



IsDB Group¹ AML & KYC Questionnaire (Non-Financial Institutions)

The following questions are intended to assist the Members of the Islamic Development Bank Group (*hereinafter referred to as "IDBG"*) in their respective customers due diligence. It seeks to collate and document information on the Anti-Money Laundering & Financing of Terrorism Policies & Procedures implemented by their respective customers, professional intermediaries, correspondent banks, consultants and non-governmental organizations.

1. General Information

1.1 General Entity Information

Name of the institution	
Country of incorporation or registration	
Registration / License Number	
Legal Form (for example Public Limited Company, Joint Stock Company, Partnership, limited or unlimited liability etc.)	
Address of Head Office	
Website addresses	
Main activities	
Telephone	
Fax	
Name	
Email Address	

1.2 Ownership Structure

1.2.1 What is the authorized and issued share capital of your institution?

Authorised Capital:

Issued Share Capital:

1.2.2 Name of persons or any legal entity who owns or control more than 10% of the shares of you institution.

1.2.3 Are the shares of the institution divided in to several classes? ☐ Yes ☐ No ☐ NA

If yes, list the classes of shares (whether ordinary, preferred, bearer or registered shares):

¹ Each of the Islamic Development Bank (IsDB), Islamic Corporation for the Insurance of Investment and Export Credit (ICIEC), Islamic Corporation for the Development of the Private Sector (ICD), and International Islamic Trade Finance Corporation (ITFC); is a supra-national, inter-governmental self-regulated of international financial institutions established under its respective Articles of Agreements, having their headquarters in Jeddah, Kingdom of Saudi Arabia (all together are refer to as IsDB Group).

1.2.4 Is your institution publicly traded? ☐ Yes ☐ No ☐ NA

If your answer is “Yes,” please list Exchange & Symbol of your institution.

1.2.5 Does your Entity have branches or subsidiaries? If so, does this questionnaire apply also to your Branches/subsidiaries?

1.2.6 Have there been any significant changes in ownership (exceeding 25%) over the last five years?

If yes, please provide details.

2. Anti-Money Laundering & Financing Terrorism Controls (AML/CFT)

I. General AML Policies, Practices and Procedures	YES	NO	N/A
1. Are there laws / regulations designed to prevent and deal with money laundering and terrorist financing in the country of incorporation of your company or institution? If yes, please list the names of the relevant laws:			
2. Has your institution developed written policies and procedures to prevent detect and report suspicious transactions/terrorist financing activities?			
3.Does your AML/CFT policy meet the requirement of local laws and the FATF standards?			
4.Does these laws and regulations prohibit your institution from conducting business with or on behalf shell companies.			
5.Is your AML/CFT policy approved by the board of your institution or by a senior committee?			
6. Does your policy require you to identify the source of your customers' funds or income?			
7. Does your institution collect information regarding its customers' business activities and assess its customers' AML policies or practices?			
8. Is your institution subject to the supervision of any regulatory authority? If yes, please give the name of the supervisory/regulatory authority.			
9. Please give the name of the authority to which you must report in case of a suspicion of money laundering and terrorist financing:			
10. In addition to inspections by the government supervisors/regulators, does your institution have an internal audit function or other independent third party that assesses AML policies and practices on a regular basis?			
11. Does your Entity have an established Anti-bribery and corruption Policy (If yes, please provide a copy)			
12. Does your institution have policies to cover relationships with Politically Exposed Persons (PEPs), their families and close associates?			

13. Does your institution have appropriate record retention procedures pursuant to applicable laws? If yes, please state the period of time for which records are kept.			
II. Risk Assessment	YES	NO	N/A
14. Does your institution have a risk-based assessment of customer base and their transactions?			
15. Does your institution determine the appropriate level of enhanced due diligence necessary for those categories of customers and transactions that your institution has reason to believe pose a heightened risk of illicit activities?			

III. Know Your Customer, Due Diligence and Enhanced Due Diligence	YES	NO	N/A
16. Does your institution require the verification of identification information for all customers and counterparties (individuals or entities) at the establishment of the relationship? (such as; name, nationality, address, telephone number, occupation, age/date of birth, number and type of valid official identification, as well as the name of the country/state that issued it)?			
17. Does your institution have procedures to establish a record for each new customer that contains their respective identification documents and 'Know Your Customer' information?			
18. Does your customer identification program require that enhanced due diligence be conducted regarding certain customers that may present a heightened level of money laundering and terrorist financing risk to your institution, such as international private banking and correspondent banking customers, or customers from high risk money laundering and terrorist financing jurisdictions?			
19. Does your institution have a periodic process to review and, where appropriate, update high-risk customer information?			

IV. Reportable Transactions and Prevention and Detection of Transactions with Illegally Obtained Funds	YES	NO	N/A
20. Does your institution have policies or practices for the identification and reporting of transactions that are required to be reported to the authorities?			
V. Transaction Monitoring			
21. Does your institution have a monitoring program for unusual and potentially suspicious activities that could expose your institution to any ML/FT risks.			
22. Does your institution filter payments against relevant United Nations sanctions lists?			
VI. AML Training	YES	NO	N/A
23. Does your Institution provide AML/CTF/Sanctions & Embargoes training to relevant employees that includes: <ul style="list-style-type: none"> • Identification and reporting of transactions that must be reported to government authorities. 			

<ul style="list-style-type: none"> • Examples of different forms of money laundering involving the institution's products and services. • International, national, and internal policies to prevent money laundering. If yes, how frequent are these trainings?			
24 Does your institution retain records of its training sessions including attendance records and relevant training materials used?			
25. Does your institution have policies to communicate new AML/CTF/Sanctions & Embargoes related laws or changes to existing AML/CTF/Sanctions & Embargoes related policies or practices to relevant employees?			
26. Does your Institution employ third parties to carry out some of the AML/CFT/ Sanctions & Embargoes functions of the institution? If YES Kindly answer below question.			
VI. Additional Information/documents			
Please attach the following documents along with this form: <ul style="list-style-type: none"> - License /Certificate of Registration; - By-law / Articles of Association. - AML / CFT / KYC Policy / Guidelines; - List of Shareholders / owners and their respective shareholding percentage - List of Board of Directors (or Trustees) including their nationalities & shareholders they represent - List of Management Team indicating their respective positions and the number of years of service. - Annual Report & Financial Statement. 			

I hereby confirm that the statements given above are true and correct. I also confirm that I am authorized to complete this document.

Name : _____

Signature : _____

Title _____

Date : _____

Official Seal

(P.S. Please ensure that this form is fully filled, duly signed and stamped in order to complete the required onboarding processes).