



QUESTIONNAIRE

ANTI MONEY LAUNDERING - KYC

A. Corporate Information and Ownership Structure	
1. Full Legal Name of Financial Institution	
2. Registered Office/Head Office Address (Please do not use a P.O. Box address)	
3. License Number, Year, Country, Issuing Authority and Legal Form (Please provide an official copy of license)	
4. Main type of activity Number of Branches Number of employees	
5. Is the F.I., part of a Group or the Parent company? Does the F.I. have any branch, subsidiary or affiliate operating under offshore banking license? If Yes, please indicate accordingly	YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
6. List of controlling shareholders with a stake of ≥5% of the total share capital of the F.I.	
7. List of ultimate beneficial owners of the F.I. controlling directly or indirectly ≥5% over the voting rights of the F.I.	
8. Do any of the F.I. controlling owners or senior management team currently hold or have held important public positions (PEP)? If Yes, please provide details	YES <input type="checkbox"/> NO <input type="checkbox"/>
B. Regulatory Authorities and Audit Controls	
1. Name of the F.I.'s Regulatory Authority & website address	



QUESTIONNAIRE

ANTI MONEY LAUNDERING - KYC

2.	Name of the F.I.'s AML/CFT Authority & website address	
3.	<p>Has the F.I. received any penalty, within the past 5 years, deriving from AML/CFT deficiencies and deviations or internal fraud incident?</p> <p>If Yes, please provide details on the case, competent amendments and/or procedural adjustments (if required, please attach a separate document with details)</p>	YES <input type="checkbox"/> NO <input type="checkbox"/>
4.	<p>Does the F.I. have the obligation to submit an AML/CFT report to the Regulatory Authority on an annual basis, at least, either directly or as part of an Annual Compliance Report?</p> <p>If Yes, is this report validated by the Audit Committee and/or the BoD of the F.I. before the submission to Regulatory Authority?</p>	YES <input type="checkbox"/> NO <input type="checkbox"/>
5.	Does the F.I. submit Suspicious Activity Reports to the local AML/CFT Authority?	YES <input type="checkbox"/> NO <input type="checkbox"/>
6.	Date of last performed Internal Audit	
7.	<p>Are there any major findings derived from the last performed audits (internal/external) in relation to AML/CFT function?</p> <p>If Yes, please describe the corrective actions undertaken</p>	YES <input type="checkbox"/> NO <input type="checkbox"/>
C. Sanctions' Policy and System Monitoring		
1.	Define sanctions programs and lists issued by International and/or Local Authorities to which the F.I. adheres to	
2.	<p>Does the F.I. or any of its subsidiaries or affiliates have operations in a sanctioned jurisdiction according to EU, UN and OFAC sanctions programs or local legislation?</p> <p>If Yes, please state the relevant jurisdiction</p>	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.	<p>Does the F.I. provide products or services to individuals or entities located in sanctioned jurisdictions according to EU, UN and OFAC regulations and /or local legislation?</p> <p>If Yes, please describe the procedures that need to be followed</p>	YES <input type="checkbox"/> NO <input type="checkbox"/>
4.	<p>Does the F.I. screen its customer database against EU, UN, OFAC and local lists? Does the F.I. screen customers, individuals and legal entities, against EU, UN, OFAC and local lists upon account opening?</p> <p>Is the customer screening process automated or manual?</p>	YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>
5.	Does the F.I. screen domestic and interantional wire	YES <input type="checkbox"/> NO <input type="checkbox"/>



QUESTIONNAIRE

ANTI MONEY LAUNDERING - KYC

	transfers against EU, UN, OFAC and local lists?	
6.	Please indicate the operating list in use (i.e. Worldcheck, Dow Jones, etc)	
D. KYC and Due Dilligence Procedures		
1.	List the risk categories applied to customers and the criteria for high risk classification	
2.	Describe frequency of re-assessment for each risk category, manner of performance (automated/manual)	
3.	Does the F.I. identify PEPs and monitor their transactions?	
4.	Please state the definition of beneficial owner applied to the F.I. Does the F.I. require identification for the beneficial owner (s) of all legal entities (corporate clients)?	
5.	Does the F.I. maintain offshore companies and/or bearer shares corporations amongst its clientele? If Yes, please describe additional measures of applicable enhanced due diligence.	YES <input type="checkbox"/> NO <input type="checkbox"/>
6.	Does the F.I. request certification and perform due diligence for walk-in customers over a certain threshold (i.e. €10.000,00€ or equivalent)? If Yes, please define threshold and describe requirements.	YES <input type="checkbox"/> NO <input type="checkbox"/>
7.	Does the F.I. have a policy for accepting new clients without physical presence? If applicable, does the F.I. apply enhanced due diligence for this type of clients upon account opening / identification process? (i.e. via internet/phone banking)	
8.	Does the F.I. maintain clients with business operations in sanctioned, non-cooperative or high risk jurisdictions, as per FATF lists? If Yes, specify jurisdictions and describe type of business and applicable AML policy	YES <input type="checkbox"/> NO <input type="checkbox"/>
9.	Does the F.I. have a policy that prohibits: - The opening and maintenance of anonymous accounts - Payable through accounts	YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>



QUESTIONNAIRE

ANTI MONEY LAUNDERING - KYC

<p>10. Does the F.I. provide services to gambling companies?</p> <p>If yes, does the F.I. ensure that only accepts licensed gambling companies? (Please briefly elaborate on the policy and procedures followed).</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
---	---

E. Correspondent Banking Due Diligence and Business Activity

<p>1. Does the F.I. have Correspondent Banking counterparties in sanctioned jurisdictions as per EU, UN, OFAC sanctions programs and/or local legislation or in non-cooperative or high-risk jurisdictions as defined by FATF?</p> <p>If Yes, please list them.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
---	---

<p>2. Does the F.I. have a policy that prohibits nested accounts?</p>	
---	--

<p>3. Does the F.I. offer clearing services for other Financial Institutions?</p> <p>If Yes, please specify the currencies in which the third party correspondents hold accounts in your books and the countries they operate in by filling in the table below. Example:</p> <table border="1" data-bbox="248 1240 831 1480"> <thead> <tr> <th>Currency</th> <th>Correspondent's Country</th> </tr> </thead> <tbody> <tr> <td>(EUR)</td> <td>(France, Spain, etc)</td> </tr> <tr> <td>(USD)</td> <td>(US, GB, etc)</td> </tr> <tr> <td></td> <td></td> </tr> </tbody> </table>	Currency	Correspondent's Country	(EUR)	(France, Spain, etc)	(USD)	(US, GB, etc)			<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
Currency	Correspondent's Country								
(EUR)	(France, Spain, etc)								
(USD)	(US, GB, etc)								

<p>4. Does the F.I. provide services to Money Service Businesses (MSBs)?</p> <p>If YES, please confirm that these MSBs are regulated businesses, which do not operate in sanctioned jurisdictions.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
--	---

<p>5. Does the F.I. provide clearing services to other F.I. and /or MSBs through its correspondent account with Alpha Bank A.E.?</p> <p>If Yes, please describe the AML/CFT policy and due diligence measures applied to both cases.</p>	<p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>
--	---

<p>6. In addition to the above, please define the anticipated activity on an annual basis and how this account traffic</p>	
--	--



QUESTIONNAIRE

ANTI MONEY LAUNDERING - KYC

	will be executed (i.e inbound/outbound MT103, MT202/202COV swift messages).	
7.	Is the F.I. FATCA compliant? If Yes, please provide status and G.I.I.N.	YES <input type="checkbox"/> NO <input type="checkbox"/>
8.	Does the F.I. hold a Patriot Act Certification? If Yes, please provide an official copy.	YES <input type="checkbox"/> NO <input type="checkbox"/>
F. Training		
1.	Does the F.I. have an established employee training program on Anti-Money Laundering and Terrorist Financing procedures?	YES <input type="checkbox"/> NO <input type="checkbox"/>
2.	Please provide details of the training program, including: frequency, targeted staff and delivery method.	
G. AML/CFT Function and Contact details		
1.	Please state the number of staff in the Compliance and/or AML/CFT Division(s) and the number of dedicated AML/CFT Officers.	
2.	Does the F.I. employ third parties or vendors to carry out any Compliance or AML/CFT functions (AML/CFT system monitoring included)? If Yes, please provide information on the third party or vendor with reference to country/year of incorporation and Regulatory Authority.	YES <input type="checkbox"/> NO <input type="checkbox"/>
3.	In relation to the above question, does the F.I. provide appropriate AML/CFT training to and oversight of such third party or vendor?	



QUESTIONNAIRE

ANTI MONEY LAUNDERING - KYC

Group Compliance Officer (if applicable, please attach a CV) Name Exact Title E-mail Telephone No	
Head of Compliance of the F.I. (if different) Name Exact Title E-mail Telephone No	
Head of AML/CFT of the F.I. Name Exact Title E-mail Telephone No	
AML/CFT Contact Officer(s) Name Title/Capacity E-mail Telephone No	

Comments of the F.I.

To No.	Comment

Acknowledgment and Validation of Authorised Signatory

I confirm, to the best of my knowledge, that the above information is accurate and reflects the AML/CFT policies of the Institution.

Name [Click here to enter text.](#)

Title [Click here to enter text.](#)

Date [Click here to enter text.](#)

Signature