

|      | Financial Intelligence Analysis Unit<br>Risk Evaluation Questionnaire  | Designated Non Finan<br>Trustees and Fiduciari | cial Businesses and Professions Sector<br>es   |
|------|--|--|--|
|      | General remarks from the subject person:   |  |  |
|      | As indicated in the Guidance for Completion of the Anti-Money Laundering and Countering the<br>Financing of Terrorism Risk Evaluation Questionnaire, sole practitioners and entities should, for<br>each of the questions included in this questionnaire, choose the answer option that is best<br>suited to them/ their internal organization.<br>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<br>is therefore important to select an option that is a true reflection<br>actual situation within your entity and that can be justified later<br>In the text box below, you can formulate general remarks on the  | on of your actual situation / the<br>r on.     | [Text]   |
|      | your entity. Please note that these general remarks are not take<br>automated analysis of your / your entity's answers.  |  |  |
|      | Subject Person Information   |  |  |
|      |  |  |  |
| 1.01 | Please select the legal formation of your entity.  |  | Public Limited Company / Private Limited Company / Civil<br>Partnership / Commercial Partnership / Self-employed / Branc<br>of a Foreign entity / Association / Other  |
| 1.02 | If "Other", please specify.  |  | [Text] / Not Applicable  |
| 03   | Please select the status of your entity.   |  | Subsidiary of a foreign traded company / Subsidiary of a<br>privately held foreign company / Subsidiary of a local traded<br>company / Subsidiary of a privately held local company /<br>Privately held company / Branch of a regulated entity / Listed<br>company / Other |
| 04   | If "Other", please specify.  |  | [Text] / Not Applicable  |
| 05   | If your entity is a subsidiary of a foreign traded company or a su<br>foreign company, is the parent company located in EU / EEA jur<br>jurisdictions?   | , , ,  | EU / EEA jurisdictions / non-EU / EEA jurisdictions / Not<br>Applicable  |
| .06  | Please indicate total annual turnover according to the latest ava<br>statements and / or tax declaration.  | ailable audited financial                      | [€] / Not Applicable   |
| .07  | Please provide the year end reference date for the financial stat<br>indicated above.  | tements or tax declaration as                  | [Date] / Not Applicable  |
| .08  | Please indicate the total number of employees (including partner<br>associates and staff), expressed in full time equivalents ("FTEs")<br>at the end of the prior calendar year.   |  | [Number] / Not Available / Not Applicable  |
| .09  | How many years experience in this industry do you / does the p   | rincipal(s) and / or partners and /            | 10 or more years / Between 5-9 years / Between 3-4 years /   |



| 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  |  |
| 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]  |  |
| 1.14 | Does your entity have any subsidiaries, branches, affiliates, representative offices and agencies<br>in jurisdictions listed in the FATF lists and / or the EU list identifying high risk 3rd countries with<br>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 | Does your entity have nominee shareholders in its ownership structure?  | No / Yes  |  |
| 1.18 | If "Yes", what percent of the total shares are held by nominee shareholders?  | [%] / Not Applicable  |  |
| 1.19 | Has your entity undergone changes in its ownership structure during the prior calendar year?  | No / Yes  |  |
| 1.20 | Has your entity undergone significant changes in its management and control structure during the prior calendar year?   | No / Yes  |  |
| 1.21 | Please ATTACH a copy of the ownership and control structure of your entity (optional).  | File Upload / Not Applicable  |  |
|      |   |   |  |
| 2    | Governance  |   |  |
| 2.01 | When was the current MLRO appointed?  | More than 2 years ago / Between 1-2 years ago / Less than 1<br>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 /<br>Less than 1 year |  |
| 2.02 | How many staff members, expressed as ETEs, are part of the AMIL / CET team (if one evicts)?   | [Number] / Not Available / Not Applicable                                       |  |

 2.03
 How many staff members, expressed as FTEs, are part of the AML / CFT team (if one exists)?
 [Number] / Not Available / Not Applicable

 2.04
 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



| Do you / does your entity implement appropriate procedures (including obtaining a police<br>conduct or equivalent upon hiring) and assess the conduct and integrity of employees (including<br>partners and directors) handling relevant financial business or relevant activity? | No / Yes / Not Applicable   |
|---|---|
| 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  |
| b) Subject of negative news reports (if known)  | No / Yes  |
| 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  |
| 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<br>outside Group)   |
| If "Yes", please specify the obligations that are being outsourced.   | Business Risk Assessment / Customer Risk Assessment /<br>Customer Due Diligence / On-going monitoring / Record keeping<br>/ Not Applicable  |
| 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<br>Applicable   |
|   | <ul> <li>conduct or equivalent upon hiring) and assess the conduct and integrity of employees (including partners and directors) handling relevant financial business or relevant activity?</li> <li>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: <ul> <li>a) Regulatory enforcement actions, criminal investigations for ML / FT or any other financial crime</li> <li>b) Subject of negative news reports (if known)</li> </ul> </li> <li>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?</li> <li>Have you / your entity outsourced the carrying out of any applicable AML / CFT obligations (within or outside the group)?</li> <li>If "Yes", please specify the obligations that are being outsourced.</li> </ul> |

## 3 Business Risk Assessment

| 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 |
|      | 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                        |
| 3.04 | 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  |
|          |   |  |
| 4        | Customer Acceptance and Risk Assessment   |  |
| <u>.</u> |   |  |
| 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<br>Applicable                 |
|          | Please indicate, for all your customers where an occasional transaction is carried out, 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 when risk is not low / Yes only when risk is high / Yes,<br>always / Not Applicable |
| 4.02     | 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,<br>always / Not Applicable |
|          | c) Information on the PEP status of the customer and, where applicable of the beneficial owner  | No / Yes when risk is not low / Yes only when risk is high / Yes,<br>always / Not Applicable |
|          | d) Information on the overall wealth of the customer (nature of activities conducted and corresponding level of income or turnover, other income streams)   | No / Yes when risk is not low / Yes only when risk is high / Yes,<br>always / Not Applicable |
|          | e) Information on the expected source and origin of the funds and / or assets transacted by the customer / on behalf of the customer  | No / Yes when risk is not low / Yes only when risk is high / Yes,<br>always / Not Applicable |
|          | 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<br>legal persons) including: name, nationality / country of incorporation or registration, country<br>of residence, registered office or main place of business | No / Yes / Not Applicable  |
| 4.03     | 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,<br>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  |
| P        |   |  |



| 4.04 | 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,<br>always / Not Applicable |
|------|--|--|
|      | Please indicate whether for all your customers or depending on risk, you / your entity collects the following:   |  |
| 4.05 | a) Nature and extent of the beneficial interest/s held   | No / Only for high risk / Yes  |
|      | b) Any other person exercising ultimate control over the trust   | No / Only for high risk / Yes  |
|      | Please indicate whether for all your customers or depending on risk, you / your entity performs due diligence (identification and verification where possible) on the following:   |  |
| 4.06 | a) The settlor(s)  | No / Only for high risk / Yes  |
|      | b) The protector(s)  | No / Only for high risk / Yes  |
|      | c) The beneficiary(ies) and any UBOs (should the beneficiary be a legal person)  | No / Only for high risk / Yes  |
| 4.07 | Did you / your entity acquire new clients through an introducer/s in the prior calendar year?  | No / Yes   |
| 4.08 | If "yes", please indicate the number of introducers used during the prior calendar year.   | [Number] / Not Available / Not Applicable  |
| 4.09 | 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<br>Available / Not Applicable       |
| 4.10 | Do your / your entity's policies and procedures require you to ask each customer if they are acting on behalf of someone else?   | No / Yes   |
| 4.11 | Do you / your entity's policies and procedures require enhanced due diligence to be applied in higher risk situations?   | No / Yes   |
| 4.12 | Do your / your entity's policies and procedures require enhanced due diligence to be applied where the customer or beneficial owner is a PEP?  | No / Yes when risk is not low / Yes only when risk is high / Yes,<br>always                    |
|      | 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  |
| 4.13 | 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                                  |
|------|---|--|
|      | What kind of measures do you / your entity make use of to determine the PEP status of a customer (beneficial owner/s)?  |  |
| 4.14 | a) Rely on publicly available information   | No / Yes   |
|      | b) Obtain information directly from the customer or BO  | No / Yes   |
|      | c) Use commercial databases   | No / Yes   |
| 4.15 | Do policies and procedures allow for a variation of the timing of due diligence for lower risk customers and where SDD may be applied?  | No / Yes   |
|      | If variation in the timing of due diligence is permitted as indicated above, what pre-determined triggering criteria is applied?  |  |
| 4.16 | a) Transaction, customer activity threshold   | No / Yes / Not Applicable                                  |
|      | b) Pre-determined time frame  | No / Yes / Not Applicable                                  |
|      | c) Prior to completion of service provided  | No / Yes / Not Applicable                                  |
| 4.17 | Save for the application and variation in timing under SDD (as per your / your entity's policies and procedures), when due diligence is not complete but activity has begun or is complete, do the customer files include a documented justification and formal approval of the exception?  | No / Yes   |
| 4.18 | Where customer due diligence cannot be completed, do the policies and procedures require you<br>/ your entity to consider whether there is a need to file a STR with the FIAU and only proceed<br>with the cancellation / termination of the business relationship / service, once it is determined<br>that there is no suspicion justifying the filing of a STR? | No / Yes, except where CDD can be delayed as per IPs / Yes |
| 4.19 | Do policies and procedures require due diligence (including customer risk assessment) to be<br>repeated when there are doubts about the completeness, reliability or accuracy on priorly<br>obtained customer identification information, data or documentation?  | No / Yes   |
| 4.20 | 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   |
| 4.21 | 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    |
| 4.22 | Do policies and procedures require due diligence to be applied when there is a change in ownership structure and beneficiaries?   | No / Yes   |
| 4.23 | Is your monitoring system able to detect the expiry of due diligence documentation and any conflicting information in relation to customer data?  | No / Yes   |
| 4.24 | 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   |



| 5    | Ongoing Monitoring   |  |
|------|--|--|
|      |  |  |
| 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 ,<br>Every 2-3 years / More than every 3 years / Never / Not<br>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 /<br>More than every 3 years / Never / Not Available / Not Applicable                      |
| 5.03 | Do you / does your entity have an automated transaction monitoring system or is transaction monitoring performed manually?   | Transaction monitoring occurs by means of a system /<br>Transaction monitoring occurs manually / Combination of both /<br>Not Applicable                   |
| 5.04 | Do you / does your entity verify the legitimacy of the business or economic reasons for the structure you are / your entity is asked to set up and / or manage?  | No / Yes / Not Applicable  |
| 5.05 | 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   |
| 5.06 | Where a business relationship is formed, do you / does your entity scrutinise transactions undertaken which are not consistent with knowledge of the customer, its business and its risk profile?  | No / Yes depending on risk / Yes always / Not Applicable   |
| 5.07 | 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  |
| 5.08 | Are you or your entity aware of any of your customers whose assets were frozen, confiscated or seized?   | No / Yes / Not Applicable  |
| 5.09 | 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  |
| 5.10 | 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  |
| 6    | Policies and Procedures  |  |
| 6    | Policies and Procedures  |  |
| 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<br>/ Every 3 or more years  |
| 6.04 | Do you / do your entity's procedures provide for measures to determine whether customers<br>and, where applicable, their beneficial owners, are politically exposed persons (PEPs) or PEPs'<br>family members or close associates, prior to commencement of service? | No / Yes   |



| F    |  |  |
|------|--|--|
| 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   |
| 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 | Do you / does your entity have policies, procedures and measures to follow up on incomplete documentation from the customer file?  | No / Yes / Not Applicable  |
|      | In case of business relationships, do your / your entity's policies and procedures require you to:   |  |
| 6.08 | a) systematically monitor, on a risk basis, customer activity, deals, or transactions  | No / Yes / Not Applicable  |
|      | b) perform a more detailed review when unusual activity / transactions are detected  | No / Yes / Not Applicable  |
| 6.09 | 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   |
| 6.10 | 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<br>Applicable   |
| 6.11 | Do you / does your entity have policies and procedures in place to assess the AML / CFT compliance framework of your intermediaries / agents / introducers?  | No / Yes / Not Applicable  |
| 6.12 | Does your entity have internal whistleblowing procedures?  | No / Yes / Not Applicable  |
| -    | Internal Audit / Independent Testing   |  |
| /    |  |  |
| 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<br>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<br>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,<br>independent officer at management level / Yes, external<br>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<br>/ Every 3 or more years / As needed / No reviews performed /<br>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<br>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 /<br>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  |
| 7.08 | How many "high risk" audit issues are currently open (relating to AML / CFT)?  | [Number] / Not Available / Not Applicable  |
| 7.09 | If you / your entity outsourced the carrying out of any applicable AML / CFT obligations (within<br>or outside the Group), have you / your entity defined a policy or procedure for testing the<br>quality of the outsourced tasks?                              | No / Yes / Not Applicable  |
| 7.10 | 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<br>last 12 months / Within the last 2 years / Within the last 3 years<br>/ Over 3 years ago / Never / 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 non-EU / EEA jurisdiction?               | Within the last 3 months / Within the last 6 months / Within the<br>last 12 months / Within the last 2 years / Within the last 3 years<br>/ Over 3 years ago / Never / Not Applicable        |
|      |  |  |
| 8    | Reporting  |  |
|      |  |  |
| 8.01 | Do you / does your entity have policies and procedures regarding the reporting of suspicious activity or transactions?   | No / Yes   |
| 8.02 | Please list the number of alerts / transactions you / your entity investigated as a result of unusual activity or transactions during the prior calendar year?   | [Number] / Not Available / Not Applicable  |
| 8.03 | Were there any "internal reports" or "alerts", received during prior calendar year, which were analysed by the MLRO but did not instigate a STR?   | No measures relating to internal reporting or alerts are in place /<br>Yes less than 10 / Yes more than 10 / No, all instigated STRs /<br>Not Available / Not Applicable                     |
| 8.04 | 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<br>place / No internal reports submitted / Only internal reports<br>maintained / Yes, internal report & analysis maintained |
| 8.05 | 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   |  |
|      |  |  |
| 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<br>/ 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  |
|      |  |  |



| 9.04  | Please provide the % of board members / partners that received AML / CFT training throughout the prior calendar year.  | [%] / Not Available   |
|-------|--|---|
| 9.05  | 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   |
|       | 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:  |   |
| 9.06  | 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   |
| 9.07  | 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  |
| 9.08  | 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<br>years ago / Never / Not Applicable |
| 10    | Record Keeping   |   |
| 10    |  |   |
| 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?<br>*If you / your entity received reminders or requested extensions for deadlines imposed by the FIAU, do not mark as [yes, always]. | No / Depending on the request / Yes always / Yes most of the<br>time                                |
|       | Developed and formione   |   |
| 11    | Products and Services  |   |
|       | Please answer the following questions in relation to the activities that have been performed by you / your entity during the prior calendar year. Multiple activities are possible.  |   |
| 11.01 | How many trusts did your entity act as trustee / fiduciary for during the period calendar year?  | [Number] / Not Available / Not Applicable   |
| 11.02 | List the total value ( ${f \varepsilon}$ ) of the assets held under trust as of end of prior calendar year   | [€] / Not Available / Not Applicable  |
| 11.03 | List the number of customers for which your entity provided fiduciary services   | [Number] / Not Available / Not Applicable   |
| 11.04 | List the number of customers for which your entity provided trustee services   | [Number] / Not Available / Not Applicable   |
| 11.05 | List the number of foundations for which your entity acted as an administrator   | [Number] / Not Available / Not Applicable   |
| 1     |  |   |
|       | Please indicate the following for family trusts:   |   |



| 11.06 | a) List the number of trusts for which your entity acted as a trustee / fiduciary during the prior calendar year   | [Number] / Not Available / Not Applicable |
|-------|--|---|
|       | b) List the total value (€) of the assets held under management as at the end of the prior calendar year   | [€] / Not Available / Not Applicable      |
|       | With regards to Article 43(12)(b) of the Trusts and Trustees Act, please indicate the following:   |   |
| 11.07 | a) List the number of foundations that you administered during the prior calendar year   | [Number] / Not Available / Not Applicable |
|       | b) List the total value (€) of the assets held under management as at the end of the prior calendar year   | [€] / Not Available / Not Applicable      |
|       | Please indicate the following for qualified persons:   |   |
| 11.08 | a) List the number of qualified person appointments during the prior calendar year   | [Number] / Not Available / Not Applicable |
|       | b) List the total value (€) of the assets (represented by the trusts where there were qualified person appointments referred to above) held under trust or under management as at the end of the prior calendar year | [€] / Not Available / Not Applicable      |

## Assets held on trust

| 11.09 | For how many trusts does your entity act as trustee where the value of the assets settled on trust does not exceed EUR 1 million?              | [Number] / Not Available / Not Applicable |
|-------|--|---|
| 11.10 | For how many trusts does your entity act as trustee where the value of the assets settled on trust is between EUR 1 million and EUR 5 million? | [Number] / Not Available / Not Applicable |
| 11.11 | For how many trusts does your entity acts as trustee where the value of the assets settled on trust exceeds EUR 5 million?                     | [Number] / Not Available / Not Applicable |
| 11.12 | What is the highest value of the assets settled on trust where your entity acts as trustee?  | [€] / Not Available / Not Applicable      |
| 11.13 | What is the total number of properties held on trust where your entity acts as trustee?  | [Number] / Not Available / Not Applicable |
| 11.14 | What is the total value of the properties held on trust where your entity acts as trustee?   | [€] / Not Available / Not Applicable      |
| 11.15 | What is the total number of bank accounts held on trust where your entity acts as trustee?   | [Number] / Not Available / Not Applicable |
| 11.16 | What is the total value of bank accounts held on trust where your entity acts as trustee?  | [€] / Not Available / Not Applicable      |
| 11.17 | What is the total number of securities held on trust where your entity acts as trustee?  | [Number] / Not Available / Not Applicable |



| 11.18 | What is the total value of securities held on trust where your entity acts as trustee?   | [€] / Not Available / Not Applicable      |
|-------|--|---|
|       | Administration of assets   |   |
| 11.19 | How many foundations does your entity administer where the total value of the assets of the foundation does not exceed EUR 1 million?              | [Number] / Not Available / Not Applicable |
| 11.20 | How many foundations does your entity administer where the total value of the assets of the foundation is between EUR 1 million and EUR 5 million? | [Number] / Not Available / Not Applicable |
| 11.21 | How many foundations does your entity administer where the total value of the assets of the foundation exceeds EUR 5 million?                      | [Number] / Not Available / Not Applicable |
| 11.22 | What is the highest value of the assets of the foundation which your entity administers?   | [€] / Not Available / Not Applicable      |
|       |  |   |
| 12    | Customers  |   |
|       |  |   |
| 12.01 | 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                  |
| 12.02 | Please list the total number of customers for whom your entity carried out an occasional transaction during the prior calendar year.               | [Number] / Not Available                  |
| 12.03 | Please list the total number of new customers onboarded during the prior calendar year.  | [Number] / Not Available                  |
|       | Customer Type  |   |
|       | 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:            |   |
| 1     |  |   |

| 12.04 | 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-<br>for-profit entities   | [%] / Not Available      |
| 12.05 | 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 |
|       | Of the total number of customers, please specify:  |                          |



|       | a) % of customers scored / rated as "High Risk"   | [%] / Not Available                       |
|-------|---|---|
| 12.00 | b) % of customers scored / rated as "Medium High Risk"  | [%] / Not Available                       |
| 12.06 | 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                       |
| 12.07 | Does a percentage of your customer base have a risk rating outside of the "high", "medium" and<br>"low" categories?   | No / Yes                                  |
| 12.08 | If "Yes", please specify any additional risk rating.  | [Text] / Not Applicable                   |
| 12.09 | Please specify the corresponding % of customers of the risk rating stated above.  | [%] / Not Available / Not Applicable      |
| 12.10 | Do you / does your entity have customers (including BO's, directors) who have been convicted of<br>a criminal offence that could have potentially generated proceeds?                                 | No / Yes                                  |
| 12.11 | Do you / does your entity hold funds on trust, or in another fiduciary capacity for customers through a client account?   | No / Yes                                  |
| 12.12 | Do you / your entity have customers that act as holding companies with subsidiaries or investments in non-EU / EEA jurisdictions?   | No / Yes / Not Available                  |
| 12.13 | Do you / does your entity have customers (legal entities) which are shell companies?  | No / Yes / Not Available                  |
| 12.14 | Do you / does your entity have customers who raised capital through Initial Coin Offerings<br>(ICOs), Securitised Coin Offerings (SCOs) and / or crowdfunding?  | No / Yes / Not Available                  |
| 12.15 | Do you / does your entity have express trusts with an unexplained nature of classes of<br>beneficiaries and acting as trustees of such a trust?   | No / Yes / Not Available                  |
| 12.16 | Please list the number of customers that are foundations, charities or other not-for-profit entities.   | [Number] / Not Available / Not Applicable |
| 12.17 | Please list the number of customers that operate cash intensive businesses.   | [Number] / Not Available / Not Applicable |
| 12.18 | Please list the number of customers that held virtual financial assets or carried out transactions (receipts or payments) through the use of virtual financial assets during the prior calendar year. | [Number] / Not Available / Not Applicable |
| 12.19 | Please list the number of customers that are VFA agents or VFA license holders or are in the process of obtaining a VFA license.  | [Number] / Not Available / Not Applicable |
| 12.20 | To the best of your knowledge, do you / does your entity have customers with no address or multiple addresses without any legitimate reasons?   | No / Yes / Not Available                  |



| 12.21 | Do any of your customers use financial intermediaries located in a jurisdiction listed in the FATF<br>lists and / or EU list identifying high risk 3rd countries with strategic deficiencies and / or the<br>jurisdictions featuring in the top 20 countries of the Basel Index?   | No / Yes / Not Available                                    |
|-------|--|---|
| 12.22 | If your answer to the above question was "Yes", please select the respective jurisdictions.  | Select from drop down list / Not Available / Not Applicable |
| 12.23 | Please list the number of customers whereby the independent audit opinion expressed in the last financial statements is either a qualified opinion, an adverse opinion or a disclaimer of opinion.   | [Number] / Not Available / Not Applicable                   |
| 12.24 | Please indicate the number of customer relationships which are structured in such a way that they can be used in different jurisdictions (for example through the use of offshore companies), particularly in jurisdictions associated with higher ML / FT risk.   | [Number] / Not Available / Not Applicable                   |
| 12.25 | Please list the number of customers who are operating in high-risk industries (as designated by your policies and procedures).   | [Number] / Not Available / Not Applicable                   |
| 12.26 | 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 / Not Applicable                   |
| 12.27 | Did you / your entity have any customers that were re-domiciled or whose economic activity was transferred to 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 in the prior calendar year? | No / Yes / Not Available                                    |
| 12.28 | If your answer to the above question was "YES", please select the respective jurisdictions.  | Select from drop down list / Not Available / Not Applicable |

PEPs

| 12.29 | Of the total number of customers who are natural persons, how many were PEPs (including family family members and close associates) as at the end of the prior calendar year?  | [Number] / Not Available                  |
|-------|--|---|
| 12.30 | Of the total number of customers who are legal entities, how many of their BOs were PEPs<br>(including family family members and close associates) as at the end of the prior calendar year?   | [Number] / Not Available                  |
|       | 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:   |   |
| 12.31 | a) % of Maltese PEPs (including BOs)   | [%] / Not Available / Not Applicable      |
|       | b) % of PEPs (including BOs) from EU or EEA jurisdictions (other than Malta)   | [%] / Not Available / Not Applicable      |
|       | c) % of PEPs (including BOs) from non-EU / EEA jurisdictions   | [%] / Not Available / Not Applicable      |
| 12.32 | Do you / your entity have, as at the end of the prior calendar year, PEPs from jurisdictions listed<br>in the FATF lists and / or in the EU list identifying high risk 3rd countries with strategic<br>deficiencies and / or the jurisdictions featuring in the top 20 countries of the Basel Index? | No / Yes / Not Available / Not Applicable |



| 12.33 | 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 your / your entity's 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 your / your entity's total customers are foreign and resident or otherwise incorporated or their principal place of business is in an EU or EEA jurisdiction outside Malta?   | [%] / Not Available / Not Applicable                        |
| 13.03 | What percentage of your / your entity's total customers are foreign and resident, or otherwise incorporated or their principal place of business, in a non-EU / EEA jurisdiction?  | [%] / Not Available / Not Applicable                        |
| 13.04 | Did you / your entity have customers, based on the prior calendar year, who are resident or otherwise incorporated or their principal place of business is in a jurisdiction listed in the FATF lists and / or in 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? | 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 |
| 13.06 | Do any of your customers provide goods / services (main markets) in or to, a jurisdiction 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?   | No / Yes / Not Available                                    |
| 13.07 | 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<br>customer and/or the natural person on whose behalf a transaction is being conducted. It also<br>includes those persons who exercise ultimate effective control over a legal person or<br>arrangement.   |   |
|       | Please provide the following information regarding the BOs of your entity's customers as at end of the prior calendar year:  |   |
| 13.08 | What % of your / your entity's customers' BOs are resident in Malta?   | [%] / Not Available / Not Applicable                        |
| 13.09 | What % of your / your entity's customers' BOs are foreign and resident in an EU or EEA<br>jurisdiction outside Malta?  | [%] / Not Available / Not Applicable                        |



| 13.10 | What % of your / your entity's customers' BOs are foreign and resident in a non-EU / EEA member state jurisdiction?   | [%] / Not Available / Not Applicable                        |
|-------|---|---|
| 13 11 | Did you / your entity' s customers, based on the prior calendar year, have BOs who are resident<br>in a jurisdiction listed in the FATF lists and / or the EU list identifying high risk 3rd countries with<br>strategic deficiencies and / or the jurisdictions featuring in the top 20 countries of the Basel<br>Index? | No / Yes / Not Available / Not Applicable                   |
| 13.12 | If your answer to the above question was "YES", please select the respective jurisdictions.   | Select from drop down list / Not Available / Not Applicable |

## Transactions

|       | -  |   |
|-------|--|---|
|       | What volume and amount of payouts were made to beneficiaries based in Malta:   |   |
| 13.13 | a) Total volume (#)  | [Number] / Not Available / Not Applicable |
|       | b) Total value (€)   | [€] / Not Available / Not Applicable      |
|       | What volume and amount of payouts were made to beneficiaries based in EU / EEA jurisdiction:   |   |
| 13.14 | a) Total volume (#)  | [Number] / Not Available / Not Applicable |
|       | b) Total value (€)   | [€] / Not Available / Not Applicable      |
|       | What volume and amount of payouts were made to beneficiaries based in non-EU / EEA jurisdiction:   |   |
| 13.15 | a) Total volume (#)  | [Number] / Not Available / Not Applicable |
|       | b) Total value (€)   | [€] / Not Available / Not Applicable      |
|       | What volume and amount of payouts were made to beneficiaries based 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: |   |
| 13.16 | a) Total volume (#)  | [Number] / Not Available / Not Applicable |
|       | b) Total value (€)   | [€] / Not Available / Not Applicable      |
|       | Please list the number of foundations within your customer base that:  |   |
|       | a) pay out to beneficiaries of the foundations that are located in Malta   | [Number] / Not Available / Not Applicable |
| 13.17 | b) pay out to beneficiaries of the foundations that are located in EU / EEA jurisdictions  | [Number] / Not Available / Not Applicable |
| 13.1/ | c) pay out to beneficiaries of the foundations that are located in non-EU / EEA jurisdictions  | [Number] / Not Available / Not Applicable |



|       | d) pay out to beneficiaries of the foundations that are located 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 | [Number] / Not Available / Not Applicable                   |
|-------|--|---|
|       | Location of assets   |   |
|       | Please list the number of foundations within your customer base that:  |   |
|       | a) the assets held on trust are located in Malta   | [%] / Not Available / Not Applicable                        |
| 13.18 | b) the assets held on trust are located in EU / EEA jurisdictions  | [%] / Not Available / Not Applicable                        |
|       | c) the assets held on trust are located in non-EU / EEA jurisdictions  | [%] / Not Available / Not Applicable                        |
|       | d) the assets held on trust are located 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?                        | [%] / Not Available / Not Applicable                        |
| 13.19 | If assets held on trust are located in a jurisdiction as noted in the prior question, please select the respective jurisdictions.  | Select from drop down list / Not Available / Not Applicable |
|       | Foundations  |   |

|       | Where your entity holds shares in a fiduciary capacity in a foundation, please indicate the % shares held in foundations whose assets are located in:   |   |
|-------|---|---|
|       | a) Malta  | [%] / Not Available / Not Applicable                        |
| 13.20 | b) EU / EEA jurisdictions   | [%] / Not Available / Not Applicable                        |
|       | c) non-EU / EEA jurisdictions   | [%] / Not Available / Not Applicable                        |
|       | d) 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? | [%] / Not Available / Not Applicable                        |
| 13.21 | If assets held on trust are located in a jurisdiction as noted in the prior question, please select the respective jurisdictions.   | Select from drop down list / Not Available / Not Applicable |
|       | uterfees / Distribution Channels  |   |
| 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 % were onboarded or serviced on a non-face-to-face basis in the prior calendar year?   | [%] / Not Available / Not Applicable                        |
|       |   |   |



| 14.02 | Of those customers, who are legal persons and who were onboarded / serviced on a non-face-to-<br>face basis in the prior calendar year, indicate whether the majority are incorporated in Malta,<br>within EU / EEA or outside EU / EEA?   | Majority of non-face-to-face customers are incorporated in<br>Malta / Majority of non-face-to-face customers are<br>incorporated within EU/EEA / Majority of non-face-to-face<br>customers are incorporated outside EU/EEA / Not Available /<br>Not Applicable |
|-------|--|--|
| 14.03 | Of those customers who are natural persons and who were onboarded / serviced on a non-face-<br>to-face basis in the prior calendar year, indicate whether the majority of customers are resident<br>in Malta, within EU / EEA or outside EU / EEA?   | Majority of non-face-to-face customers are resident in Malta /<br>Majority of non-face-to-face customers are resident within<br>EU/EEA / Majority of non-face-to-face customers are resident<br>outside EU/EEA / Not Available / Not Applicable                |
| 14.04 | Did you / your entity on-board or service new clients introduced by agents or intermediaries, in the prior calendar year?  | No / Yes   |
| 14.05 | What % of customers were onboarded during the prior calendar year where a reliance arrangement was in place in terms of Regulation 12 of the PMLFTR?   | [%] / Not Available / Not Applicable   |
| 14.06 | What % of customers were introduced by an agent / broker / introducer from a jurisdiction listed<br>in the FATF lists and / or the EU list identifying high risk 3rd countries with strategic deficiencies<br>and / or the jurisdictions featuring in the top 20 countries of the Basel Index? | [%] / Not Available / Not Applicable   |
| 14.07 | If your answer to the above question was greater than 0, please select the respective jurisdictions.   | Select from drop down list / Not Available / Not Applicable  |