <u> </u> | | United States | |
| Alternate Completed By | | | | | |
| | | | | | |
| CIP Verification | WE ARE ARRESTED AND THE PROPERTY OF THE PROPER | Milliand | and the statement of th | | |
| Document Type Provided | Date of Formation | Country | of Formation | Expiration Date | P ₁ and a second |
| Articles or Certificate of Incorporation/Formation | 10/17/2016 | United S | States | The state of the s | To de la constante de la const |
| Customer Due Diligence | and the second s | - 34,000 | The same of the sa | · · · · · · · · · · · · · · · · · · · | , |
| Years at current principal place of business | | Referral Source | PROPERTY OF THE PROPERTY OF TH | *************************************** | |
| 0 to 1 Years Is the entity a Nonbank Residential Mortgage L | ender & Originator loan or | First Republic Cli Name of Referra | | | |
| finance company? No | | MICHAEL COHE Referral Source | | nship with the Bank (i.e. 2 months, 3 | |
| | | years, etc.) | 5 Length of Female | nonp with the bunk (i.e. 2 months, o | b6 per FBI |
| | | Entity type | | | b7C per FB |
| | | Entity sub-type | company (LC, LLC) | | |
| | | None | of this antity foreign | government owned? | |
| | | No No | or and enary loreign | r government owned? | |
| ls this Entity considered a non-operational per: Company(PIC) or Private Investment Vehicle(PI No | sonal estate planning or as V)? | set protection veh | icle, commonly refe | rred to as a Personal Investment | |
| is the entity engaged in any of the below types that apply) | of activities? (Check all | | | | |
| No | | | | | |
| | | • | | | |
| | | | | | |
| | | | | | |

https://flightpath.corp.firstrepublic.com/suite/tempo/records/type/KYCPartyRecords/item/js... 4/3/2017

- Confidential Not For Publication

FBI (19cv1278)-13926

FRBSPC-00001385

Does the entity derive income/funds, including investment in or loan repayment, (either directly or indirectly) from any of the below types of activities? (check all that apply)

No

Is the entity associated with Political Fundraising/Political Action Committee (PAC)?

No

Industry / Activity

Entity NAICS Category Professional Services - Other **Entity NAICS description**

Management Consulting (including HR and Marketing) - 541611

Business Narrative

| - | | Business Narrative | Date Entered | |
|---|---|---|--------------|--|
| | 1 | MICHAEL COHEN IS OPENING ESSENTIAL CONSULTANTS LLC AS A REAL ESTATE CONSULTING COMPANY TO COLLECT FEES FOR INVESTMENT CONSULTANTING WORK. MICHAEL COHEN IS AN ATTORNEY IN THE TRUMP ORGANIZATION AND WILL USE HIS EXPERIENCE IN REAL ESTATE TO CONSULT ON COMMERCIAL AND RESIDENTIAL REAL ESTATE DEALS. HIS TYPICAL CLIENTS ARE HIGH NET WORTH DOMESTIC INDIVIDUALS. THIS IS NOT HIS MAIN SOURCE OF INCOME AND IS SETTING UP THE ACCOUNT TO KEEP THE REVENUE SEPERATE FROM HIS PERSONAL FINANCES. | 12/19/2016 | Contract of the Contract of th |

Money Service Business Activities

Does the Entity have a privately owned ATM at any of their business locations?

Does the Entity provide check cashing, sell monetary instruments, or sell lottery tickets at any of their business locations?

No

locations?

Bearer Shares

Does the entity permit issuance or conversion of its ownership shares in bearer form (i.e. a bearer share entity)?

Does any entity within the accountholder's ownership structure permit issuance or conversion of its ownership shares in bearer form (i.e. a bearer share entity)?

N

Other Information

Business Operations Service Provider Countries of Primary Trade areas and Operations

United States

Country of Headquarters

United States

Does any signer for this entity act as an agent on behalf of a company whose business is to establish, organize and manage corporations (i.e. Nominee Company - act as a Registered Agent, or to perform UCC search and filling, compliance and entity services)?

No

For non-public companies, identify the top individual in Executive/Senior Management (Chairman, Chief Executive Officer (CEO), President, Chief Operating Officer (COO), Chief Financial Officer (CFO), or equivalent such as General Partner)

| Full Legal Name | Position Held | Country of Residence |
|---------------------------------------|---------------|--|
| MICHAEL COHEN | OWNER | United States |
| · · · · · · · · · · · · · · · · · · · | | NAME OF THE OWNER OWNER OF THE OWNER OW |

SFPFs/PEPs Information

Is the entity a state-owned enterprise or an entity that has been formed by, or for the benefit of, a senior foreign political figure defined as the below? Or are any of the beneficial owners, Board members, senior managers, or signers of the client a senior foreign political figure defined as the below?

1) A current or former:

[·] Senior official in the executive, legislative, administrative, military, or judicial branches of a foreign government (whether elected or not).

Senior official of a major foreign political party.
Senior executive of a foreign-government-owned commercial enterprise.

2) An immediate family member (including spouses, parents, siblings, children, and a spouse's parents and siblings) of any such individual.

3) A person who is widely and publicly known (or is actually known by the relevant bank) to be a close associate of such individual.

(For purposes of this definition, the terms "senior official" or "senior executive" mean an individual with substantial authority over policy, operations, or the use of government-owned resources.)

Source of Funds?

Royalties/residuals

No

Beneficial Owner

Does the Entity have applicable Beneficial Owners?

Account Details - Deposits

Purpose of Account(s)

Deposits - Operating

is the source of funds/income primarily derived from within the U.S. or a U.S. based company?

Does this Entity/Individual support FBO account?

Products and Expected Activity - Deposits

Online Banking

Wires

Incoming: Total dollar range per Month

\$1-\$10,000

Incoming: Total transactions per Month

List any/all countries Electronic Debits / Credits (Wires) will be transacted

United States

ACH / Electronic Transfers

Credits (Receiving): Total dollar range per Month

\$1-\$10,000

Credits (Receiving): Total transactions per Month

1-20

Debits (Sending): Total dollar range per Month

Outgoing: Total dollar range per Month

Outgoing: Total transactions per Month

None

Debits (Sending): Total transactions per Month

None

List any/all countries Electronic Debits/Credits (ACH) will be transacted

United States

Expected Activity Narrative(s)

| AL BY BOARD | Expected Activity Narrative | Date Entered | Action 19 and |
|-------------|---|--------------|-----------------------|
| 1 | THIS ENTITY WILL BE SET UP TO RECEIVE CONSULTING FEES IN THE FORM OF WIRES AND ACH - ALL UNDER 10K 1-2 A MONTH. THE WIRES AND FEES WILL BE INCOME FROM CONSULTING WORK FROM PERSONAL CLIENTS ALL DOMESTIC. HE WILL THEN INTERNALLY TRANSFER THE FUNDS TO HIS PERSONAL ACCOUNT AT FIRST REPUBLIC. HE IS SETTING THIS ACCOUNT TO KEEP THE INCOME FROM HIS CONSULTING WORK SEPERATE. | 12/19/2016 | Control of the second |

| EEV - ESSENTIAL CONSUL | TANTS LLC - 2 | 2000279045 |
|------------------------|---------------|------------|
|------------------------|---------------|------------|

Page 4 of 4

| Signature: | |
|------------|---|
| | |
| | |
| | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |

| OF ILON FILM | EIF CLOSING ACCOUNT | 70 | | Prene | ared by: | | 7 |
|--|---|--|---|--|--|---|--------------------------|
| | EDDENTIAL COM | | | 3 | nch No: 130 | | |
| Repetitive Nar | We: PROCHING COM | SOCIALIO LEO | | | Date: 1017 | He | b6 per FBI b7C per FB |
| USD Amount: | | Ecroico Amount | | Curr Code: | | | b/C per rb |
| USD AMOUN. | J | FX Rate: | | Trader: | | | |
| Written Amour | nt | | | · · · · · · · · · · · · · · · · · · · | Angenia in the second | | |
| . Originator/Bo | rrower | | | | | | |
| Name: | | ISULTANTS LLC | Account No: | | | | |
| Address: | | | | | | b6 per FB | - |
| | | | | | | b7C per F | |
| | Domestic Wire Only | | | International Win | e Only | | |
| . Domestic Ba | ank | | C. International Bank | | · · · · · · · · · · · · · · · · · · · | | |
| A No: 1 | 22016066 | | Intermediary Bank ABA No: | | | | |
| nk Name: | CITY NATION | AL BANK | Bank Name: | | | | |
| dress: | | | Address: | | 77. | | |
| _ | | | Infi Bank Name | | | | |
| | | | Address | | | | |
| | | | Swift Code: | | | | |
| | | | Sort Code | | | | |
| Beneficiary | | | - | | | | |
| me: dress: | | | IBAN/Account NO. |)r | | | |
| | | | . | | | 6 per FBI | |
| | | | | | h | 7C per FBI | |
| Originator to | | : ESSENTIAL CONSULT | ANTS LLC | | | | |
| Information | | | | | | | |
| | | | | | | | |
| | | tainer | | | | | |
| Purpose of V Sent (BBI) | | terer | | | | | |
| | | laner | | | | | . |
| Sent (BBI) | Nire Being Re | | ite and accurate. I/we here | eby agree to indemnify | For Wira Soo | o please water to t | ho l |
| Sent (BBI) | Nire Being Re | | ite and accurate. I/we here loss, claim, damage or lis eliance upon instructions | eby agree to indemnify ability arising out of or provided in this Wire | For Wire Fee | s, please refer to t | |
| Sent (BBI) | Nire Being Re | | ite and accurate. I/we here loss, claim, damage or lis eliance upon instructions to transfer funds and de forth in the instructions I | eby agree to indemnify ability arising out of or provided in this. Wire solt my/our account for herein. I've agree that | For Wire Fee | usiness or Consu | |
| Awe certify that and hold First esulting from Fransfer Author he amount of such transfer control of the | Nire Being Re | | ite and accurate. I/we here loss, claim, damage or lis eliance upon instructions to transfer funds and de forth in the instructions I ds Transfer Agreement for | eby agree to indemnify ability arising out of or provided in this Wire solt my/our account for herein. I'we agree that ound on page 2 of this | For Wire Fee appropriate 8 Schedule of I | usiness or Consu | |
| Awe certify that and hold First esulting from Transfer Autho he amount of such transfer com. | t the information containe Republic Bank hamless any action taken by Fir rization Form. I/we autho funds transferred plus the funds is subject to the I | | ite and accurate. I/we here loss, claim, damage or lie pliance upon instructions to transfer funds and de t forth in the instructions I ds Transfer Agreement fo | 1 | | usiness or Consu | |
| we certify that and hold First esulting from ransfer Autho he amount of such transfer com. | t the information containe Republic Bank hamless any action taken by Fir rization Form. I/we autho funds transferred plus the funds is subject to the I | | te and accurate. I/we here loss, claim, damage or lis eliance upon instructions to transfer funds and de t forth in the instructions I ds Transfer Agreement fo | eby agree to indemnify ability arising out of or provided in this Wire ebit my/our account for herein. I'we agree that ound on page 2 of this | j b6 | usiness or Consu rees. | |
| we certify that and hold First esulting from ransfer Autho he amount of uch transfer com. | t the information containe Republic Bank hamless any action taken by Fir inzation Form. I/we autho funds transferred plus the funds is subject to the I | | te and accurate. I/we here loss, claim, damage or lis eliance upon instructions to transfer funds and de t forth in the instructions I dis Transfer Agreement for | 1 | b6 b7 | usiness or Consu Fees. per FBI C per FBI | |
| Sent (BBI) We certify that and hold First esulting from transfer Authories amount of uch transfer comm. Client's Signature Requirements | t the information containe Republic Bank hamless any action taken by Fir inzation Form. I/we autho funds transferred plus the funds is subject to the I | | te and accurate. I/we here loss, claim, damage or lis eliance upon instructions to transfer funds and de t forth in the instructions I dis Transfer Agreement to | Date: 10/21 | b6 b7 Wire Opera | usiness or Consu Fees. per FBI C per FBI | |
| Sent (BBI) /we certify that and hold First esulting from ransfer Autho he amount of uch transfer c om. Client's Signa ignature Req er Approved | t the information containe Republic Bank harmless any action faken by Fir nization Form. I/we autho funds transferred plus the funds is subject to the I siture: X uired Wire Limit | | te and accurate. I/we here loss, claim, damage or lie eliance upon instructions to transfer funds and de t forth in the instructions in dis Transfer Agreement for | Date: 10/27 | Wire Opera | usiness or Consu Fees. per FBI C per FBI | |
| Sent (BBI) we certify that not hold First assulting from transfer Authore amount of ouch transfer comm. Client's Signal ignature Req er Approved Authorizatio | t the information containe Republic Bank harmless any action faken by sir inization Form. I/we autho funds transferred plus th funds is subject to the I siture: X uired Wire Limit in (print) | | te and accurate. I/we here loss, claim, damage or lie eliance upon instructions to transfer funds and de t forth in the instructions I ds Transfer Agreement fo | Date: 10/21 | Wire Opera | usiness or Consu Fees. per FBI C per FBI | |
| Sent (BBI) We certify that and hold First esulting from Transfer Author the amount of such transfer c orm. Client's Signa Signature Req er Approved Authorizatio | t the information containe Republic Bank harmless any action faken by sir inization Form. I/we autho funds transferred plus th funds is subject to the I siture: X uired Wire Limit in (print) | | te and accurate. I/we here loss, claim, damage or lie eliance upon instructions to transfer funds and de t forth in the instructions and ds Transfer Agreement for | Date: 10/27 | Wire Opera to Branch By. | usiness or Consu Fees. per FBI C per FBI | |
| Sent (BBI) We certify that and hold First esulting from ransfer Author the amount of uch transfer c orm. Client's Signa ignature Req er Approved Authorizatio | t the information containe Republic Bank harmless any action faken by sir inization Form. I/we autho funds transferred plus th funds is subject to the I siture: X uired Wire Limit in (print) | | te and accurate. I/we here loss, claim, damage or lie eliance upon instructions to transfer funds and de t forth in the instructions and ds Transfer Agreement for | Date: 10/27 Caliback Talked T Entered | Wire Opera to Branch By: o: By: | usiness or Consu Fees. per FBI C per FBI | |
| Sent (BBI) we certify that not hold First assulting from transfer Authore amount of ouch transfer comm. Client's Signal ignature Req er Approved Authorizatio | t the information containe Republic Bank harmless any action faken by sir inization Form. I/we autho funds transferred plus th funds is subject to the I siture: X uired Wire Limit in (print) | | ite and accurate. I/we here loss, claim, damage or lis eliance upon instructions to transfer funds and de forth in the instructions I ads Transfer Agreement to | Date: 10/27 Cafiback Talked T Entered Control # | Wire Opera to Branch By: o: By: | usiness or Consu Fees. per FBI C per FBI | |
| Sent (BBI) we certify that not hold First assulting from transfer Authore amount of ouch transfer comm. Client's Signal ignature Req er Approved Authorizatio | t the information containe Republic Bank harmless any action faken by sir inization Form. I/we autho funds transferred plus th funds is subject to the I siture: X uired Wire Limit in (print) | | ite and accurate. I/we her loss, claim, damage or lis eliance upon instructions to transfer funds and de forth in the instructions I nds Transfer Agreement for | Date: 10/27 Cafiback Talked T Entered Control # Approve | Wire Opera to Branch By: o: By: | usiness or Consu Fees. per FBI C per FBI | |
| Sent (BBI) we certify that not hold First assulting from transfer Authore amount of ouch transfer comm. Client's Signal ignature Req er Approved Authorizatio | t the information containe Republic Bank hamless any action form. I/we autho funds transferred plus th of funds is subject to the I siture: X uired Wire Limit on (print mature) X | d herein is true, complei from and against any i st Republic Bank in re rizze First Republic Bank e applicable fees as set First Republic Bank Fun | | Caliback Talked T Entered Control # Approve Date: | Wire Opera to Branch By: o: By: d By: | usiness or Consu Fees. per FBI C per FBI | |
| Sent (BBI) Awe certify that and hold First esulting from transfer Authorite amount of such transfer corm. Client's Signal signature Requer Approved Authorization ame below signal transfer signal transfer corm. | t the information containe Republic Bank harmless any action faken by rindigation Form. I/we autho funds transferred plus the funds is subject to the I siture: X uired Wire Limit In (print Innature) INTERNAL USE | d herein is true, complet from and against any is t Republic Bank in retize first Republic Bank Fundament of the second of the s | Check one box and cor | Callback Talked T Entered Control Approve Date: | Wire Opera to Branch By: to: By: t d By: steps as indicated. | usiness or Consul- rees. per FBI C per FBI tions Only: | |
| Sent (BBI) We certify that and hold First esulting from transfer Author amount of uch transfer comm. Client's Signa ignature Req er Approved Authorizatio ame below signature below signature. | t the information containe Republic Bank harmless any action faken by Fir dization Form. I/we autho funds transferred plus the funds is subject to the I siture: X ulred Wire Limit An (print gradure) INTERNAL USE Person D | d herein is true, complei from and against any i st Republic Bank in re rizze First Republic Bank e applicable fees as set First Republic Bank Fun | Check one box and cor | Caliback Talked T Entered Control # Approve Date: | Wire Opera to Branch By: o: By: t d By: | per FBI C per FBI tions Only: | mer |
| Sent (BBI) Ave certify that and hold First esulting from fransfer Author the amount of such transfer corn. Client's Signa errors and Authorization ame below signature Requires and Authorization ame below signature below signature. | t the information containe Republic Bank harmless any action faken by Fir dization Form. I/we autho funds transferred plus the funds is subject to the I siture: X ulred Wire Limit An (print gradure) INTERNAL USE Person D | d herein is true, complet from and against any is t Republic Bank in retize first Republic Bank Fundament of the second of the s | Check one box and cor | Callback Talked T Entered Control Approve Date: | Wire Opera to Branch By: o: By: t d By: | per FBI C per FBI tions Only: y Fax / By Mall | mer |
| Sent (BBI) Awe certify that and hold First esulting from Irransfer Authorization from Signature Requested from the Authorization arme below signature signature Requested from the Authorization arme below signature s | t the information containe Republic Bank harmless any action faken by Fir nization Form. I/we autho funds transferred plus th funds is subject to the I siture: X uired Wire Limit an (print tynature) INTERNAL USE | d herein is true, completed from and against any is the Republic Bank in recize First Republic Bank Fundament of the Republi | Check one box and cor | Callback Talked T Entered Control Approve Date: | Wire Opera to Branch By: o: By: t d By: steps as indicated. By Email / B • Perform a cathe Callback | per FBI C per FBI tions Only: y Fax / By Mall | mer |
| Sent (BBI) We certify that and hold First esulting from fransfer Authories amount of uch transfer comm. Client's Signal ignature Requer Approved Authorization ame below signal unds Verifie ignature Ve | t the information containe Republic Bank harmless any action faken by Fir nization Form. I/we autho funds transferred plus th funds is subject to the I siture: X uired Wire Limit in (print transferred) INTERNAL USE INTERNAL | d herein is true, completed from and against any is the Republic Bank in recize First Republic Bank Fundament of the Republi | Check one box and cor | Callback Talked T Entered Control # Approve Date: | Wire Opera to Branch By: o: By: t d By: steps as indicated. By Email / B • Perform a cathe Callback | per FBI C per FBI tions Only: y Fax / By Mail illback and complete | mer |
| Sent (BBI) Awe certify that and hold First esulting from Irransfer Authorhe amount of such transfer comm. Client's Signature Requer Approved a Authorization ame below signature Verificing and Verific | t the information containe Republic Bank harmless any action faken by Fir nization Form. I/we autho funds transferred plus th funds is subject to the I siture: X uired Wire Limit in (print grature) INTERNAL USE in Person Ded by: criffied by: d the wire | d herein is true, completed from and against any is the Republic Bank in recize First Republic Bank Fundament of the Republi | Check one box and cor | Callback Talked T Entered Control # Approve Date: | Wire Opera to Branch By: o: By: td By: steps as indicated. By Email / B Perform a ce the Callback Verification | per FBI C per FBI tions Only: y Fax / By Mail illback and complete | mer |
| Sent (BBI) //we certify that and hold First esulting from Irransfer Authorhe amount of such transfer comm. Client's Signature Requer Approved & Authorization ame below signature Signature Signature Signature Signature Signature Signature Signature Signature Velave reviewed | t the information containe Republic Bank harmless any action faken by Fir nization Form. I/we autho funds transferred plus th funds is subject to the I siture: X uired Wire Limit in (print grature) INTERNAL USE in Person Ded by: criffied by: d the wire | d herein is true, completed from and against any is the Republic Bank in recize First Republic Bank Fundament of the Republi | Check one box and cor | Callback Talked T Entered Control # Approve Date: | Wire Opera to Branch By: o: By: td By: steps as indicated. By Email / B Perform a ce the Callback Verification | per FBI C per FBI tions Only: y Fax / By Mail illback and complete | mer |
| Sent (BBI) Ave certify that and hold First esulting from Fransfer Authority of the amount of such transfer corn. Client's Signa Signature Requester Approved Authorization arme below signature Verification of Syria in the signature Verification of Syria and the signature Verification, or Syria | t the information containe Republic Bank harmless any action faken by Fir nization Form. I/we autho funds transferred plus th funds is subject to the I siture: X uired Wire Limit in (print grature) INTERNAL USE in Person Ded by: criffied by: d the wire | d herein is true, completed from and against any is the Republic Bank in recize First Republic Bank Fundament of the Republi | Check one box and cor | Callback Talked T Entered Control # Approve Date: | Wire Opera to Branch By: o: By: td By: steps as indicated. By Email / B Perform a ce the Callback Verification | per FBI C per FBI tions Only: y Fax / By Mail illback and complete | mer |
| i/we certify that and hold First resulting from Transfer Authorite amount of such transfer comm. Client's Signature Requery Signature Requery Signature Requery Signature Requery Signature Requery Signature Requery Signature Signature Signature Signature Requery Signature Sig | t the information containe Republic Bank harmless any action faken by Fir nization Form. I/we autho funds transferred plus th funds is subject to the I siture: X uired Wire Limit in (print grature) INTERNAL USE in Person Ded by: criffied by: d the wire | d herein is true, completed from and against any is the Republic Bank in recize First Republic Bank Fundament of the Republi | Check one box and cor | Callback Talked T Entered Control # Approve Date: | Wire Opera to Branch By: o: By: td By: steps as indicated. By Email / B Perform a ce the Callback Verification | per FBI C per FBI tions Only: yFax / By Mail illback and complete | mer |
| Sent (BBI) Ave certify that and hold First esulting from Fransfer Authority of the amount of such transfer corn. Client's Signa Signature Requester Approved Authorization arme below signature Verification of Syria in the signature Verification of Syria and the signature Verification, or Syria | t the information containe Republic Bank harmless any action faken by Fir nization Form. I/we autho funds transferred plus th funds is subject to the I siture: X uired Wire Limit in (print grature) INTERNAL USE in Person Ded by: criffied by: d the wire | d herein is true, completed from and against any is the Republic Bank in recize First Republic Bank Fundament of the Republi | Check one box and cor | Callback Talked T Entered Control # Approve Date: | Wire Opera to Branch By: o: By: td By: steps as indicated. By Email / B Perform a ce the Callback Verification | per FBI C per FBI tions Only: yFax / By Mail illback and complete | mer |
| Sent (BBI) We certify that and hold First esulting from transfer Author amount of uch transfer corm. Client's Signa er Approved Authorization ame below signature Requires and the signature Requires and the signature signature verifies ignature Verifies ignature Verifies ignature Verifies ignature Verifies ignature vereiewed and or Syria | t the information containe Republic Bank harmless any action faken by Fir nization Form. I/we autho funds transferred plus th funds is subject to the I siture: X uired Wire Limit in (print grature) INTERNAL USE in Person Ded by: criffied by: d the wire | d herein is true, completed from and against any is the Republic Bank in recize First Republic Bank Fundament of the Republi | Check one box and cor | Callback Talked T Entered Control # Approve Date: | Wire Opera to Branch By: o: By: td By: steps as indicated. By Email / B Perform a ce the Callback Verification | per FBI C per FBI tions Only: y Fax / By Mail illback and complete form and attach it to | mer |

Funds Transfer Agreement ("Agreement")

- This Agreement is made between you ("Originator") and First Republic Bank ("Bank"). By requesting Bank to execute funds transfer, Originator hereby agrees to the following terms and conditions:
 - The Bank will exercise reasonable efforts to execute all funds transfer on the Business Day received, when received prior to Bank's daily deadline which Bank may establish from time to time. "Business Day" means that part of a day during which the Bank is open for the receipt and processing of funds transfer. Saturdays, Sundays, and bank holidays are not considered Business Days. Originator agrees that the Bank may handle funds transfer received from Originator and other customers in any order selected by Bank, and that Bank may use any means or routes which Bank, in its sole discretion, considers suitable for the transfer of funds. The Bank shall be under no obligation to make any transfer unless Originator has on deposit with the Bank in one or more accounts available funds sufficient to cover such transfer, or Originator presents sufficient immediate available funds in person and deposit to the account(s) at the time of making the funds transfer request and authorization. However, the Bank may, in its sole discretion execute a funds transfer which causes an overdraft in Originator's account in which case Originator shall be liable For funds transfer made out of the account(s) with the Bank, the Bank will mail an advice to you at the address indicated in the Bank's records.
 - The advice will note the date and the amount of the transfer. Originator agrees to examine the advice promptly upon receipt and to notify the Bank immediately of any discrepancy between the advice and the Originator's records. The Bank shall not be liable for interest compensation, as set forth below, unless the Bank is notified of the discrepancy within 30 days from the date of the Originator's receipt of the confirmation or the Originator's bank statement including the debit for the funds transfer in question, whichever is earlier.
 - Originator agrees to pay all fees as determined by the Bank's fee schedules for funds transfer, which may change from time to time. Originator further agrees to reimburse the Bank for any actual expenses the Bank may incur to effect or revoke any funds transfer or perform any related act at the Originator's request.
 - Originator expressly agrees that the Bank shall be liable to the Originator only for the Bank's negligent performance or non-performance of the services provided pursuit to the Agreement, and that the Bank's responsibility hereunder shall be limited to the exercise of reasonable and ordinary care. The Bank shall not be liable for any error or delay on the part of any third party, including without limitation third parties used by the Bank, in executing any funds transfer or performing a related act, or for any error or delay in executing a funds transfer or performing a related act due to any cause other than the Bank's own failure to exercise reasonable and ordinary care, and no such third party shall be deemed to be the Bank's agent. Further, the Bank shall not be liable to the Originator or any third party for failure to execute any funds transfer or perform a related act if such failure is due to causes or conditions beyond the Bank's reasonable control, including, without limitation, strikes, riots, insurrection, war, military, or national emergencies, acts of God, natural disasters, fire, outage of computers or associated equipment, or failure of transportation or communication methods or power supplies. In no event shall the Bank be liable for special, indirect or consequential damages, including, without limitation, loss or damage from subsequent wrongful dishonor or resulting from the Bank's acts or omissions, except as may be otherwise provided by law. Bank shall not be liable for Originator's attorney fees except as required by law. The Bank's liability shall, in the event of delay or failure to transfer, be limited to the interest on the amount which was to be transferred or the amount which was delayed, whichever is applicable, from business day of receipt of the funds transfer until the Bank executed the funds transfer, The Bank's liability shall, in the event of a transfer of an erroneous amount, be limited to a refund of the amount transferred in error, plus interest thereon from the date of the transfer until the date of the refund, but not to exceed sixty days. Except as may be limited by applicable law, Originator agrees to indemnify the Bank and hold the Bank harmless (including payment of reasonable attorney's fees) against all liability to third parties arising out of, or in connection with, the terms and conditions of this Agreement or the services provided hereunder or otherwise to the Originator's instructions.
 - This Agreement shall be governed by and construed and enforced in accordance with the internal laws of the state or commonwealth where the Bank's main office is located, and applicable federal law.
 - Originator acknowledges and agrees that if a funds transfer describes a beneficiary inconsistently by name and account number, payment might be made by the beneficiary's bank on the basis of the account number, even if it identifies a person different from the named beneficiary, and that Originator's obligation to pay the funds transfer requested by the Originator to the Bank shall not be excused by such payment.
 - 7. Bank may at its option accept Originator's cancellations or amendments to a funds transfer. Originator acknowledges that if the Bank attempts to cancel or amend the reversal request or amendment must be agreed to by each financial institution which has accepted a funds transfer related to the funds transfer at issue, before it will be acted upon. Originator further agrees that the Bank shall have no liability if a cancellation or amendment is not effected. Originator agrees that Originator shall indemnify and hold the Bank and officers, directors, employees, and representatives harmless from and against any and all claims, demands, losses, liabilities and expenses, including attorney's fees and costs, resulting directly or indirectly from compliance with Originator's cancellation or amendment request.
 - In the event that the Bank shall be liable to Originator for interest compensation hereunder or under applicable law, interest shall be calculated on the basis of the average Federal Funds rate at the Federal Reserve Bank of San Francisco for each day of the period involved computed on the basis of a 365-day year and shall be remitted by direct payment to Originator or other payment mutually agreed upon by Originator and Bank.
 - The Bank hereby gives notice that funds transfer may be executed through Fedwire, a funds transfer system operated by the Federal Reserve Bank, through a correspondent selected by the Bank. With respect to funds transfers which are executed through Fedwire, Federal Reserve Regulation J and all applicable operating circulars shall govern the funds transfers. With respect to funds transfer executed through the Bank's correspondent who may use CHIPS (Clearing House Interbank Payments System), a funds transfer system operated by the New York Clearing House or SWIFT (Society for Worldwide Interbank Financial Telecommunication), the CHIPS Operating Rules or the SWIFT Operating Rules
 - shall govern the funds transfer.

 10. If U.S. Dollars are to be paid outside of the United States, a correspondent (intermediate) bank that accepts U.S. Dollars on behalf of the beneficiary bank listed must be provided. If a correspondent bank is not provided, First Republic Bank holds the right, without liability, to cover the funds and to pay the U.S. Dollar equivalent in local currency.
 - 11. If a funds transfer is to a foreign country, and if for any reason the credit covered by the foreign remittance herein is returned or re- credited to Bank, Originator agrees to accept a refund in the equivalence of United States Dollars for the amount of the foreign money credited based on the current buying rate on the date of the refund less any charges and expenses of Bank or Bank's agent.

 - The Bank will use best efforts to provide oral, written or electronic notice to Originator of rejection of a funds transfer on the execution date of the funds transfer provided, however the Bank shall not be liable to Originator for its failure to give such notice.
 Originator acknowledges that any Request and/or funds transfer that is executed by Bank will be subject to rules and regulations applicable to fund transfers, including but not limited to record keeping and information transmittal requirements under the Federal Bank Secrecy Act, and/or the fund transfers provision of the applicable Uniform Commercial Code and/or the Office of Foreign Assets Control (OFAC).

Customer Initials

| | _ |
|--|---------------------------|
| Document ID: 0.7.103.225945 | 1967 King |
| From: | b6 per FBI |
| | b7C per FBI |
| To: | |
| Cc: | |
| Bcc: | |
| Subject: Federal Reference Number | |
| Date: Thu Oct 27 2016 10:50:41 EDT | |
| Attachments: | |
| | _ |
| Hi Michael, | |
| | |
| | 1. C TDT |
| The Federal Reference # for your wire is: | b6 per FBI b7C per FBI |
| The foundative of the foundation of the foundati | D/C PEI IBI |
| | |
| All the stand | |
| All the best, | |
| | |
| | |
| | |
| Professor Danking Offices | |
| Preferred Banking Offices First Republic | |
| i iist Nepublic | |
| 575 Madison Avenue New York, NY 10022 | b6 per FBI |
| Office: Fax | b7C per FBI |
| Email: | |
| Citian. | |
| | |
| | |
| | |
| | |



The information transmitted is intended only for the person or entity to which it is addressed and may

contain confidential and/or privileged material. Any review, retransmission, dissemination or other use of, or taking of any action in reliance upon, this information by persons or entities other than the intended recipient is prohibited. If you received this in error, please contact the sender and delete the material from any computer. This message cannot be guaranteed to be secure or error-free.

First Republic Bank and its related entities do not take responsibility for, or accept time-sensitive instructions sent by email including orders, funds transfer instructions or stop payments on checks. All instructions of this nature must be handled by direct communication, not email.

We reserve the right to monitor and review the content of all email communications sent or received. Emails sent to or from this address may be stored in accordance with regulatory requirements. This email has been scanned by the Symantec Email Security.cloud service.

, · · ·

And the second of the second of the second

Jana Harana ay kasayada

e filipa e artega e escribiga gaga e e e e e e e e e e

Property and the company of the

topoli a visa larre signali la la

Surface to the season of the s

The results of the second of t

Michael D. Cohen

Statement of Financial Condition

September 30, 2017



JEFFREY A. GETZEL, CPA CFF

Independent Accountants' Compilation Report

Michael D. Cohen New York, New York

b6 per FBI b7C per FBI

Michael D. Cohen is responsible for the accompanying financial statements of Michael D. Cohen which comprise the statement of financial condition as of September 30, 2017, in accordance with accounting principles generally accepted in the United States of America. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. We did not audit or review the financial statements nor were we required to perform any procedures to verify the accuracy or the completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on these financial statements

Accounting principles generally accepted in the United States of America require that personal financial statements include a provision for estimated income taxes on the differences between the estimated current values of assets and the estimated current amounts of liabilities and their tax bases. The accompanying statement of financial condition does not include such a provision, and the effect of this departure from accounting principles generally accepted in the United States of America has not been determined.

Because the significance and pervasiveness of the matter discussed above make it difficult to assess its impact on the statement of financial condition, users of this financial statement should recognize that they might reach different conclusions about the financial condition of Michael D. Cohen if they had access to a revised statement of financial condition prepared in conformity with accounting principles generally accepted in the United States of America.

Michael D. Cohen has elected to omit substantially all of the disclosures required by accounting principles generally accepted in the United States of America. If the omitted disclosures were included in the statement of financial condition, they might influence the user's conclusions about the financial condition of Michael D. Cohen. Accordingly, this statement of financial condition is not designed for those who are not informed about such matters.

Woodbury, New York October 6, 2017

GETZEL SCHIFF

& PESCE LLP

CERTIFIED PUBLIC ACCOUNTANTS

100 CROSSWAYS PARK WEST SUITE 403

ԴDBURY, NY 11797

F516.692.8511

www.GSPcpa.com

Michael D. Cohen Statement of Financial Condition September 30, 2017

Assets

| | Cash | \$. | 1,250,000 |
|---|--|------------|---------------------------------------|
| | Investments in Closely Held Companies New York City Taxi Medallion Entities - Schedule 1 Chicago Taxi Medallion Entities - Schedule 1 Real Estate Entities - Schedule 2 Total Investments in Closely Held Companies Investment in Real Estate Personal Residence - New York, NY - Held in Trust b6 per F8 b7C per F | 000 000 | 17,630,000 3,200,000 11,000,000 |
| Γ | | <u></u> | 350,000 |
| | Total Assets | \$ | 33,430,000 |
| | Liabilities and Net Worth | | |
| • | Loans Payable to Medallion Entities Notes Payable - New York City Taxi Medallions - Schedule 1 Notes Payable - Chicago Taxi Medallions - Schedule 1 Mortgage Payable - Residence, New York, NY Mortgage Payable | \$ | 20,500,000 |
| | Total Liabilities | | 45,630,000 |
| | Net Worth (Deficit) | _ | (12,200,000) |
| | Total Liabilities and Net Worth | <u>\$.</u> | 33,430,000 |
| | | | per FBI C per FBI |

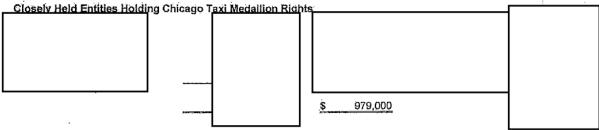
Michael D. Cohen Closely Held Entities Holding Taxi Medallion Rights September 30, 2017

Schedule 1

Closely Held Entities Holding New York City Taxi Medallion Rights

b6 per FBI b7C per FBI

| | Medallions | Ownership | | | Note |
|-------------------|------------|------------|--------------|---------------|---------------|
| Name of Entity | Owned | Percentage | Market Value | Note Holder | Payable |
| | 2 | 100% | \$ 372,000 | Sterling Bank | \$ 1,250,000 |
| | 2. | 100% | 372,000 | Sterling Bank | 1,250,000 |
| | 2. 2 | 100% | 372,000 | Sterling Bank | 1,250,000 |
| | 2 | 100% | 372,000 | Sterling Bank | 1,250,000 |
| | · 2 | 100% | 372,000 | Sterling Bank | 1,250,000 |
| | 2 | 100% | 372,000 | Sterling Bank | 1,250,000 |
| Mad Dog Cab Coro. | | 50% | 186,000 | Sterling Bank | 1,250,000 |
| | 2 | 100% | 372,000 | Sterling Bank | 1,250,000 |
| | 2 | 100% | 372,000 | Sterling Bank | 1,250,000 |
| | 2 | 100% | 372,000 | Sterling Bank | 1,250,000 |
| | 2 | 100% | 372,000 | Sterling Bank | 1,250,000 |
| | 2 | 100% | 372,000 | Sterling Bank | 1,250,000 |
| | 2 | 100% | 372,000 | Sterling Bank | 1,250,000 |
| | 2. | 100% | 372,000 | Sterling Bank | 1,250,000 |
| | 2 | 100% | 372,000 | Sterling Bank | 1,250,000 |
| | 2 | 100% | 372,000 | Sterling Bank | 1,250,000 |
| Total | . 32 | | \$ 5,766,000 | | \$ 20,000,000 |



b6 per FBI b7C per FBI

Michael D. Cohen Schedule of Real Estate Entities September 30, 2017

Schedule 2

| Name of Entity | Ownership Percentage | Estimated Fair Market Value Net of Mortgages | |
|----------------|-------------------------|---|---------------------------|
| | | | b6 per FBI b7C per FBI |

Total

10,885,000