

Anti Money Laundering Due Diligence Questionnaire

Section I – General Administrative Information

Registered Name: Addax Bank BSC Closed

Trading Name (if different): None

Registered Address: Addax Tower, 1st Floor, Building 1006, Road 2813

Seef District 428, P.O. Box 11159, Manama, Kingdom of Bahrain

Physical presence at this address? Yes / No

Head Office Address None

Physical presence at this address? Yes / No

Banking License Information

Banking License Number: IBL/045

Banking License Date Issued: 11th Aug 2003

License Type: Investment Bank

Commercial Registration Number: 52088

Commercial Registration Expiry: *(if any)* 29 / 10 / 2011

Other Details

Principal Local Regulator: Central Bank of Bahrain

Web Address: www.cbb.gov.bh

Name of External Auditor: KPMG

SWIFT Address: None

Are your shares publicly traded? Yes / No If 'yes', list exchanges and symbols:

Name of Parent Company *(if applicable)* : None

Country of Incorporation of Parent Company: None

Purpose for which the account will be opened: None

Section II – Ownership Information

Please list (or attach a listing of) all parties owning 20% or more of the issued capital of your institution:

Name	Ownership Interest (percentage)	Nature of ownership (direct/indirect)
Al Waha Capital – PJSC, Abu Dhabi, UAE	46.91%	Direct
International Financial Advisors Company, Kuwait	14.92%	Direct
Global Zone	11.59%	Direct

Section III – Business Activities

Please describe the nature of your customer base:

Customer Base	Approximate %	
	Domestic	International
Retail	62%	
Corporate	19%	
Financial Institutions	18%	

Please list the principal areas of business in which your Bank participates in terms of contribution to Revenue:

Principal Areas of Business Activity (e.g.: Commercial, Private, Corporate, Wholesale, Insurance etc.)	Approximate % of Revenue*
Wholesale Banking	14.46%
Others – Rental Income	88.54%

* based on most recent published financial statements

Section IV – Policies & Procedures

Sr. No.	Details	YES	NO
1.	Has your country established laws/regulations concerning Anti-Money Laundering (AML) and Combating the Financing of Terrorism (CFT)	X	
2.	a) Has your country established laws/regulations Combating the Financing of Terrorism (CFT)	X	
	b) Is your institution subject to such laws/regulations?	X	
3.	a) Do you have a written policy and operational procedures for prevention of money laundering and terrorist financing?	X	
	b) If not, are they planned to be introduced? Please indicate the estimated date of implementation:		
4.	Are your policies / procedures compliant with local laws & regulations with regard to AML / CFT?	X	
5.	Are your policies / procedures compliant with the Financial Action Task Force's (40 +9) Recommendations?	X	
6.	Are the AML/CFT policies and procedures applicable to your head office also applied to your foreign branches and majority owned subsidiaries (both local and overseas)? If 'no' please give / attach details of any units that are excluded:	X	
7.	Does your policy require you to:		
	a) Verify the true identity of all customers prior to entering into a business relationship / undertaking any transactions	X	
	b) Verify the true identity of underlying beneficial owners, if any?	X	
	c) Verify the source of wealth / funds and the level of economic activity of your customers?	X	
	d) 'Risk rate' your customer base based on criteria such as residence / volume and type of activity?	X	
	e) Apply enhanced customer due diligence on those customers identified as having a higher risk profile?	X	
	f) Periodically update due diligence information obtained?	X	
	g) Review the AML/CFT controls of respondent banks before opening an account for them?	X	
8.	Do you retain copies of all relevant customer Identity Documents and transactions information? If 'yes' for what period? Minimum 5 Years	X	
9.	Do you have appropriate risk management systems to determine whether a customer is a Politically Exposed Person (PEP)?	X	
10.	Do your policies and procedures permit you to open or maintain anonymous accounts?		X

Section IV – Policies & Procedures (continued)

Sr. No.	Details	YES	NO
11.	Do your policies and procedures permit you to conduct business with Shell banks, i.e., banks which maintain no physical presence in the country of their incorporation (except if a subsidiary of a regulated financial group)?		X
12.	Are any third parties (e.g., 'payable through' accounts) allowed direct access to the account (if any) maintained by us?		X
13.	If 'yes' has their identity been verified in accordance with your AML/KYC policies and procedures?		
14.	Does your institution comply with FATF Special Recommendation VII and ensure that full originator information is included in all payments that you make?	X	
15.	Does your institution have procedures for identifying payments / transactions related to persons / entities (appearing in relevant regulatory lists) suspected of terrorism? If 'yes' are these automated or manual? Manual	X	
16.	Do you have a system for detecting abnormal customer transactions or patterns of activity in relation to the expected norm? Is this manual or automated? Automated	X	
17.	Do you have policies and procedures for the identification and reporting of transactions that are required to be reported to the authorities?	X	
18.	Are you permitted by your local regulations to share relevant customer identification data with your correspondents should this be requested?		X
19.	If 'yes', would you be willing to do so if required by us where a legitimate need has arisen?		X
20.	Does your institution have an established audit and / or compliance review function to test the adequacy of compliance with your AML / CFT policies and procedures?	X	
21.	Does the Regulatory body / competent authority in your country conduct AML / CFT reviews of your institution. If 'yes' with what frequency: Annually	X	
22.	To the best of your knowledge are you in compliance in all material respects with all relevant AML / CFT laws and regulations?	X	
23.	Has your institution been subject to any investigation, indictment, conviction or civil enforcement related to money laundering and terrorism financing in the past five years? If 'yes' please attach details.		X
24.	Does your institution have an established employee training program to teach employees about money laundering and to assist them in identifying suspicious transactions? If 'yes' with what frequency is training required? Within First Three Months From Joining and Every Two Year After That.	X	

Section IV – Contact Details

Has your institution appointed a Money Laundering Reporting Officer (MLRO)? If 'yes' please provide:

Name: Nasreen Hasan Al Qaseer
Title: Acting Head - Compliance Officer and MLRO
Address: Addax Tower, 1st Floor, Building 1006, Road 2813, Seef District 428
P.O. Box 11159, Manama, Kingdom of Bahrain
Phone: +973 17560480
Fax: +973 17561480
E-Mail nalqaseer@addaxbank.com

Acknowledgement of Responsibilities

We confirm that:

1. we will ensure that full due diligence is performed on all our customers who are party to any transactions involving Addax Bank or upon whose behalf payments are to be routed through accounts (if any) maintained with you.
2. we will not allow a third party direct access to the account without prior notification to ADDAX.
3. 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

Signed by: Nasreen Al-Qaseer Date: 20th January 2010

Where different to section IV above, form completed by:

Name: _____
Title: _____
Address: _____

Phone: _____
Fax: _____
E-Mail _____