

# AML & KYC QUESTIONNAIRE FOR FINANCIAL INSTITUTIONS

SECTION 1 - GENERAL INFORMATION		
1.1. Full name of institution		
1.2. Legal form		
1.3. Legal address		
1.4. Phone and fax numbers		
1.5. Official website		
1.6. Swift code		
<b>1.7.</b> Information of license (type, number, date of issue and name of issuing authority) <i>Please provide copy</i>		
<b>1.8.</b> Information of state registration (number, date of issue, name of registration authority, place of state registration)		
1.9. Number of branches	Domestic:	Foreign:
1.10. Number of employees		
1.11. Taxpayer Identification Number:		
1.12. FATCA Status for Non US FFI:  • GIIN:  • Model IGA:		
1.13. Main business activities of your institution		
SECTION 2 - OWNERSHIP AND MANAGEMENT INFORMATION		
2.1. Is your institution publicy owned?		
2.2. Is your institution listed on any stock exchange?		
<b>2.3.</b> Please list full names and percentages of shareholders		
2.4. Please list the names and positions of the Board of Directors (BOD) members		
<b>2.5.</b> Are there any Politically Exposed Persons (PEPs) associated with your institution, as shareholders, members of the board or senior managers of your institution?		
If "Yes", please mention full names and details of PEPs involved.		
<b>2.6.</b> Does your institution have an individual(s) who would be considered as an ultimate beneficial owner(s)?		
If "Yes", please specify name, percentage of ownership (%), title (position), date of birth, country of domicile and other position (if applicable).		

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SECTION 3 - ORGANIZATIONAL STRUCTURE	
<b>3.1.</b> Has your institution appointed a person responsible for anti-money laundering arrangements?	
If "Yes", please give the name, title, address and e-mail of AML officer in your institution for future references.	
<b>3.2.</b> Please give details about organizational chart of the compliance department	
(number of employee, average years of experience, etc.)	
SECTION 4 - LEGISLATION	
<b>4.1.</b> Name of financial/banking regulatory and supervisory authority in your country (please specify the website)	
<b>4.2.</b> Name of your Financial Intelligence Unit (please specify the website)	
<b>4.3.</b> Has your country of registration/incorporation established laws and regulations to combat Money Laundering and Terrorism Financing?	
If "Yes", please list the name/references of your country`s relevant laws and enforcement date of these laws and its subsequent amendments.	
<b>4.4.</b> Is your institution subject to such laws?	
<b>4.5.</b> Is your institution compliant with your local Anti Money Laundering and Counter Terrorist Financing laws?	
If "No", please give details.	
<b>4.6.</b> In the past five years, has any action been brought against your institution resulting from violations of laws or regulations concerning money laundering or terrorist financing?	
If "Ves" please provide us with information concerning this	

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 $action \ and \ the \ result \ of \ this \ action.$ 



## SECTION 5 - GENERAL AML/KYC POLICIES, PROCEDURES AND CONTROLS

<b>5.1.</b> Does your institution have written AML/CFT policies and procedures outlining the specific processes that are in place to prevent, detect and report suspicious transactions?	
If"Yes", are yourinstitution's AML policies and practices being applied to headquarters, all branches and subsidiaries domestic as well as for all abroad?	
<b>5.2.</b> If your answer to the question above is "Yes", please give details about contents of these policies and practices.	
<b>5.3.</b> Is the AML compliance program approved by your institution's board or a senior committee?	
<b>5.4.</b> How frequently does your institution review or update AML policies and procedures?	
<b>5.5.</b> When did your institution lately revise or update the AML policies and procedures?	
<b>5.6.</b> Does your institution have a policy prohibiting accounts/relationships with shell banks?	
(a shell bank is defined as a bank incorporated In a jurisdiction in which it has no physical presence and which is unaffiliated with a regulated financial group)	
<b>5.7.</b> Does your institution have policies to reasonably ensure that they will not conduct transactions with or on behalf of shell banks through any of its accounts or products?	
<b>5.8.</b> Does your institution have policies covering relationships with Politically Exposed Persons (PEP's), their family and close associates?	
<b>5.9.</b> Does your institution have policies to reasonably ensure that it only operates with correspondent banks that possess licenses to operate in their foreign origin?	

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# 6.1. Describe your "Know Your Customer" policies (please provide information on account opening procedures for retail banking, corporate and correspondent accounts, including documentation requirements, identification of beneficial owners, verification of source of funds, recording documents and understanding the expected activity) 6.2. Describe your procedures for updating and reviewing customer information. 6.3. Does your institution open or maintain anonymous accounts or numbered accounts? 6.4. Does your institution require walk-in clients to provide identification documents before provision of services?

appropriate, update customer information relating to high risk client

**6.6.** Does your institution initiate/process transactions on behalf of non-clients (i.e. clients who conduct once—offtransactions)?

If "Yes", does your institution conduct identification and verification

information?

on these types of clients?

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<b>6.7.</b> Does your institution have any of the following client types:	Money Service businesses:	☐ Yes	□ No
If yes, please advise the number/ percentage of clients your institution maintains accounts for and what enhanced due diligence	Precious metals (Inc. diamonds)	:□ Yes	□ No
	Casinos/ gambling:	☐ Yes	□ No
, , , , , , ,	Charities:	☐ Yes	□ No
undertake enhanced due diligence on? Please detail	Virtual currency operators:	☐ Yes	□ No
	Shell banks:	☐ Yes	□ No
	PEPs:	☐ Yes	□ No
	Bearer share entities:	☐ Yes	□ No
	Non-resident customers:	☐ Yes	□ No
	Embassies:	☐ Yes	□ No
	Arms, defense and military:	☐ Yes	□ No
	Marijuana:	☐ Yes	□ No
	Adult entertainment:	☐ Yes	□ No
<b>6.8.</b> Does your Financial Institution (including any branches and subsidiaries) have business activities in jurisdictions which are subject to US, EU, UN, and UKHMT Sanctions? (i.e. Iran, Cuba, Syria, North Korea, Crimea etc.)			
<b>6.9.</b> Does your Financial Institution have bank customers that			
operate in countries subject to US, EU, UN, and UKHMT Sanctions? (i.e. Iran, Cuba, Syria, North Korea, Crimea etc.)			
<b>6.10.</b> Does the institution have any clients in offshore jurisdictions?			
If "yes", please provide a list of jurisdictions below. For those clients based in offshore jurisdictions please confirm what tax measures are in place in order to comply with FATCA.			
SECTION 7 – TRANSACTION MONITORING AND SANCTION SCR	EENING		
<b>7.1.</b> Does your institution have a monitoring program for suspicious or unusual activity?			
<b>a.</b> If yes, is the transaction system automated or manual?			
<b>b.</b> If automated, is the system purchased from a vendor or developed by the client and describe the parameters and thresholds of the system?			
<b>c.</b> If manual, describe in detail the process including what triggers a review, what reports are used, etc.			
<b>7.2.</b> Does your institution have a transaction monitoring system to automatically detect sanctioned transactions?			
If "Yes", please describe name of system (software) and name of the applicable sanctions list (OFAC, EU, UN etc.) within your institution.			

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# SECTION 8 - REPORTABLE TRANSACTIONS, PREVENTION AND DETECTION OF TRANSACTIONS WITH ILLEGALLY OBTAINED FUNDS

<b>8.1.</b> Does your institution have policies or procedures for the identification and reporting of transactions that are required to the authorities?	
<b>8.2.</b> Describe your regulatory reporting requirements for suspicious account activity and for large cash transactions.	
<b>8.3.</b> Within the past year, has your institution reported any attempts at money laundering for financing of terrorism to the authorities?	
<b>8.4.</b> Does your institution have a policy of protecting employees if they, in good faith, report any suspicious activity?	

### **SECTION 9 – RISK ASSESSMENT**

<b>9.1.</b> Does your institution have a risk-based assessment of its customer base and their transactions?	
If "Yes", please describe your institution's risk assessment process.	
<b>9.2.</b> Does your institution determine the appropriate level of enhanced due diligence necessary for those categories of customers and transactions that the FI has reason to believe pose a heightened risk of illicit activities at or through the FI?	
<b>9.3.</b> What types of customers/products does your institution consider to be high risk?	
<b>9.4.</b> Are there customers that are prohibited from doing business with the institution based on risk assessment? If so, which ones?	
<b>9.5.</b> Kindly identify those high risk locations where the institution conducts business?	
9.6. What is your volume of high-risk clients?	

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SECTION 10 - AML EXAMINATIONS AND AUDIT	
<b>10.1.</b> Does your institution have an internal audit	
function that assesses AML policies and practices on a regular basis?	
If "Yes", what was the date of the last internal audit? What was the finding?	
<b>10.2.</b> Are your institution's AML/KYC policies and procedures regularly checked by external auditors?	
If "Yes", what was the date of the last external audit? What was the findings?	
SECTION 11 - TRAINING	
<b>11.1.</b> Is your institution required to provide AML training to relevant employees?	
If "Yes", please describe your training program.	
<b>11.2.</b> Does your institution retain records of its training sessions including attendance records and relevant training materials used?	
<b>11.3.</b> Does your institution communicate new AML related laws or changes to existing AML related policies or practices to relevant employees?	
<b>11.4.</b> Does your institution employ third parties to carry out some of the functions of the FI?	
If "Yes", does your institution provide AML training to relevant third parties that includes:	
<ul> <li>Identification and reporting of transactions that must be reported to government authorities.</li> </ul>	
<ul> <li>Examples of different forms of money laundering involving the FI's products and services.</li> </ul>	
<ul> <li>Internal policies to prevent money laundering.</li> </ul>	
SECTION 12 – PAYABLE THROUGH ACCOUNT	
<b>12.1.</b> Does your institution allow direct use of your	
correspondent accounts by your customers to transact business on their behalf?	
I.e. Do you allow payable-through accounts?	
If "Yes", provide details of due diligence requirements that your institution has implemented with respect to customers who have	
direct access to the accounts of the Bank correspondent.	

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Space for additional information: (please indicate which question the information is referring to)
We confirm that:  a) We will ensure that full due diligence, compliant with FATF recommendations, is performed on all our customers who are party to any transactions involving Aktif Yatırım Bankası A.Ş. or upon whose behalf payments are to be routed through accounts (if any) maintained with you.  b) We will not allow a third party direct access to the account without prior notification to Aktif Yatırım Bankası A.Ş.  c) We do not offer our products or services to a shell bank.  I certify that I am authorized to complete this questionnaire and that to the best of my knowledge the information given is complete and correct.
Name: Title: Date: Signature:

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