

Name of Institutional Account holder	
Location (Country)	

## Anti-Money Laundering Questionnaire

If you answer "no" to any question, additional information can be supplied at the end of the questionnaire.

I. <b>General AML Policies, Practices and Procedures:</b>	Yes	No
1. Does your company have internal policies and procedures to prevent money laundering, terrorist financing and sanctions/embargo violations?	Y <input type="checkbox"/>	N <input type="checkbox"/>
2. Does your company have a representative who is responsible for coordinating and monitoring the AML framework?	Y <input type="checkbox"/>	N <input type="checkbox"/>
3. Does your company have an internal control function or an independent third party that regularly reviews the policies and procedures mentioned in point 1?	Y <input type="checkbox"/>	N <input type="checkbox"/>
4. Does your company have procedures and policies that prohibit doing business with shell banks? (A shell bank is defined as a bank established in a country where it has no physical presence and is not affiliated with a regulated financial group.)	Y <input type="checkbox"/>	N <input type="checkbox"/>
5. Does your organization have procedures and policies that prohibit the opening and maintenance of anonymous and fictitious accounts?	Y <input type="checkbox"/>	N <input type="checkbox"/>
6. Does your company have a process for monitoring sanctions/embargo provisions?	Y <input type="checkbox"/>	N <input type="checkbox"/>
7. Does your company have policies that cover relationships with PEPs and their family members or known loved ones?	Y <input type="checkbox"/>	N <input type="checkbox"/>
8. Does your company have procedures for storing data that comply with applicable legislation?	Y <input type="checkbox"/>	N <input type="checkbox"/>
9. Are your company's AML policies and practices being applied in all domestic and foreign subsidiaries and affiliates?	Y <input type="checkbox"/>	N <input type="checkbox"/>
II. <b>Risk Assessment:</b>	Yes	No
10. Does your company have a risk-based assessment of its customer base and transactions?	Y <input type="checkbox"/>	N <input type="checkbox"/>
11. Has your company established an appropriate level of increased due diligence required for those categories of customers and transactions where your company has reason to believe that they pose an increased risk?	Y <input type="checkbox"/>	N <input type="checkbox"/>

III. <b>Know Your Customer and application of due diligence towards customers</b>	Yes	No
12. Has your company implemented processes to identify and verify the customers on whose behalf it holds or operates accounts or conducts transactions?	Y <input type="checkbox"/>	N <input type="checkbox"/>
13. Does your organization have a risk-based approach and procedures to review customers and related parties for their PEP characteristics or control by PEPs?	Y <input type="checkbox"/>	N <input type="checkbox"/>
14. Does your company have a process for reviewing and updating customer information?	Y <input type="checkbox"/>	N <input type="checkbox"/>
15. Does the application of due diligence requirements result in a risk categorisation/classification of the customer?	Y <input type="checkbox"/>	N <input type="checkbox"/>
IV. <b>Reportable Transactions and Prevention and Detection of Transactions involving illegally acquired funds:</b>	Yes	No
16. Does your organization have policies or procedures for identifying and reporting suspicious transactions that need to be reported to regulators?	Y <input type="checkbox"/>	N <input type="checkbox"/>
17. If reporting cash transactions is mandatory, has your company established procedures to identify such transactions?	Y <input type="checkbox"/>	N <input type="checkbox"/>
18. Does your company check customers and transactions against lists of persons, companies and countries published by the government or competent regulatory authority (e.g. sanctions lists)?	Y <input type="checkbox"/>	N <input type="checkbox"/>
19. Does your organization have policies to ensure that it only works with correspondent banks that have the necessary licenses?	Y <input type="checkbox"/>	N <input type="checkbox"/>
V. <b>Transaction Monitoring:</b>	Yes	No
20. Does your organization have a process for monitoring unusual, complex, and potentially suspicious transactions?	Y <input type="checkbox"/>	N <input type="checkbox"/>

VI. AML Training		Yes	No
21. Does your company provide AML training to relevant employees that includes:	Y <input type="checkbox"/>	N <input type="checkbox"/>	
<ul style="list-style-type: none"> <li>• Identification and reporting of transactions that must be reported to government authorities.</li> <li>• Examples of different forms of money laundering involving the FI's products and services.</li> <li>• Internal policies to prevent money laundering.</li> </ul>			
22. Does your company keep records of its training, including attendance lists and relevant training materials?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
23. Does your organization communicate new AML laws or changes to existing policies or practices related to AML to relevant employees?	Y <input type="checkbox"/>	N <input type="checkbox"/>	
VII. Delegation		Yes	No
24. Does your company employ third parties to carry out some of your own functions? If yes, please explain further.	Y <input type="checkbox"/>	N <input type="checkbox"/>	
25. If the answer to question 24 is yes, is it contractually ensured with the third party that the third party in turn fulfils all necessary AML obligations? .	Y <input type="checkbox"/>	N <input type="checkbox"/>	

Space for additional information:

(Please indicate which question the information is referring to.)

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Name:
Function:
Signature:
Date: