

Financial Intelligence Analysis Unit
Risk Evaluation Questionnaire

Financial Sector
Credit Institutions

General remarks from the subject person:

As indicated in the Guidance for Completion of the Anti-Money Laundering and Countering the Financing of Terrorism Risk Evaluation Questionnaire, sole practitioners and entities should, for each of the questions included in this questionnaire, choose the answer option that is best suited to them/ their internal organization.

The FIAU acknowledges that the answer options defined by it do not always fully capture the actual situation within each subject person. When choosing from the answer options available, it is therefore important to select an option that is a true reflection of your actual situation / the actual situation within your entity and that can be justified later on. [Text]

In the text box below, you can formulate general remarks on the answers submitted by you / your entity. Please note that these general remarks are not taken into account in the initial, automated analysis of your / your entity's answers.

1 Subject Person Information

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| 1.01 | Please select the legal formation of your entity. | Public Limited Company / Private Limited Company / Civil Partnership / Commercial Partnership / Branch of a Foreign entity / Association / Other |
| 1.02 | If "Other", please specify. | [Text] / Not Applicable |
| 1.03 | Please select the status of your entity. | Subsidiary of a foreign traded company / Subsidiary of a privately held foreign company / Subsidiary of a local traded company / Subsidiary of a privately held local company / Privately held company / Branch of a regulated entity / Listed company / Other |
| 1.04 | If "Other", please specify. | [Text] / Not Applicable |
| 1.05 | If your entity is a subsidiary of a foreign traded company or a subsidiary of a privately held foreign company, is the parent company located in EU / EEA jurisdictions or non-EU / EEA jurisdictions? | EU / EEA jurisdictions / non-EU / EEA jurisdictions / Not Applicable |
| 1.06 | Please indicate total annual turnover according to the latest available audited financial statements and / or tax declaration. | [€] / Not Applicable |
| 1.07 | Please provide the year end reference date for the financial statements or tax declaration as indicated above. | [Date] / Not Applicable |
| 1.08 | Please indicate the total number of employees (including partners, executive directors, associates and staff), expressed in full time equivalents ("FTEs"), working for you / your entity as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable |
| 1.09 | How many years experience in this industry do you / does the principal(s) and / or partners and / or director(s) and / or senior management of your entity have? | 10 or more years / Between 5-9 years / Between 3-4 years / Between 1-2 years / Less than 1 year |
| 1.10 | Does the ownership structure of your entity include one or more of the following: foundation and / or trust and / or partnership and / or direct or indirect holding through bearer shares? | No / Yes |
| 1.11 | Does your entity have any subsidiaries, branches, affiliates, representative offices and agencies in other EU / EEA countries? | No / Yes |

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| 1.12 | Does your entity have any subsidiaries, branches, affiliates, representative offices and agencies in non-EU / EEA countries? | No / Yes |
| 1.13 | If the answer to the prior question was "Yes", please list the countries in which the subsidiaries, branches, affiliates, representative offices and agencies are situated. | [Text] / Not Applicable |
| 1.14 | Does your entity have any subsidiaries, branches, affiliates, representative offices and agencies in jurisdictions listed in the FATF lists and / or the EU list identifying high risk 3rd countries with strategic deficiencies and / or jurisdictions featuring in the top 20 countries of the Basel Index? | No / Yes |
| 1.15 | If your answer to the above question was "YES", please select the respective jurisdictions. | Select from drop down list / Not Available / Not Applicable |
| 1.16 | Please list all persons (name and surname) who are considered as your entity's beneficial owners as defined in the PMLFTR. | [Text] / Not Applicable |
| 1.17 | Do any of the BOs reside in a non-EU / EEA jurisdiction? | No / Yes / Not Applicable |
| 1.18 | Does your entity have nominee shareholders in its ownership structure? | No / Yes |
| 1.19 | If "Yes", what percent of the total shares are held by nominee shareholders? | [%] / Not Applicable |
| 1.20 | Has your entity undergone changes in its ownership structure during the prior calendar year? | No / Yes |
| 1.21 | Has your entity undergone significant changes in its management and control structure during the prior calendar year? | No / Yes |
| 1.22 | Please ATTACH a copy of the ownership and control structure of your entity (optional). | File Upload / Not Applicable |

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| 2 | Governance |
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| 2.01 | When was the current MLRO appointed? | More than 2 years ago / Between 1-2 years ago / Less than 1 year ago |
| 2.02 | How many years of experience does the MLRO have in AML / CFT? | More than 5 years / Between 3-5 years / Between 1-2 years / Less than 1 year |
| 2.03 | Is the MLRO responsible for areas other than AML / CFT? | No / Yes |
| 2.04 | Does the MLRO also hold MLRO positions with other entities? | No / Yes |
| 2.05 | How many staff members, expressed as FTEs, are part of the AML / CFT team (if one exists)? | [Number] / Not Available / Not Applicable |
| 2.06 | Is any of the AML / CFT team staff responsible for other roles and responsibilities not attributable to AML / CFT (e.g. front office, back office, etc.)? | No / Yes / Not Applicable |
| 2.07 | Do you / does your entity implement appropriate procedures (including obtaining a police conduct or equivalent upon hiring) and assess the conduct and integrity of employees (including partners and directors) handling relevant financial business or relevant activity? | No / Yes / Not Applicable |
| 2.08 | Have you / your entity, MLRO, Compliance Officer, senior management, partners, directors, BOs, and / or shareholders (as applicable) been subject to any of the following in the last five (5) years either in Malta or abroad: | |
| | a) regulatory enforcement actions, criminal investigations for ML / FT or any other financial crime | No / Yes |

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| | b) subject of negative news reports (if known) | No / Yes |
| 2.09 | In the past five (5) years, have any employees (including directors and partners) been disciplined for non-compliance with the AML / CFT policies within your entity? | No / Yes |
| 2.10 | Have you / your entity outsourced the carrying out of any applicable AML / CFT obligations (within or outside the group)? | No / Yes (within Group) / Yes (outside Group) / Yes (within and outside Group) |
| 2.11 | If "Yes", please specify the obligations that are being outsourced. | Business Risk Assessment / Customer Risk Assessment / Customer Due Diligence / On-going monitoring / Record keeping / Not Applicable |
| 2.12 | Have you made use of any of the exceptions provided in Section 5.1.2 of the Implementing Procedures - Part I providing for the Money Laundering Reporting Officer to be carried out by someone other than one of your officers? | No / Yes |
| 2.13 | If yes, please indicate the official full name of the service provider. | [Text] / Not Applicable |
| 2.14 | How often has the Board or equivalent body, received a presentation on AML / CFT issues in the prior calendar year? | Monthly / Quarterly / Half yearly / Annually / None / Not Applicable |

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| 3 | Business Risk Assessment |
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| 3.01 | Have you / your entity performed a Business Risk Assessment? | No / Yes |
| 3.02 | What is your / your entity's most recent Business Risk Assessment inherent risk scoring / rating for ML / FT risk? | Very High / High / Medium / Low / Not Applicable |
| 3.03 | What is your / your entity's most recent Business Risk Assessment residual risk scoring / rating for ML / FT risk? | Very High / High / Medium / Low / Not Applicable |
| 3.04 | Did the Business Risk Assessment conducted take into account the risks and controls related to: | |
| | a) your / your entity's customers | No / Yes / Not Applicable |
| | b) the products and services offered by you / your entity and the transaction risk exposure through same | No / Yes / Not Applicable |
| | c) specific countries or geographical areas | No / Yes / Not Applicable |
| | d) the distribution channels | No / Yes / Not Applicable |
| 3.05 | Did the Business Risk Assessment conducted take into account the results of the SNRA and NRA? | No / Yes / Not Applicable |
| 3.06 | Has the Business Risk Assessment been approved by senior management (including directors and partners) of your entity? | No / Yes / Not Applicable |
| 3.07 | Did you / your entity review and / or update the business risk assessment in the prior calendar year? | No / Yes / Not Applicable |
| 3.08 | Please ATTACH latest Business Risk Assessment. | [File Upload] / Not Available |

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| 4 | Customer Acceptance and Risk Assessment |
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| 4.01 | Do you / does your entity perform a customer risk assessment ("CRA") prior to the acceptance and approval of customers? | No / Yes sometimes / Yes most of the times / Yes, always / Not Applicable |
| 4.02 | Please indicate, for all your customers where a business relationship is formed or, depending on the risk, only for a specific part of your customers, whether you / your entity collects the following: | |
| | a) Identification and verification information (for both natural and legal persons and BOs of legal persons) including: name, nationality / country of incorporation or registration, country of residence, registered office or main place of business | No / Yes / Not Applicable |
| | b) Where applicable, identification and verification of persons acting on behalf of the customer, including ensuring person is authorised in writing | No / Yes when risk is not low / Yes only when risk is high / Yes, always / Not Applicable |
| | c) Information on the overall wealth of the customer (nature of activities conducted and corresponding level of income or turnover, other income streams) | No / Yes / Not Applicable |
| | d) Information on the expected source and origin of the funds and / or assets transacted by the customer / on behalf of the customer | No / Yes / Not Applicable |
| | e) Information on the PEP status of the customer and, where applicable of the beneficial owner | No / Yes / Not Applicable |
| 4.03 | Please indicate, for all your customers where a business relationship is formed or, depending on the risk, only for a specific part of your customers, whether you / your entity collects information on actual or expected activity (including cash flows) with respect to size, frequency and geographical distribution. | No / Yes, when risk is not low / Yes, only when risk is high / Yes, always / Not Applicable |
| 4.04 | Do policies and procedures specify hierarchical authorisation levels within your entity to, on a risk basis, accept a customer or approve a transaction? | No / Yes |
| 4.05 | Did you / your entity acquire new clients through an introducer/s in the prior calendar year? | No / Yes |
| 4.06 | If "yes", please indicate the number of introducers used during the prior calendar year. | [Number] / Not Available / Not Applicable |
| 4.07 | In the case where an introducer was used, was due diligence performed on the introducer? | Never / Yes in some instances / Yes in all instances / Not Available / Not Applicable |
| 4.08 | Does your entity establish the identity of its agents / distributors? | No / Yes / Not Applicable |
| 4.09 | Do the policies and procedures require specific EDD measures to be undertaken where your entity has a cross-border correspondent relationship with a respondent based in a country other than an EU member state? | No / Yes / Not Applicable |
| 4.10 | Are the following verification measures used during the onboarding of non-face-to-face customers: | |
| | a) Verification on the basis of documents | No / Yes / Not Applicable |
| | b) Use of video conferencing tools | No / Yes / Not Applicable |
| | c) Use of identity verification software | No / Yes / Not Applicable |
| | d) Verification through the use of commercial electronic data providers | No / Yes / Not Applicable |
| | e) Use of e-IDs | No / Yes / Not Applicable |
| | f) Verification of Identity Platforms | No / Yes / Not Applicable |

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| 4.11 | Do you / does your entity screen customers and, where applicable, their beneficial owners against sanction lists, PEP lists and to see whether they were the subject of adverse media at onboarding? | No / Yes |
| 4.12 | When making use of any of the exceptions provided for under Regulation 8 of the PMLFTR, do the customer files include a written justification for the exception and formal approval of the exception? | No / Yes / Not Applicable |
| 4.13 | Where customer due diligence cannot be completed at the onboarding stage, do the policies and procedures require you / your entity to consider whether there is a need to file a STR with the FIAU and only proceed with the cancellation / termination of the business relationship once it is determined that there is no suspicion justifying the filing of a STR? | No / Yes |
| 4.14 | Do policies and procedures require due diligence (including customer risk assessment) to be repeated when there are doubts about the completeness, reliability or accuracy on priorly obtained customer identification information, data or documentation? | No / Yes |
| 4.15 | Is your monitoring system able to detect the expiry of due diligence documentation and any conflicting information in relation to customer data? | No / Yes |
| 4.16 | Do the policies and procedures require you to revise your customer risk assessment should the customer be evasive or not cooperative to provide the requested information and / or documentation? | No / Yes |
| 4.17 | Does your entity have controls that allow it to disable the product until it is satisfied that the customers pose no threat of suspicious activity? | No / Yes |
| 4.18 | In cases where your entity uses an agent to market its products / services, do policies and procedure state what action needs to be taken if the agent fails to provide the originator information upon request? | No / Yes / Not Applicable |
| 4.19 | In the event that there are changes to your customer's business model, ownership structure or service offering, do you / does your entity review the existing customer risk assessment and, if necessary, update the said risk assessment? | No / Yes sometimes / Yes most of the times / Yes always |
| 4.20 | Do policies and procedures require the carrying out of identification and verification of the identity measures and a revision of the CRA, whenever there is a change in BOs? | No / Yes |
| 4.21 | Do policies and procedures require your entity to obtain an understanding of changes in the customer's behaviour, as well as obtain related supporting documentation and revise the CRA, if required? | No / Yes |
| 4.22 | Do policies and procedures require your entity to obtain an understanding of high value / high risk transactions, as well as obtain related supporting documentation and revise the CRA, if required? | No / Yes |
| 4.23 | Do policies and procedures require the performance of periodic reviews on customer due diligence information and / or documentation, on the basis of customer risk rating? | No / Yes |

5 Ongoing Monitoring / Transaction Scrutiny

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| 5.01 | Where business relationships are established, how frequently does your entity review and update the information held in the files on customers and BOs that are assessed as high risk (or higher)? | As necessary but at least annually / Annually / Every 18 months / Every 2-3 years / More than every 3 years / Never / Not Available / Not Applicable |
| 5.02 | Where business relationships are established, how frequently does your entity review and update the information held in the files on customers and BOs that are not assessed as high risk (or higher)? | As necessary but at least annually / Annually / Every 2-3 years / More than every 3 years / Never / Not Available / Not Applicable |
| 5.03 | Is your entity's process / system for monitoring transactions fully automated, partially automated or manual? | Fully automated / Partially automated / Manual / Not Applicable |

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| 5.04 | Does your monitoring system utilise any of these techniques to monitor customer activity? | No / Profiling Techniques / Rule-based criteria / Both / Not Applicable |
| 5.05 | How often are the criteria and rules utilised by the monitoring system reviewed and updated? | Twice or more within a year / Annually / Less frequent than annually / Never / Not Applicable |
| 5.06 | Are customers' transactions monitored in real-time, post-event or a combination of both? | Combination of both / Post-event / Real-time / Not Applicable |
| 5.07 | Are there customer transactions that are not screened by the monitoring system? | No / Yes / Not Applicable |
| 5.08 | In the case where not all payments and / or transactions are screened by the monitoring system, please list the type of payments and / or transactions not screened. | [Text] / Not Applicable |
| 5.09 | Does your entity have an expected transaction profile for every customer? | No / Not always / Yes / Not Applicable |
| 5.10 | Do you / does your entity request additional information, when transactions that you / your entity are aware of do not match the customer profile? | No / Yes sometimes / Yes always / Not Applicable |
| 5.11 | Do you / your entity, when carrying out an occasional transaction, have measures in place to scrutinize transactions that are not consistent with the available information on the customer? | No / Yes / Not Applicable |
| 5.12 | Is the monitoring system based on: | |
| | a) The characteristics of the products and services offered | No / Yes / Not Applicable |
| | b) The characteristics of the customers | No / Yes / Not Applicable |
| | c) The characteristics of the relevant countries and geographical areas | No / Yes / Not Applicable |
| | d) The characteristics of the distribution channels used | No / Yes / Not Applicable |
| | e) The payment method used by the customer | No / Yes / Not Applicable |
| 5.13 | f) Other factors | No / Yes / Not Applicable |
| | If the monitoring system is based on "Other factors", please provide a description of the factors. | [Text] / Not Applicable |
| 5.14 | Does your entity have systems in place to detect instances where services and / or products may be accessed by persons other than the customer? | No / Yes / Not Applicable |
| 5.15 | How many alerts were generated by the monitoring system during the prior calendar year? | [Number] / Not Available / Not Applicable |
| 5.16 | Of the total alerts generated by the monitoring system, how many resulted in internal investigations during the prior calendar year? | [Number] / Not Available / Not Applicable |
| 5.17 | Does the monitoring system in place identify linked transactions? | No / Yes / Not Applicable |
| 5.18 | Does the monitoring system identify unusual turnover patterns, unusually large cash transactions or a high number of transactions that fall just under the CDD threshold? | No / Yes / Not Applicable |
| 5.19 | Does the monitoring system in place identify whether transactions from different customers are destined for the same payee? | No / Yes / Not Applicable |

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| 5.20 | Does the monitoring system in place establish from where funds are being remitted and where funds are being received? | No / Yes / Not Applicable |
| 5.21 | Does the monitoring system identify discrepancies between submitted and detected information, for example, between submitted country of origin information and the electronically detected IP address? | No / Yes / Not Applicable |
| 5.22 | Does the monitoring system compare data submitted with data held on other business relationships and identify patterns such as the same funding instrument or the same contact details? | No / Yes / Not Applicable |
| 5.23 | Please tick any of the jurisdiction lists provided against which the monitoring system screens transactions. | FATF list / EU list / Top 20 jurisdictions featured in the Basel Index / Other / None / Not Applicable |
| 5.23 | If "Other", please specify the jurisdiction list utilised by your entity. | [Text] / Not Applicable |
| 5.24 | Does the system identify unusual use of the service, such as customers sending or receiving money to or from themselves or sending funds immediately upon receiving them? | No / Yes / Not Applicable |
| 5.25 | Does the monitoring system detect incoming fund transfers which have missing or incomplete information on the payer and / or payee? | No / Yes / Not Applicable |
| 5.26 | How many customer relationships were terminated / blocked / suspended or were otherwise provided limited services, for AML / CFT related reasons, during the prior calendar year? | [Number] / Not Available / Not Applicable |
| 5.27 | How many fund transfers with missing or incomplete information did your entity detect in the prior calendar year? | [Number] / Not Available / Not Applicable |
| 5.28 | How many of these transfer of funds did your entity suspend or refuse to execute? | [Number] / Not Available / Not Applicable |
| 5.29 | Did your entity terminate any relationship with a payment service provider in the prior calendar year, due to the provider repeatedly failing to provide the necessary information on the payer and / or payee? | No / Yes / Not Applicable |
| 5.30 | How many potential customers did you / your entity refuse to onboard or service during the prior calendar year, because the ML / FT risk presented fell outside your / your entity's risk appetite? | [Number] / Not Available / Not Applicable |
| 5.31 | Is your entity aware of any of its customers whose assets were frozen (due to AML / CFT considerations) in any jurisdiction? | No / Yes / Not Applicable |

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| 6 | Policies and Procedures | |
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| 6.01 | Do you / your entity have written AML / CFT policies and procedures? | No / Yes |
| 6.02 | Do policies and procedures require you / your entity to assess risks associated with funding of terrorism? | No / Yes |
| 6.03 | How frequently do you / does your entity review and, where necessary, update your AML / CFT written policies and procedures? | As needed / Monthly / Quarterly / Annually / Between 1-3 years / Every 3 or more years |
| 6.04 | Do you / do your entity's procedures provide for measures to determine whether customers and, where applicable, their beneficial owners, are politically exposed persons (PEPs) or PEPs' family members or close associates, prior to commencement of service? | No / Yes |
| 6.05 | Do you / do your entity's policies and procedures require senior management's approval to service or otherwise continue business relationships with, or having the involvement of, PEPs or their family members / close associates? | No / We do not offer services to PEPs / Yes / Not Applicable |

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| 6.06 | In case of business relationships, do you / does your entity have policies and measures in place to screen customers, including BOs, against sanctions lists, PEP lists and against adverse media as part of the ongoing monitoring? | No / Yes / Not Applicable |
| 6.07 | Does your entity have policies and procedures regarding the reporting of suspicious transactions to the FIAU? | No / Yes |
| 6.08 | Do you / your entity have policies and procedures to identify, analyse and escalate transactions over given thresholds and where applicable report suspicious transactions to the MLRO? | No / Yes |
| 6.09 | Do you / does your entity have policies, procedures and measures to follow up on incomplete documentation from the customer file? | No / Yes / Not Applicable |
| 6.10 | Do you / does your entity have procedures for dealing with customers who request transactions to be completed in unusually tight or accelerated timeframes without reasonable explanation? | No / Yes |
| 6.11 | Do policies and procedures require you / your entity to assess the AML / CFT framework of individuals / entities on whom reliance is being placed? | Never / Yes in some instances / Yes in all instances / Not Applicable |
| 6.12 | Do you / does your entity have policies and procedures in place to assess the AML / CFT compliance framework of your intermediaries / brokers / agents / respondents / introducers? | No / Yes / Not Applicable |
| 6.13 | Do your entity's policies and procedures require you to perform a more detailed review when unusual activity / transactions are detected? | No / Yes |
| 6.14 | Does your entity have documented policies and procedures to follow up about the identity of the payee in the case where the customer is reluctant in providing information or has little information about the payee? | No / Yes |
| 6.15 | Does your entity have internal whistleblowing procedures? | No / Yes / Not Applicable |

7 Internal Audit/Independent Testing

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| 7.01 | Have you / your entity, given the size and nature of its business, appointed an officer at management level to monitor the day to day implementation of its AML / CFT measures, policies, controls and procedures? | No, MLRO has taken this role / Yes, other officer at management level appointed / Considered but not required / Not considered |
| 7.02 | What was the frequency of the reviews carried out by the appointed officer in the prior calendar year? | Monthly / Half yearly / Annually / As needed / No reviews performed / Not Applicable |
| 7.03 | Have you / your entity, given the size and nature of its business, appointed an independent audit function to test its AML / CFT measures, policies, controls and procedures? | Not considered / Considered but function not required / Yes, independent officer at management level / Yes, external consultant / Yes, internal audit / Not Applicable |
| 7.04 | What is the frequency of audits carried out by the independent audit function? | Monthly / Quarterly / Half yearly / Annually / Between 1-3 years / Every 3 or more years / As needed / No reviews performed / Not Applicable |
| 7.05 | When was the last independent audit performed in regards to you / your entity's compliance with the AML / CFT regulations? | Less than 1 year ago / Between 1 -2 years ago / More than 2 years ago / Never / Not Applicable |
| 7.06 | What was the overall result of the last audit (relating to AML / CFT) carried out? | Satisfactory / Satisfactory but improvements required / Unsatisfactory / No audits carried out / Not Applicable |
| 7.07 | How many "high risk" audit issues were identified in the latest audit report (relating to AML / CFT)? | [Number] / Not Available / Not Applicable |

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| 7.08 | How many "high risk" audit issues are currently open (relating to AML / CFT)? | [Number] / Not Available / Not Applicable |
| 7.09 | When was the last time the monitoring system was independently tested? | Between 1-2 years ago / Less than 1 year ago / More than 2 years ago / Never before / Not Applicable |
| 7.10 | If you / your entity outsourced the carrying out of any applicable AML / CFT obligations (within or outside the Group), have you / your entity defined a policy or procedure for testing the quality of the outsourced tasks? | No / Yes / Not Applicable |
| 7.11 | Where applicable, when was the last time that you / your entity formally assessed the quality of the services provided to you by your outsourced service provider (within and outside the group) which are located in a EU / EEA jurisdiction (including Malta)? | Within the last 3 months / Within the last 6 months / Within the last 12 months / Within the last 2 years / Within the last 3 years / Over 3 years ago / Never / Not Applicable |
| 7.12 | Where applicable, when was the last time that you / your entity formally assessed the quality of the services provided to you by your outsourced service provider (within and outside the group) which are located in a non-EU / EEA jurisdiction? | Within the last 3 months / Within the last 6 months / Within the last 12 months / Within the last 2 years / Within the last 3 years / Over 3 years ago / Never / Not Applicable |

8 Reporting

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| 8.01 | How many STRs were submitted to the FIAU during the prior calendar year? | [Number] / Not Available |
| 8.02 | Please list the number of alerts generated as a result of unusual activity or transactions during the prior calendar year? | [Number] / Not Available |
| 8.03 | How many internal suspicious reports were raised during the prior calendar year? | [Number] / Not Available |
| 8.04 | From the internal reports raised in the prior calendar year, how many cases are still open? | [Number] / Not Available / Not Applicable |
| 8.05 | How many internal suspicious reports were not reported to FIAU after investigation ("closed") during the prior calendar year? | [Number] / Not Available |
| 8.06 | Were records of all "internal reports" raised during the prior calendar year and the analysis conducted thereon maintained by you / your entity? | No / No measures relating to internal reporting or alerts are in place / No internal reports submitted / Only internal reports maintained / Yes, internal report & analysis maintained |
| 8.07 | In those instances where an STR was not submitted to the FIAU, were the reasons and analysis documented on file? | No internal reports submitted / Reasons are not documented / Yes, most of the time / Yes, reasons are always retained |
| 8.08 | Did your entity file any reports with the FIAU on any payment service providers for repeatedly not providing the necessary information on the payer and / or payee? | No / Yes / Not Applicable |
| 8.09 | How many requests for information from the Maltese authorities did you / your entity receive about any of your customers during the prior calendar year? | [Number] / Not Available |

9 AML / CFT Training

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| 9.01 | How often do you and / or any relevant staff attend AML / CFT training? | Every 3 or more years / Between 1-3 years / Annually / Monthly / Quarterly / As needed but at least annually / Not Applicable |
| 9.02 | Have you and / or relevant staff from your entity attended or received training in the prior calendar year, in relation to specific Maltese AML / CFT regulations (PMLA, PMLFTR, IPs)? | No / Yes / Not Applicable |
| 9.03 | Please provide the % of staff within the AML / CFT unit that completed AML / CFT training throughout the prior calendar year. | [%] / Not Available / Not Applicable |
| 9.04 | Please provide the % of staff outside the AML / CFT unit that completed AML / CFT training throughout the prior calendar year. | [%] / Not Available / Not Applicable |

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| 9.05 | Please provide the % of board members / partners that received AML / CFT training throughout the prior calendar year. | [%] / Not Available |
| 9.06 | Is your entity's training program uniformly applied to all staff carrying out a relevant activity / relevant financial business (including directors and partners) equally, or is it differentiated according to their duties? | Differentiated / The same for everyone / Not Applicable |
| 9.07 | Where AML operational tasks are outsourced (within or outside the Group), have the outsourced provider's staff directly servicing your entity, received training during the prior calendar year in relation to: | |
| | a) specific Maltese AML / CFT regulations (PMLA, PMLFTR, IPs) | No / Yes / Not Applicable |
| | b) your / your entity's AML / CFT policies and procedures | No / Yes / Not Applicable |
| 9.08 | Where tasks relating to AML / CFT compliance are outsourced (within or outside the Group), what % of the provider's staff directly servicing you / your entity, received training on AML / CFT throughout the prior year? | [%] / Not Available / Not Applicable |
| 9.09 | Where applicable, when was the last time that you / your entity verified that your outsourced service provider's staff received training on Maltese AML / CFT regulations and on you / your entity's AML / CFT policies and procedures? | Last year / Two years ago / Three years ago / More than three years ago / Never / Not Applicable |
| 9.10 | Does your entity provide AML / CFT training to agents to ensure that agents have an adequate understanding of relevant ML / FT risks and of the AML / CFT policies and procedures they are to apply? | No / Yes / Not Applicable |

10 Record Keeping

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| 10.01 | Do you / your entity have policies and procedures in place providing for compliance with the record keeping obligations arising from the PMLFTR? | No / Yes |
| 10.02 | Upon request by the FIAU, are you / your entity in a position to retrieve the requested customer records / or investigative records within the established deadlines? <i>*If you / your entity received reminders or requested extensions for deadlines imposed by the FIAU, do not mark as [yes, always].</i> | No / Depending on the request / Yes always / Yes most of the time |

11 Products and Services

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| Please provide the following information based on the activities performed by the entity during the prior calendar year: | | |
| 11.01 | Please indicate the total volume and value of transactions relating to retail deposits: | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 11.02 | Please indicate the total volume and value of transactions relating to non-retail deposits: | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 11.03 | Please indicate the total volume and value of transactions relating to International wire transfers: | |

| | | |
|--|------------------------------------|---|
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |

Cash deposits and withdrawals

| | | |
|-------|--|---|
| 11.04 | Please indicate the total volume and value of deposits in cash (coins and / or notes) amounting to €10,000 or more, which were received by your entity in a single transaction or a number of transactions that appeared to be linked, during the prior calendar year: | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 11.05 | Please indicate the highest value of deposit received in cash by your entity during the prior calendar year. | [€] / Not Available / Not Applicable |
| 11.06 | Please indicate the total volume and value of withdrawals in cash (coins and / or notes) amounting to €10,000 or more, which were processed by your entity during the prior calendar year: | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |

Pooled accounts and subaccounts

| | | |
|-------|---|---|
| 11.07 | Please indicate the number of pooled accounts and subaccounts held by your entity as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.08 | Please indicate the total number and value of transactions related to pooled accounts and subaccounts carried out during the prior calendar year: | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 11.09 | Does your entity apply SDD in relation to its pooled accounts? | No / Yes but not for all / Yes / Not Applicable |

Correspondent banking

| | | |
|-------|--|---|
| 11.10 | Please indicate the total volume and value of incoming transactions relating to correspondent activity in the prior calendar year: | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 11.11 | Please indicate the total number of accounts held by respondents with your entity (referred to also as VOSTRO account). | [Number] / Not Available / Not Applicable |
| 11.12 | Does your entity allow for correspondent activity relationships to include the opening of payable-through accounts? | No / Yes / Not Applicable |
| 11.13 | How many new correspondent accounts were opened during the prior calendar year? | [Number] / Not Available |

| | | |
|-------|---|---------------------------|
| 11.14 | Has any correspondent bank terminated its relationship with your entity in the prior calendar year? | No / Yes / Not Applicable |
| 11.15 | Could the accounts placed at the disposal of your respondent as listed above be used by other respondent banks / financial entities that have a direct relationship with the respondent but not with the correspondent (commonly referred to as 'nesting' or downstream correspondent activity), which means that your entity (correspondent) is indirectly providing services to other banks / financial entities that are not the respondent? | No / Yes |
| 11.16 | Of the correspondent relationships, how many of the respondents are based in EU / EEA jurisdictions? | [Number] / Not Available |
| 11.17 | Of the correspondent relationships, how many of the respondents are based in non-EU / EEA jurisdictions? | [Number] / Not Available |
| 11.18 | Of the correspondent relationships, how many of the respondents are based in jurisdictions listed in the FATF lists and / or the EU list identifying high risk 3rd countries with strategic deficiencies and / or jurisdictions featuring in the top 20 countries of the Basel Index? | [Number] / Not Available |

Loans

| | | |
|-------|--|---------------------------|
| 11.19 | Did the entity have a loan portfolio, as at the end of the prior calendar year? | [€] / Not applicable |
| 11.20 | As per the entity's internal policies, what is the maximum value of any single facility that can be granted by your entity? | [Number] / Not Applicable |
| 11.21 | Please indicate the total volume and value of incoming transactions relating to loans in the prior calendar year. | |
| | a) Volume (number of transactions) | [Number] / Not applicable |
| | b) Value | [€] / Not applicable |
| 11.22 | Please indicate the total number of loans issued during the prior year: Volume (number of loans) | [Number] / Not Applicable |
| 11.23 | Please indicate the total value of loans granted during the period calendar year: Value | [€] / Not Applicable |
| 11.24 | Please indicate the total number of loans which were secured against the value of assets in other jurisdictions, as at the end of the prior calendar year. | [Number] / Not Applicable |
| 11.25 | Please indicate the total value of loans which were secured against the value of assets in non-EU / non-EEA jurisdictions, as at the end of the prior calendar year. | [€] / Not Applicable |

Trade finance

| | | |
|-------|---|---|
| 11.26 | Please indicate the total volume and value of facilities relating to trade finance services (excluding guarantees): | |
| | a) Volume | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 11.27 | Please indicate the total volume of transactions relating to the facilities mentioned in the previous question. | [Number] / Not Available / Not Applicable |
| | What volume and value of transactions is to / from EU / EEA jurisdictions? | |

| | | |
|-------|---|---|
| 11.28 | a) Volume | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 11.29 | What volume and value of transactions is to / from non-EU / EEA jurisdictions? | |
| | a) Volume | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 11.30 | What volume and value of transactions is to / from jurisdictions listed in the FATF lists and / or the EU list identifying high risk 3rd countries with strategic deficiencies and / or the jurisdictions featuring in the top 20 countries of the Basel Index? | |
| | a) Volume | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |

Guarantees

| | | |
|-------|--|---|
| 11.31 | Please indicate the total number and value of guarantees and commitments issued and / or renewed during the prior calendar year. | |
| | a) Volume | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |

Asset management services

| | | |
|-------|--|---|
| 11.32 | Please indicate the number of active customers to whom Portfolio management and / or advice services were provided to, as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.33 | Please indicate the total value of the original amount invested by each customer indicated in the prior question. | [€] / Not Available / Not Applicable |
| 11.34 | Please provide the total number of foreign customers receiving asset management services (including private banking). | [Number] / Not Available / Not Applicable |
| 11.35 | What amount did your entity use as a threshold in order to determine whether customers are eligible for asset management services? | [€] / Not Applicable |

Trading services

| | | |
|-------|--|---|
| 11.36 | Please indicate the total number of active customers to which the trading service of transferable securities was being offered to as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.37 | Please indicate the total number and value of transferable securities offered by your entity, as at the end of the prior calendar year. | |
| | a) Volume | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 11.38 | Please indicate the total number of active customers to which a trading service other than transferable securities was being offered as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable |

| | | |
|-------|---|---|
| 11.39 | Please indicate the total number of trades that were being offered by your entity as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.40 | Please indicate the total issue value of trades that were being offered by your entity as at the end of the prior calendar year. | [€] / Not Available / Not Applicable |
| 11.41 | Please indicate the total value of the portfolio relating to safekeeping and administration of securities as at the beginning of the prior calendar year. | [€] / Not Available / Not Applicable |
| 11.42 | Please indicate the total value of the portfolio relating to safekeeping and administration of securities as at the end of the prior calendar year. | [€] / Not Available / Not Applicable |

Safe custody services

| | | |
|-------|---|---|
| 11.43 | Does your entity offer safe custody services? | No / Yes |
| 11.44 | If "Yes", please list the total number of active customers to whom safe custody services were being offered as at the end of the prior calendar year? | [Number] / Not Available / Not Applicable |

Merchants payment processing

| | | |
|-------|---|---|
| 11.45 | Does your entity act as an acquiring bank for merchants? | No / Yes |
| 11.46 | If the answer to the above question was "Yes", please indicate the total number of merchant accounts held as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.47 | Please indicate the total volume and value of transactions processed on behalf of merchants. | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |

Credit Cards

| | | |
|-------|---|---|
| 11.48 | Please indicate the total number of credit cards issued during the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.49 | Please indicate the total volume and value of incoming transactions relating to credit cards. | |
| | a) Volume | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 11.50 | Please indicate the total volume and value of outgoing transactions relating to credit cards. | |
| | a) Volume | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 11.51 | Please indicate the total number of customers related to the service of credit cards as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.52 | Please indicate the total number of customers related to the service of credit cards having an annual credit limit between €20,000 - €100,000 as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable |

| | | |
|-------|--|---|
| 11.53 | Please indicate the total number of customers related to the service of credit cards having an annual credit limit between €100,000 - €1,000,000 as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.54 | Please indicate the total number of customers related to the service of credit cards having an annual credit limit or more than €1,000,000 (including unlimited) as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.55 | Please indicate the total number of credit cards which have annual credit limit of €20,000 or more as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.56 | Please indicate the total number of credit cards having an annual credit limit between €100,000 - €1,000,000 as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.57 | Please indicate the total number of credit cards having an annual credit limit or more than €1,000,000 (including unlimited) as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.58 | Does your entity issue credit cards with unlimited credit? | No / Yes / Not Applicable |

Prepaid Cards

| | | |
|-------|--|---|
| 11.59 | Please indicate the total number of prepaid cards issued by your entity during the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.60 | Please indicate the total number of reloadable prepaid cards issued during the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.61 | Please indicate the total number of non-reloadable prepaid cards issued during the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.62 | Please indicate the total number of customers relating to the service of prepaid cards as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.63 | Please indicate the total value of incoming transactions relating to prepaid cards. | [€] / Not Available / Not Applicable |

Electronic money

| | | |
|-------|--|---|
| 11.64 | Do the services offered in relation to electronic money allow for high value or unlimited-value payments, loading or redemption or for high / unlimited funds to be stored on the e-money product / account? | No / Yes / Not Applicable |
| 11.65 | Do the services offered in relation to electronic money allow for the anonymous loading for example with cash, with anonymous e-money or e-money products or for the funding with payments from unidentified third parties or with other e-money products? | No / Yes / Not Applicable |
| 11.66 | Can the e-money products be pre-paid by the user (payer) or by third party on behalf of or in favour of the payer? | No / Yes / Not Applicable |
| 11.67 | Please indicate the total number of outgoing payment activity to Internet-based / mobile-application based payment systems (e.g. PayPal, Alipay, ApplePay, Venmo, Google Checkout, etc.). | [Number] / Not Available / Not Applicable |
| 11.68 | Please indicate the total value of outgoing payment activity to Internet-based / mobile-application based payment systems (e.g. PayPal, Alipay, Apple Pay, Venmo, Google Checkout, etc.). | [€] / Not Available / Not Applicable |

Virtual IBANs

| | | |
|-------|---------------------------------------|----------|
| 11.69 | Does your entity offer virtual IBANs? | No / Yes |
|-------|---------------------------------------|----------|

| | | |
|-------|--|--|
| 11.70 | If "Yes", how many virtual IBANs were issued in the prior calendar year? | [Number] / Not Available / Not Applicable |
| 11.71 | Please indicate the total value of incoming transactions received through virtual IBANs. | [€] / Not Available / Not Applicable |
| 11.72 | Please indicate the total value of outgoing transactions remitted through virtual IBANs. | [€] / Not Available / Not Applicable |
| 11.73 | Of the total number of virtual IBANs issued in the prior calendar, how many were issued: | |
| | a) to your customers for their personal use | [Number] / Not Available / Not Applicable |
| | b) to your customers for third party use | [Number] / Not Available / Not Applicable |
| 11.74 | If virtual IBANs were issued to customers for third party use, was CDD carried out on the third parties? | No / Yes / Not Applicable |
| 11.75 | Do the products have limitations or not allow for cash withdrawals or cash transactions? | No / Yes, some of the products / Yes, all products |
| 11.76 | Does your entity offer products or services that permit the exchange of cash for a negotiable instrument? | No / Yes |
| 11.77 | Has your entity introduced new technologies / systems to manage its products and / or services in the prior calendar year? | No / Yes |
| 11.78 | If "Yes", please specify: | [Text] / Not Applicable |
| 11.79 | If the entity provides any products / services other than those listed above, please specify the nature of these services. | [Text] / Not Applicable |

12 Customers

**Customer is defined as natural persons or legal persons with whom the entity has a business, professional, or commercial relationship.*

Customer Type

| | | |
|-------|---|--------------------------|
| 12.01 | Please list the total number of customers with whom your entity had an active business relationship as at the beginning of the prior calendar year. | [Number] / Not Available |
| 12.02 | Please list the total number of customers with whom your entity had an active business relationship as at the end of the prior calendar year. | [Number] / Not Available |
| 12.03 | Please list the total number of customer relationships closed / terminated during the prior calendar year. | [Number] / Not Available |
| 12.04 | Please list the total number of customers for whom your entity carried out an occasional transaction during the prior calendar year. | [Number] / Not Available |
| 12.05 | Please list the total number of new customers onboarded during the prior calendar year. | [Number] / Not Available |
| 12.06 | Please indicate the number of active customer accounts related to retail banking as at the beginning of the prior calendar year. | [Number] / Not Available |
| 12.07 | Please indicate the number of active customer accounts related to retail banking as at the end of the prior calendar year. | [Number] / Not Available |

| | | |
|-------|--|--------------------------------------|
| 12.08 | Please indicate the number of active customer accounts related to non-retail banking as at the beginning of the prior calendar year. | [Number] / Not Available |
| 12.09 | Please indicate the number of active customer accounts related to non-retail banking as at the end of the prior calendar year. | [Number] / Not Available |
| 12.10 | For each instance noted below, please state the total expressed as a % of the total customers as at the end of the prior calendar year: | |
| | a) Natural persons | [%] / Not Available |
| | b) Legal persons | [%] / Not Available |
| | c) Customers with an ownership structure that includes offshore vehicles, trusts, or other legal arrangements including bearer shares and nominee shareholding | [%] / Not Available |
| | d) Customers with an ownership structure that includes foundations, charities or other not-for-profit entities | [%] / Not Available |
| 12.11 | Please list the number of customers (natural persons) and / or BOs that have benefited from residence or citizenship by investment schemes, or are applicants / prospective applicants for such schemes. | [Number] / Not Available |
| 12.12 | Of the total number of customers, please specify: | |
| | a) % of customers scored / rated as "High Risk" | [%] / Not Available |
| | b) % of customers scored / rated as "Medium High Risk" | [%] / Not Available |
| | c) % of customers scored / rated as "Medium Risk" | [%] / Not Available |
| | d) % of customers scored / rated as "Low Medium Risk" | [%] / Not Available |
| | e) % of customers scored / rates as "Low Risk" | [%] / Not Available |
| 12.13 | Does a percentage of your customer base have a risk rating outside of the "high", "medium" and "low" categories? | No / Yes |
| 12.14 | If "Yes", please specify any additional risk rating. | [Text] / Not Applicable |
| 12.15 | Please specify the corresponding % of customers of the risk rating stated above. | [%] / Not Available / Not Applicable |
| 12.16 | Do you / does your entity have customers (legal entities) which are shell companies? | No / Yes / Not Available |
| 12.17 | Do you / does your entity have express trusts with an unexplained nature of classes of beneficiaries and acting as trustees of such a trust? | No / Yes / Not Available |
| 12.18 | Do you / does your entity have customers for which management is vested in a representative or an agent (i.e. where you deal primarily with a third party and not the customer directly)? | No / Yes / Not Available |
| 12.19 | Please list the number of natural persons that have an account used for business purposes. | [Number] / Not Available |
| 12.20 | Please list the number of customers who are operating in high-risk industries (as designated by your policies and procedures). | [Number] / Not Available |

| | | |
|-------|---|--------------------------------------|
| 12.21 | Please list the number of customers who are operating in dual use products (as designated by your policies and procedures), or separately as per SL 365.12. | [Number] / Not Available |
| 12.22 | If applicable and in relation to the last two questions, please list the industries and products. | [Text] / Not Applicable |
| 12.23 | Please list the number of customers who operate cash intensive businesses. | [Number] / Not Available |
| 12.24 | Please list the number of customers who operate as Money or Value Transfer Services (MVTs) providers. | [Number] / Not Available |
| 12.25 | For how many relationships is the beneficial owner unknown, because of the application of SDD? | [Number] / Not Available |
| 12.26 | What is the value of the relationships where the beneficial owner is unknown, because of the application of SDD? | [€] / Not Available / Not Applicable |
| 12.27 | Do you / does your entity have customers whose spending or transactional behaviour makes it difficult to establish 'normal', or expected patterns of behaviour? | No / Yes / Not Available |

Politically Exposed Persons ("PEPs")

**as defined in Regulation 2 of the PMLFTR*

Please provide the following information based on your / your entity's customers and beneficial owners that are PEPs as at end of prior calendar year:

| | | |
|-------|--|---|
| 12.28 | Of the total number of customers who are natural persons, how many were PEPs (including family members and close associates) as at the end of the prior calendar year? | [Number] / Not Available |
| 12.29 | Of the total number of customers who are legal entities, how many of their BOs were PEPs (including family members and close associates) as at the end of the prior calendar year? | [Number] / Not Available |
| 12.30 | Please provide a breakdown of the total number of PEPs in your / your entity's customer base as at the end of the prior calendar year: | |
| | a) % of Maltese PEPs (including BOs) | [%] / Not Available |
| | b) % of PEPs (including BOs) from EU or EEA jurisdictions (other than Malta) | [%] / Not Available |
| | c) % of PEPs (including BOs) from non-EU / EEA jurisdictions | [%] / Not Available |
| 12.31 | Does your entity have, as at the end of the prior calendar year, PEPs who obtained their PEP status from a jurisdiction listed in the FATF lists and / or EU list identifying high risk 3rd countries with strategic deficiencies and / or the jurisdictions featuring in the top 20 countries of the Basel Index? | No / Yes / Not Available |
| 12.32 | If your answer to the above question was "YES", please select the respective jurisdictions. | Select from drop down list / Not Available / Not Applicable |

13 Geography

Residence of Customers

Residence refers to the customer's principal country of residence or for a legal person, the principal place of business.

Please provide the following information based on your / your entity's customers as at end of prior calendar year:

| | | |
|-------|--|---|
| 13.01 | What percentage of total customers are resident or otherwise incorporated or their principal place of business is in Malta? | [%] / Not Available / Not Applicable |
| 13.02 | What percentage of total customers are resident or otherwise incorporated or their principal place of business is in an EU / EEA jurisdiction outside Malta? | [%] / Not Available / Not Applicable |
| 13.03 | What percentage of total customers are resident or otherwise incorporated or their principal place of business is in a non-EU / EEA jurisdiction? | [%] / Not Available / Not Applicable |
| 13.04 | Did your entity, based on the prior calendar year, have customers who were resident or otherwise incorporated or their principal place of business is in a jurisdiction listed in the FATF lists, EU list identifying high risk 3rd countries with strategic deficiencies and / or the jurisdictions featuring in the top 20 countries of the Basel Index? | No / Yes / Not Available |
| 13.05 | If your answer to the above question was "YES", please select the respective jurisdictions. | Select from drop down list / Not Available / Not Applicable |

Residence of Bos

"Beneficial owner" (BO) refers to the natural person(s) who ultimately owns or controls a customer and / or the natural person on whose behalf a transaction is being conducted. It also includes those persons who exercise ultimate effective control over a legal person or arrangement.

Please provide the following information regarding the BOs of your customers as of end of prior calendar year

| | | |
|-------|--|---|
| 13.06 | What percentage of your customer's BOs are resident in Malta? | [%] / Not Available / Not Applicable |
| 13.07 | What percentage of your customer's BOs are foreign and resident in an EU or EEA jurisdiction outside Malta? | [%] / Not Available / Not Applicable |
| 13.08 | Please list the % of your customer's BOs who are foreign and are resident in a non-EU / EEA member state jurisdiction. | [%] / Not Available / Not Applicable |
| 13.09 | Did your entity have customers, based on the prior calendar year, whose BOs are resident in a jurisdiction listed in the FATF lists and / or the EU list identifying high risk 3rd countries with strategic deficiencies and / or jurisdictions featuring in the top 20 countries of the Basel Index during the prior calendar year? | No / Yes / Not Available / Not Applicable |
| 13.10 | If your answer to the above question was "YES", please select the respective jurisdictions. | Select from drop down list / Not Available / Not Applicable |

Transactions / Payments

Please indicate the total number and value of incoming and outgoing payment transactions carried out on behalf of your customers during the prior calendar year:

*In this context, payments only refer to transfers of funds and to transactions to and from customers. Therefore, transactions with other financial institutions should not be taken into account, unless these transactions were undertaken on behalf of customers in the context of correspondent activity.

| | | |
|-------|---|---|
| 13.11 | Incoming domestic payment transactions: | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 13.12 | Outgoing domestic payment transactions: | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |

| | | |
|-------|--|---|
| | b) Value | [€] / Not Available / Not Applicable |
| 13.13 | Incoming international payment transactions received from payment accounts in EU or EEA jurisdictions during the prior calendar year. | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 13.14 | Outgoing international payment transactions remitted to payment accounts in EU or EEA jurisdictions during the prior calendar year. | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 13.15 | Incoming international payment transactions received from payment accounts in non-EU / EEA jurisdictions during the prior calendar year | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 13.16 | Outgoing international payment transactions remitted to payment accounts in non-EU or EEA jurisdictions during the prior calendar year. | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 13.17 | Incoming payments received from payment accounts in jurisdictions listed in the FATF lists and / or the EU list identifying high risk 3rd countries with strategic deficiencies and / or the jurisdictions featuring in the top 20 countries of the Basel Index. | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 13.18 | Outgoing payments remitted to payment accounts in jurisdictions listed in the FATF lists and / or the EU list identifying high risk 3rd countries with strategic deficiencies and / or the jurisdictions featuring in the top 20 countries of the Basel Index. | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 13.19 | In relation to the results reported in the prior 4 questions, please select the respective jurisdictions. | Select from drop down list / Not Available / Not Applicable |

Please indicate the total number and value of payment transactions during the prior calendar year, where each individual payment or a series of payments that appear to be linked, amounted to € 500,000 or more:

*In this context, payments only refer to transfers of funds and to transactions to and from customers. Therefore, transactions with other financial institutions should not be taken into account, unless these transactions were undertaken on behalf of customers in the context of correspondent activity.

| | | |
|-------|---|---|
| 13.20 | Incoming payments received from payment accounts in Malta: | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 13.21 | Outgoing payments remitted to payment accounts in Malta: | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 13.22 | Incoming payments received from payment accounts in EU / EEA jurisdictions: | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 13.23 | Outgoing payments remitted to payment accounts in EU / EEA jurisdictions: | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 13.24 | Incoming payments received from payment accounts in non-EU / EEA jurisdictions: | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 13.25 | Outgoing payments remitted to payment accounts in non-EU / EEA jurisdictions: | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |
| 13.26 | Incoming payments received from payment accounts in jurisdictions listed in the FATF lists, EU list identifying high risk 3rd countries with strategic deficiencies and / or the jurisdictions featuring in the top 20 countries of the Basel Index during the prior calendar year. | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |

| | | |
|-------|--|---|
| 13.27 | Outgoing payments to payment accounts in jurisdictions listed in the FATF lists, EU list identifying high risk 3rd countries with strategic deficiencies and / or the jurisdictions featuring in the top 20 countries of the Basel Index during the prior calendar year. | |
| | a) Volume (number of transactions) | [Number] / Not Available / Not Applicable |
| | b) Value | [€] / Not Available / Not Applicable |

| | |
|-----------|--|
| 14 | Interface/Distribution Channels |
|-----------|--|

Please provide the following information regarding your entity's customers as at end of the prior calendar year:

| | | |
|-------|---|--------------------------------------|
| 14.01 | Of the total number of customers, what percentage were onboarded on a non-face-to-face basis? | [%] / Not Available / Not Applicable |
|-------|---|--------------------------------------|

Please provide the following information regarding your entity's customers who were onboarded on a non-face-to-face basis (as indicated in the previous question):

| | | |
|-------|--|--------------------------------------|
| 14.02 | Of those onboarded on a non-face-to-face bases, what percentage of customers were introduced by an entity in a EU or EEA jurisdiction? | [%] / Not Available / Not Applicable |
| 14.03 | Of those onboarded on a non-face-to-face bases, what percentage of customers were introduced by an entity in a non-EU / EEA jurisdiction? | [%] / Not Available / Not Applicable |
| 14.04 | Does your entity have any agents located in a jurisdiction other than Malta? | No / Yes / Not Applicable |
| 14.05 | If yes, how many of your agents are located outside of Malta? | [Number] / Not Applicable |
| 14.06 | What was the value of payment transactions carried out by the agents located outside of Malta? | [€] / Not Available / Not Applicable |
| 14.07 | Does your entity offer the possibility to customers to access and make use of its services and products through remote electronic communication channels (internet banking, mobile banking etc)? | No / Yes |
| 14.08 | Does your entity have any reliance agreements in place in terms of Regulation 12 of the PMLFTR? | No / Yes |
| 14.09 | Were there any new delivery channels used during the prior calendar year? | No / Yes |
| 14.10 | If "yes", please specify the type of new delivery channels used. | [Text] / Not Applicable |