

## Anti-Money Laundering and Counter Terrorist Financing Questionnaire

<b>1. Correspondent information</b>		
1.1. Full name of the Financial Institution:		
1.2 Trading name of the Financial Institution		
1.3. Registered address:		
1.4 Telephone and web address:		
1.5. Country of incorporation:		
1.6. Legal Form (for example Public Limited Company, Joint Stock Company, Partnership, etc.):		
1.7.a. Company Registration no:		
1.7.b. Banking License no. and issuing authority		
1.8. Principal place of business:		
1.9.a. Principal banking activities:		
1.9.b. Principal banking services offered to your customers (i.e. private banking; corporate banking; trade finance; investment banking; retail banking):		
1.10. Purpose/Background of the business relationship with Yapı ve Kredi Bankası A.Ş.:		
1.11. Key contact person: Name: Title: Address: Telephone: e-mail:		
1.12. Legal Representative (Name of the person that has the power of attorney/authority /signature for legal decisions) and their role:		
<b>2. Ownership, management and regulatory information</b>		
Question	Yes	No
Is your financial institution a:		
2.1.a. private company?	<input type="checkbox"/>	<input type="checkbox"/>
2.1.b government-owned company (either directly or indirectly)?	<input type="checkbox"/>	<input type="checkbox"/>
2.2. Has either the Legal or Trading Name of the Financial Institution changed in the last 12 months? If yes, please provide the previous Legal and / or Trading Name(s) used	<input type="checkbox"/>	<input type="checkbox"/>
2.3 Is your financial institution listed on any stock exchange?	<input type="checkbox"/>	<input type="checkbox"/>
2.4. If yes, on which stock exchange are the shares listed and please provide		

the ticker symbol?			
2.5. Please provide the names of all direct shareholders and any ultimate beneficial owners who either, own, control (either directly or indirectly) or have voting rights exceeding 10% of the financial institution:			
Name	% of Ownership	Nationality/Country of Incorporation	Date of Birth/Incorporation
2.6. Have there been any significant changes in beneficial ownership during the last 12 months? If yes, please provide details:		<input type="checkbox"/>	<input type="checkbox"/>
2.7 Please provide names of the current Board of Directors (i.e. those with executives with day to day control):			
2.7.a. Have there been any significant changes within your Board of Directors during the last 12 months? If yes, please provide details:		<input type="checkbox"/>	<input type="checkbox"/>
2.8. Is your financial institution part of a Group? If yes, which Group?		<input type="checkbox"/>	<input type="checkbox"/>
2.9. Please provide the current names of the Senior Management.			
2.10.a. Name of your Supervisory Authority			
2.10.b. Name of your Financial Intelligence Unit (FIU):			
2.11. Are you subject to an external audit?			
2.11.a. If yes, please provide the name of your external auditors and the date of the last audit. (An external auditor does not mean the Central Bank or Government Body)			
2.12. Does the Financial Institution have an internal audit function or other independent third party review to assess financial crime compliance policies and practices on a regular basis?			
<b>3. Country Legislation</b>			
Question		<b>Yes</b>	<b>No</b>
3.1. Has your country of registration established laws designed to combat money laundering and terrorist financing?		<input type="checkbox"/>	<input type="checkbox"/>
3.2. If yes, please list the name of your country's relevant laws (Name, Date and No. of the law decree, regulation, etc.)			
3.3. Is your bank compliant with your national AML/CTF laws? If not, please describe why not and which aspects you do not comply with:			
<b>4. Bank's Internal Policies and Procedures</b>			
Question		<b>Yes</b>	<b>No</b>
4.1.a. Has your bank established internal written policies and procedures to ensure compliance with the obligations under the existing national legislation on		<input type="checkbox"/>	<input type="checkbox"/>

prevention of money laundering, counter terrorist financing and any applicable financial sanctions?		
4.1.b Have these policies and procedures been reviewed in last 12 months?	<input type="checkbox"/>	<input type="checkbox"/>
4.1.c. Do your AML/CTF and financial sanction policies and procedures apply to all branches and subsidiaries both in the home country and outside it?	<input type="checkbox"/>	<input type="checkbox"/>
4.2. Does your AML, CTF and financial sanctions Compliance program require approval of your Board or a senior management Board committee?	<input type="checkbox"/>	<input type="checkbox"/>
4.3. Does your financial institution periodically review those policies and procedures? 4.3.a. If yes, how often are the policies and procedures reviewed?	<input type="checkbox"/>	<input type="checkbox"/>
4.4. Do your AML/CTF and financial sanction policies and procedures require the application of the measures listed below?		
Do they require you to comply with customer due diligence measures when ... 4.4.1.a. ... establishing a business relationship?	<input type="checkbox"/>	<input type="checkbox"/>
4.4.1.b. ... carrying out occasional transactions of significant amount? (if so, please indicate the amount) <input type="checkbox"/> above the applicable designated threshold <input type="checkbox"/> (USD/EUR 15,000) or equivalent	<input type="checkbox"/>	<input type="checkbox"/>
4.4.1.c ... when there is a suspicion of money laundering or terrorist financing	<input type="checkbox"/>	<input type="checkbox"/>
4.4.1.d ... where the FI has doubts about the veracity or adequacy of previously obtained customer identification data	<input type="checkbox"/>	<input type="checkbox"/>
Do they require you to include in the customer due diligence the following:		
4.4.2.a. Identify the customer and verifying the customer's identity on the basis of documents, data or information obtained from a reliable and independent source?	<input type="checkbox"/>	<input type="checkbox"/>
4.4.2.b. Identify the beneficial owner and verify their identity?	<input type="checkbox"/>	<input type="checkbox"/>
4.4.2.c. Obtain information on the purpose and intended nature of the business relationship?	<input type="checkbox"/>	<input type="checkbox"/>
4.4.2.d. Conduct ongoing monitoring of the business relationship?	<input type="checkbox"/>	<input type="checkbox"/>
4.4.2.e Apply appropriate levels of enhanced due diligence for; <input type="checkbox"/> those customers and transactions that it has reason to believe pose a heightened risk of financial crime (e.g. Politically Exposed Persons (PEPs)? <input type="checkbox"/> cross-border correspondent banking relationships? <input type="checkbox"/> customer that has been not physically present for identification purposes?	<input type="checkbox"/>	<input type="checkbox"/>
4.4.3. Do your policies and procedures prohibit you from keeping anonymous accounts or anonymous passbooks?	<input type="checkbox"/>	<input type="checkbox"/>
4.4.3.a. If not, is it intended that these types of accounts can use the clearing services provided by our institution?	<input type="checkbox"/>	<input type="checkbox"/>

4.4.4. Do your procedures require you to perform a risk assessment of your customers and transactions and perform enhanced due diligence where the risks are increased? 4.4.4.a. If so, please provide a description of your enhanced due diligence measures:	<input type="checkbox"/>	<input type="checkbox"/>
4.4.5.a. Do your procedures require you to conduct enhanced due diligence measures for transactions or business relationships with “politically exposed persons”? 4.4.5.b. If so, please describe your enhanced due diligence measures 4.4.5.c. Do you subject Domestic PEPs to these measures?	<input type="checkbox"/>	<input type="checkbox"/>
Do your policies and procedures require you to have enhanced due diligence measures in the following:		
4.4.6.a. When the customer has been not physically present for identification purposes?	<input type="checkbox"/>	<input type="checkbox"/>
4.4.6.b. In respect of cross-border correspondent banking relationships and other similar relationships with respondent institutions from third countries?	<input type="checkbox"/>	<input type="checkbox"/>
4.4.6.c. Does your financial institution assess its customers’ that are Financial Institutions AML/CTF policies and practices?	<input type="checkbox"/>	<input type="checkbox"/>
4.4.7.a. Does your financial institution have a transaction monitoring system to enable you to detect suspicious payments or transactions (excluding sanctions)? 4.4.7.b. If so, which system/provider do you use? 4.4.7.c. Does your financial institution have an established method of reporting suspicious activities and/or transactions to the appropriate authorities?	<input type="checkbox"/>	<input type="checkbox"/>
4.4.8.a. Does your financial institution have a screening process to search your client database against government published lists of prohibited/sanctioned parties?	<input type="checkbox"/>	<input type="checkbox"/>
4.4.8.b. Does your financial institution screen payments/transactions for government published lists of prohibited/sanctioned parties?  If yes, which system(s)/provider(s) do you use:  Which lists do you screen against (e.g. EU, UN, OFAC etc.)? <input type="checkbox"/> EU <input type="checkbox"/> US <input type="checkbox"/> UN <input type="checkbox"/> UK <input type="checkbox"/> Other: (specify) <input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>
4.4.8.c. Does the Financial Institution screen the following payments/transactions against applicable sanctions lists • domestic payment transactions • international payment transactions • documentary business • securities transactions?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
4.4.8d. Does your financial institution screen customers for government published lists of prohibited/sanctioned parties?  If yes, which system(s)/provider(s) do you use:	<input type="checkbox"/>	<input type="checkbox"/>

Which lists do you screen against (e.g. EU, UN, OFAC etc.)? <input type="checkbox"/> EU <input type="checkbox"/> US <input type="checkbox"/> UN <input type="checkbox"/> UK <input type="checkbox"/> Other: (specify) <input type="checkbox"/> None		
4.4.8.e. If yes, what information is subject to screening: <input type="checkbox"/> new customers <input type="checkbox"/> existing customers <input type="checkbox"/> connected parties <input type="checkbox"/> all parties involved in a transactions		
4.4.8.f. Please specify, how often is the screening performed? <input type="checkbox"/> at on-boarding <input type="checkbox"/> on an ongoing basis with a following frequency: <input type="checkbox"/> daily <input type="checkbox"/> weekly <input type="checkbox"/> monthly		
4.4.9. Do your policies and procedures require you to keep customer identification account files, business correspondence and records for a specific period of time? 4.4.9.a. If yes, for how long?	<input type="checkbox"/>	<input type="checkbox"/>
4.5 Does the Financial Institution provide financial crime compliance training to relevant employees that includes: • identification and reporting of transactions that must be reported to government authorities. • examples of different forms of money laundering involving the FI's products and services. • internal policies to prevent money laundering • financial sanctions compliance?  If so, how frequently does this need to be refreshed?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
4.6.1 Do your policies and procedures permit relationships/services to “shell banks”?	<input type="checkbox"/>	<input type="checkbox"/>
4.6.2 Do your policies and procedures permit relationships/services with financial institutions who permit accounts to be used by shell Banks?	<input type="checkbox"/>	<input type="checkbox"/>
4.7.Does your financial institution allow direct use of the correspondent account by third parties (payable through accounts) to transact business on their own behalf?	<input type="checkbox"/>	<input type="checkbox"/>
4.8. Can you confirm that your financial institution has not been prosecuted or fined for failure to comply with anti-money laundering or financial sanction laws in the last 5 years? If not, please provide details	<input type="checkbox"/>	<input type="checkbox"/>
4.9. Does your financial institution provide correspondent banking services to other financial institutions (“downstream correspondent clearing services”) and will they use the clearing services provided by our institution?	<input type="checkbox"/>	<input type="checkbox"/>
4.9.a. In case the answer to question 4.11 is “YES”, please provide the name and countries of these		

downstream banks:		
4.10. Does your financial institution provide services to unregulated Money Service Bureaus (MSBs) or Virtual Currency Providers?	<input type="checkbox"/>	<input type="checkbox"/>
4.11. If so, is it intended that these types of entities can use the clearing services provided by our institution?	<input type="checkbox"/>	<input type="checkbox"/>
4.12. Does the Financial Institution adhere to the Wolfsberg Transparency Principles and the appropriate usage of the SWIFT MT 202/202COV and MT 205/205COV message formats?	<input type="checkbox"/>	<input type="checkbox"/>
<b>5. Products; Market Segments &amp; Transaction Volume</b>		
Question	<b>Yes</b>	<b>No</b>
5.1 Does the Financial Institution maintain any subsidiaries or branches in one of the following countries?  <ul style="list-style-type: none"> <li>• Iran</li> <li>• Syria</li> <li>• Cuba</li> <li>• (North) Sudan</li> <li>• South Sudan</li> <li>• Crimea</li> <li>• Sevastopol Region</li> <li>• North Korea</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
5.2 Does the Financial Institution or any of its majority owned or controlled affiliate support or facilitate any activity on behalf of customers with or involving a country that is subject to comprehensive sanctions?  <ul style="list-style-type: none"> <li>• Iran</li> <li>• Syria</li> <li>• Cuba</li> <li>• (North) Sudan</li> <li>• South Sudan</li> <li>• Crimea</li> <li>• Sevastopol Region</li> <li>• North Korea</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
5.2.1 If yes, will any of the majority owned or controlled affiliate have the ability to use the Yapı ve Kredi Bankası A.Ş. account to process transactions?	<input type="checkbox"/>	<input type="checkbox"/>
5.3 Does the Financial Institution provide their financial products or services to any of the following high risk market segments listed below?	<input type="checkbox"/>	<input type="checkbox"/>
5.3.1.If yes, please specify:  <input type="checkbox"/> Money Service Businesses / Payment Services Providers <input type="checkbox"/> Embassies and/or Consulates <input type="checkbox"/> Casinos <input type="checkbox"/> Gambling or online gaming <input type="checkbox"/> Virtual Currencies <input type="checkbox"/> Offshore Corporates		

<input type="checkbox"/> Pooled trust accounts <input type="checkbox"/> Non-operating companies <input type="checkbox"/> Arms/Defense/Military industry <input type="checkbox"/> Non-account customers		
5.4. Does the Financial Institution offer downstream correspondent clearing business or other correspondent clearing services to other Financial Institution?	<input type="checkbox"/>	<input type="checkbox"/>
5.5. Does the Financial Institution offer payable-through accounts to any of its customers?	<input type="checkbox"/>	<input type="checkbox"/>
5.6. Does the Financial Institution intend to use the account held with Yapı ve Kredi Bankası A.Ş. as a payable-through accounts?	<input type="checkbox"/>	<input type="checkbox"/>

**Financial Institution Anti-Money Laundering/Compliance Officer**

I confirm that, to the best of my knowledge, the above information is correct, accurate and reflective of my company's money laundering, combating terrorist financing and know your customer policies, procedures and programs.

I confirm that this questionnaire may be shared with other Yapı ve Kredi Bankası Group Companies for due diligence purposes only.

I confirm that, on demand, my company will provide you with the data obtained pursuant to the fulfillment of the customer due diligence measures.

Name: ..... Title: .....

Signature: ..... Date: .....