

SUPPLEMENTAL INSTITUTIONAL ACCOUNT APPLICATION



Welcome

We're delighted to invite you to open a BitCards Institutional Account. Before we can complete the setup of your account, we need you to complete this Supplemental Institutional Account Application Form. The information you provide will be used by BitCards to comply with its regulatory obligations for KYC and AML, so we ask that you carefully complete the form and, if you need assistance, to please reach out to your account representative who will be happy to assist you or email support@bitcards.com with any questions.

STEP 1 COMPANY INFORMATION

As an "entity" account, we need you to provide the following:

- 1 A copy of the company's official formation or organizational document, such as the articles of incorporation, certificate of formation, partnership agreement, by-laws, operating agreement or trust instrument, as applicable;
- 2 Address verification (mail item within the last 90 days that lists the company and the address provided)
- 3 Proof of beneficial ownership of the company evidencing those entities or individuals owning 25% or more, such as an operating agreement, partnership agreement, share registry, capitalization table, or Schedule K1

STEP 2 BENEFICIAL OWNERS (INDIVIDUAL) OR CONTROL PERSONS

1. FinCen defines a Beneficial Owner as:

- Each individual, if any, who, directly or indirectly, owns 25% or more of the equity interests of a legal entity customer (i.e., the ownership prong); and
- A single individual with significant responsibility to control, manage, or direct a legal entity customer, including an executive officer or senior manager (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer); or any other individual who regularly performs similar functions (i.e., the control prong).

If any individual owns 25% or has rights to own, please complete the attached Beneficial Ownership (individual) section and send the following for each beneficial owner: ¹

- 1 A copy of valid government issued ID (driver's license or passport).
- 2 Address verification (mail item within the last 90 days that lists the individual and the address provided) if address is not listed on ID.

STEP 3 BENEFICIAL OWNERS (ENTITY) OR GENERAL PARTNER/INVESTMENT MANAGER

If any entity owns 25% or more, please complete the attached Beneficial Ownership (Entity) section and send the following: ²

- 1 A copy of the company's official formation or organizational document, such as the articles of incorporation, certificate of formation, a government issued business license, a partnership agreement, offering memorandum or trust instrument, as applicable.
- 2 Address verification (mail item within the last 90 days that lists the individual and the address provided) if address is not listed on ID.
- 3 Proof of beneficial ownership of the company evidencing those entities or individuals owning 25% or more, such as an operating agreement, partnership agreement, share registry, capitalization table, or Schedule K 1.
- 4 If any individual owns, or has the rights to own, 25% of more of the entity please complete the individual beneficial owners of entity beneficial owners section & provide the following for each beneficial owner:
 - a. A copy of valid government issued ID (passport/visa/driver's license).
 - b. Address verification (mail item within the last 90 days that lists the individual and the address provided) if address is not listed on ID.

STEP 4 CONFIRMATION, SIGNATURE & SUBMISSION

Note: For more guidance on completing the Beneficial Owner (Entity) Disclosure, please see Appendix A

BUSINESS ACTIVITY INFORMATION

Referred By:

Main Company Contact:

Email:

Telephone:

Nature of Business of the Company:

Purpose of the Account:

Please list any associations the company (or any of its beneficial owners or signers) have with previous or current accounts with BitCards:

Sources of assets / income:

Description of how the organization interacts with digital assets if applicable and how the account at BitCards will be used:

Where does your firm do business:

Anticipated types of assets deposited into account:

Anticipated monthly volume (in USD):

Anticipated trading patterns (e.g., deposit bitcoin, withdraw USD):

Anticipated monthly number of transactions (incoming):

Anticipated monthly number of transactions (outgoing):

ACCOUNT SIGNATORY AUTHORITY

SIGNATORY ONE

Full name:	
Title:	
Country Code & Phone Number:	SSN / ID #:
Email:	DOB:
Address:	Nationality:
City State & Zip code:	Specimen Signature:

SIGNATORY TWO

Full name:	
Title:	
Country Code & Phone Number:	SSN / ID #:
Email:	DOB:
Address:	Nationality:
City State & Zip code:	Specimen Signature:

SIGNATORY THREE

Full name:	
Title:	
Country Code & Phone Number:	SSN / ID #:
Email:	DOB:
Address:	Nationality:
City State & Zip code:	Specimen Signature:

SIGNATORY FOUR

Full name:	
Title:	
Country Code & Phone Number:	SSN / ID #:
Email:	DOB:
Address:	Nationality:
City State & Zip code:	Specimen Signature:

*The individuals listed above as signatories will have full access to and discretion over the account, including the right to instruct any disbursement(s) of funds and other assets.

BENEFICIAL OWNERS (INDIVIDUAL)

Please provide the following information for an individual(s), if any, who, directly or indirectly, through any contract arrangement, understanding, relationship, or otherwise owns, or has rights to own, 25% or more of the equity interests of the legal entity listed above.

FOR TRUSTS : please provide information for all settlors and trustees, as well as the certificate of trust or full trust documents via the secure upload link

BENEFICIAL OWNER ONE

Full name:

DOB:

TAX ID or SSN#:

Country Code &
Phone Number:

Address:

City:

State:

Zip Code:

% Beneficial Ownership:

Nationality:

BENEFICIAL OWNER TWO

Full name:

DOB:

TAX ID or SSN#:

Country Code &
Phone Number:

Address:

City:

State:

Zip Code:

% Beneficial Ownership:

Nationality:

BENEFICIAL OWNER THREE

Full name:

DOB:

TAX ID or SSN#:

Country Code &
Phone Number:

Address:

City:

State:

Zip Code:

% Beneficial Ownership:

Nationality:

BENEFICIAL OWNER FOUR

Full name:

DOB:

TAX ID or SSN#:

Country Code &
Phone Number:

Address:

City:

State:

Zip Code:

% Beneficial Ownership:

Nationality:

Special Instructions: To be completed by: (1) Applicants with an ownership structure containing entities owning $\geq 25\%$ of the company; (2) pooled investment funds should use this form to provide identification information for General Partners and/or Investment Managers

BENEFICIAL OWNERS (ENTITY) - IF APPLICABLE

Please provide identifying information for each entity beneficial owners of your company that owns, or has rights to own, 25% or more in the company of the fund's general partner and/or investment manager

ENTITY BENEFICIAL OWNER ONE

Full legal name of company name including any DBA names:

Company address:

City:

State:

ZIP Code:

Jurisdiction(s) of incorporation:

Date of Incorporation:

Country Code & Phone Number:

Federal Tax ID (TIN, EIN, VAT, etc.):

Please list the percentage of ownership this entity holds in the ultimate BitCards customer:

Please describe the products or services the company provides:

Please list jurisdiction(s) of business activity:

ENTITY BENEFICIAL OWNER TWO

Full legal name of company name including any DBA names:

Company address:

City:

State:

ZIP Code:

Jurisdiction(s) of incorporation:

Date of Incorporation:

Country Code & Phone Number:

Federal Tax ID (TIN, EIN, VAT, etc.):

Please list the percentage of ownership this entity holds in the ultimate BitCards customer:

Please describe the products or services the company provides:

Please list jurisdiction(s) of business activity:

ENTITY BENEFICIAL OWNER THREE

Full legal name of company name including any DBA names:

Company address:

City:

State:

ZIP Code:

Jurisdiction(s) of incorporation:

Date of Incorporation:

Country Code & Phone Number:

Federal Tax ID (TIN, EIN, VAT, etc.):

Please list the percentage of ownership this entity holds in the ultimate BitCards customer:

Please describe the products or services the company provides:

Please list jurisdiction(s) of business activity:

ENTITY BENEFICIAL OWNER FOUR

Full legal name of company name including any DBA names:

Company address:

City:

State:

ZIP Code:

Jurisdiction(s) of incorporation:

Date of Incorporation:

Country Code & Phone Number:

Federal Tax ID (TIN, EIN, VAT, etc.):

Please list the percentage of ownership this entity holds in the ultimate BitCards customer:

Please describe the products or services the company provides:

Please list jurisdiction(s) of business activity:

INDIVIDUAL BENEFICIAL OWNERS OF ENTITY BENEFICIAL OWNERS - IF APPLICABLE

Please provide identifying information for each individual beneficial owner of the entity beneficial owner that owns 25% or more in the company.

FOR TRUSTS: Please provide information for all settlors and trustees, as well as the certificate of trust or full trust documents via the secure upload link

BENEFICIAL OWNER ONE

Full name:

DOB:

TAX ID or SSN#:

Country Code &
Phone Number:

Address:

City:

State:

Zip Code:

% Beneficial Ownership:

Nationality:

BENEFICIAL OWNER TWO

Full name:

DOB:

TAX ID or SSN#:

Country Code &
Phone Number:

Address:

City:

State:

Zip Code:

% Beneficial Ownership:

Nationality:

BENEFICIAL OWNER THREE

Full name:

DOB:

TAX ID or SSN#:

Country Code &
Phone Number:

Address:

City:

State:

Zip Code:

% Beneficial Ownership:

Nationality:

BENEFICIAL OWNER FOUR

Full name:

DOB:

TAX ID or SSN#:

Country Code &
Phone Number:

Address:

City:

State:

Zip Code:

% Beneficial Ownership:

Nationality:

CONFIRMATION

Account Authorization and Account Holder Signature(s) Please read and sign below.

The undersigned ("Account Holder" or "you") hereby acknowledges that you have received, read and understood the BitCards terms for opening your BitCards Institutional Account. You agree to abide by the same as amended from time-to-time and further agree to abide by any additional terms and conditions governing your account, products and/or services offered by BitCards as you may apply for and/or utilize from time to time.

Account Holder shall not commence or undertake any transactions or activities which are not permissible under applicable law. BitCards is entitled to and shall rely upon the information provided in this Application to meet its regulatory obligations and internal compliance processes. It is understood that your account with BitCards will be opened on the basis of the representations made by you to BitCards. Account Holder acknowledges that BitCards may decline your application without providing any reason in which event no contractual relationship will arise between BitCards and Account Holder.

By signing this Application below, you represent that the information provided to BitCards is true, accurate and complete and you covenant to notify us immediately in the event of any materials changes or you become aware that any information provided is not true, accurate and complete.

SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE	
Name (Print):	Title:
Signature:	Date:

SUBMITTING YOUR APPLICATION

WARNING: Submitting your application via other electronic means may not be secure.

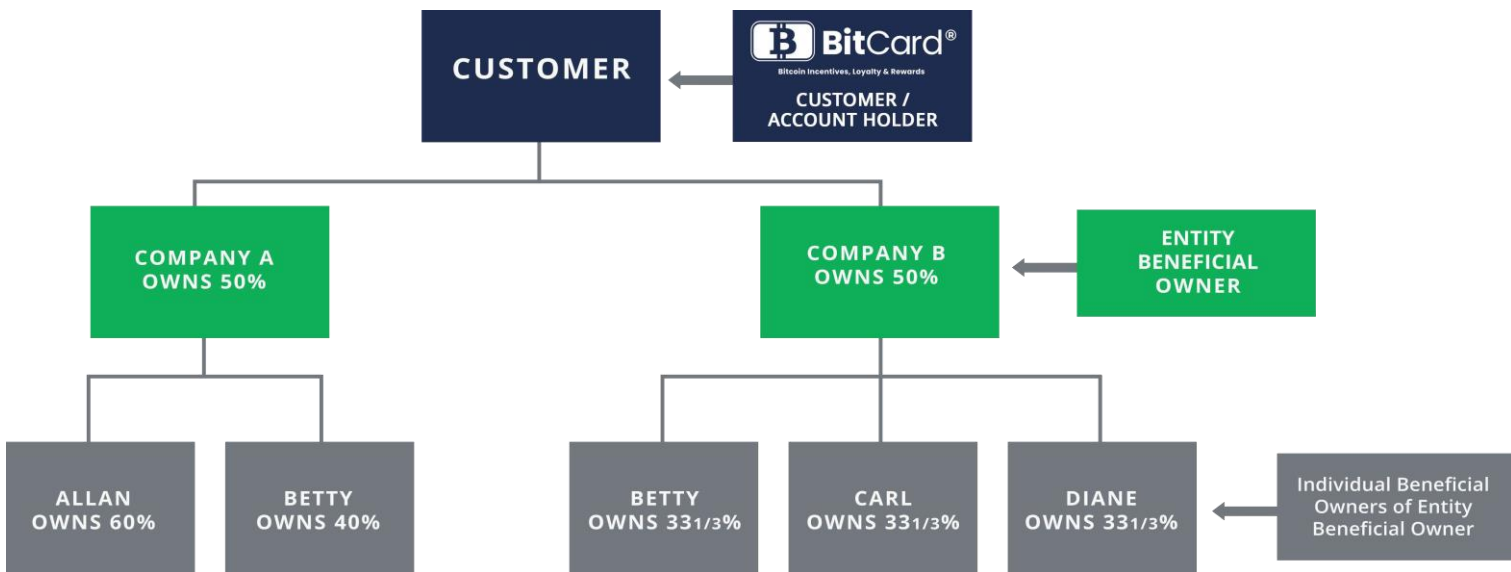
APPENDIX A

LEGAL ENTITY CUSTOMERS WITH COMPLEX OWNERSHIP STRUCTURES

COLLECTION OF BENEFICIAL OWNERSHIP INFORMATION FOR DIRECT AND INDIRECT OWNERS

Bitcards is required to obtain from entity customers the identities of individuals (beneficial owners), either directly or indirectly through multiple corporate structures, as illustrated in the following example. The following is provided as guidance to assist you in providing the required beneficial holder disclosure on this form.

Based on the diagram below, Allan is a beneficial owner of Customer because he owns indirectly 30 percent of its equity interests through his direct ownership of Company A. Betty is also a beneficial owner of Customer because she owns indirectly 20 percent of its equity interests through her direct ownership of Company A plus 16⅔ percent through Company B for a total of indirect ownership interest of 36⅔ percent. Neither Carl nor Diane is a beneficial owner because each owns indirectly only 16⅔ percent of Customer’s equity interests through their direct ownership of Company B.



“Beneficial Owners” are: (1) Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 percent or more of the shares of a corporation; and (2) An individual with significant responsibility for managing the legal entity customer (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer).

SOURCE OF FUNDS

THE ORIGINATION OF FUNDS USED TO OPERATE YOUR BUSINESS.

Please Enter your Information:

EXPLANATION OF BUSINESS PROCESS

BRIEFLY DESCRIBE YOUR BUSINESS FLOW OF FUNDS AND PURPOSE. FEEL FREE TO ATTACH A FLOW CHART IF NECESSARY.

Explanation of Business Process: