

## Know Your Customer & Anti-Money Laundering Questionnaire

As a part of our Anti-Money Laundering and Combatting the Financing of Terrorism policy, we're writing to our valued business partners to assist us in completing a questionnaire to comply with regulatory requirements. Therefore, we would greatly appreciate your kind cooperation to complete the following questions. Please be assured that the information you provide will be treated as **STRICTLY CONFIDENTIAL**.

Kindly send the responses of the Questionnaire to the attention of the Compliance Officer

by email to: [compliance@anadolubank.com.tr](mailto:compliance@anadolubank.com.tr)

1. GENERAL INFORMATION	
1.1. Name of Institution: ANADOLUBANK A.Ş.	
1.2. Legal Status:	<input type="checkbox"/> Public Limited Company <input checked="" type="checkbox"/> Joint Stock Company <input type="checkbox"/> Government Bank <input type="checkbox"/> Cooperative Bank <input type="checkbox"/> Savings Bank (under Special Law) <input type="checkbox"/> Others
1.3. Address:	
Principal Place Of Business:	SARAY MAH. TOYA SOK. NO:3 ÜMRANIYE-İSTANBUL
Location of the Head Office:	SARAY MAH. TOYA SOK. NO:3 ÜMRANIYE-İSTANBUL
1.4. Website:	<a href="https://www.anadolubank.com.tr/en/">https://www.anadolubank.com.tr/en/</a>
1.5. License:	a) Issued by: <b>The Prime Ministry Undersecretary of Treasury</b> b) Year of issuance: <b>1997</b> c) Registration / License Number: <b>B.02.1.HM.0.BAK.02.04/5222/631-39692</b> d) Is your bank authorized to hold foreign currency accounts outside of your country? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No e) Are there any restriction on this authorization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No f) Is your bank authorized to trade foreign exchange? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No g) Number of Domestic branches: <b>116</b> h) Number of Foreign branches: - i) Number of Employees: <b>1718</b>
1.6. Country of Incorporation	<b>TURKEY</b>
1.7. Date of establishment	<b>1997</b>
1.8. Affiliates, subsidiaries:	<b>Anadolubank Nederland N.V</b> <b>Anadolu Faktoring A.Ş.</b> <b>Anadolu Yatırım Menkul Kıymetler A.Ş.</b>

<b>1.9. Main Business:</b> (Retail banking, Corporate banking, Investment banking etc.)	<b>Commercial, retail and personal banking</b>
<b>1.10. Financial products &amp; services:</b> (What type of financial products and services does your bank offer to your customers?)	<b>Commercial, retail and personal banking services and products</b>
<b>1.11. Please describe your customers' major business segments.</b>  Do they include the following business?  (* Casinos, Real estate agents, Dealers in precious metals and precious stones, Money Service Business, Lawyers, Notaries, Other independent legal professionals and accountants, Trust and service providers	<b>Our customer structure consists of Private individual (77%) Corporations (23%)</b>  <b>SMEs are the bank's main target group.</b>
<b>1.12. List 5 key countries/jurisdiction your institution operates in and the percentage of business in each location.</b>	<b>TURKEY</b>
<b>1.13. Full Name of the Regulatory and Supervisory Authority</b>	<b>The regulatory body for AML/CFT issues is The Financial Crimes Investigation Board (FCIB), The regulatory body regarding Banking activities/laws/regulations is Banking Regulation and Supervision Agency (BRSA)</b>
<b>1.14. Name of external auditors</b>	<b>Deloitte</b>
<b>1.15. Please provide information regarding the purpose of your business relationship with our Bank</b>	
<b>1.16. Has your institution appointed a compliance officer for AML/KYC?</b>	<b>Yes</b>
<b>If yes</b> Name : Title : Phone Number :	<b>ALPER SERDAR HEAD OF COMPLIANCE 0090 216 6877000 compliance@anadolubank.com.tr</b>

e-mail address :

2. OWNERSHIP/MANAGEMENT STRUCTURE	YES	NO
2.1. Is the FI publicly owned?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.2. Is the FI able to issue bearer shares? If Yes, Has the FI issued bearer shares? What percentage of FI's total shares is composed of bearer shares?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.3. Is the FI listed on any stock exchange? If "YES", which one(s)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If "NO" please provide a list of the beneficial owners, each of whom individually directly or indirectly, owns, controls or has 10% or more of shares or voting rights of financial institution.

**Name: MEHMET RÜŞTÜ BAŞARAN**

**Percentage of ownership: 15.27%**

**Title (position): CHAIRMAN**

**Date of birth: 21-Feb-1947**

**Country of domicile: TURKEY**

2.4. Please list the names and titles of Executive Management:

Management Position	First Name	Middle Name	Last Name
General Manager (Member of Board) - CEO	Namık		Ülke
Executive Vice President- Information Technologies	Tunc		Bergsan
Executive Vice President-Operations - COO	Kursad		Orhun
Executive Vice President-International Banking	Merih		Yurtkuran
Executive Vice President-Loan Allocation	İsmail	Atakan	Özgüney
Executive Vice President-Financial Affairs - CFO	Ferudun		Canbay
Executive Vice President-Loan Monitoring	Ali	Tunc	Doroz
Executive Vice President-Corporate & Commercial	Ahmet		Yiğit
Executive Vice President-SME & Agricultural	Zafer		Can
Executive Vice President-Treasury	Zeki	Murat	Ural

2.5. Please list the names of members of the board of directors?

Management Position	First Name	Middle Name	Last Name
UBO / BOD / Chairman/ Authorized Signer	Mehmet	Rüştü	Başaran
General Manager (Member of Board) - CEO	Namık		Ülke
Member of Board of Directors	Fikriye	Filiz	Haseski
Member of Board of Directors	Suat		İnce
Member of Board of Directors	Erol	Başaran	Altıntug
Member of Board of Directors	Yusuf		Gezgor
Member of Board of Directors	İbrahim	Sencan	Derebeyoğlu

2.6 Please provide a list of Beneficial Owners owning 10% or greater share capital

Name: MEHMET RÜŞTÜ BAŞARAN  
 Percentage of ownership: 15.27%  
 Title (position): CHAIRMAN  
 Date of birth: 21-Feb-1947  
 Country of domicile: TURKEY

3. AML POLICIES AND PRATICE	YES	NO
3.1. Has your country established laws/regulations designed to prevent money laundering, terrorism financing?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.2. Does the law require banks to have written procedures for the prevention of money laundering and terrorism financing?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.3. Does your institution have a legal and regulatory compliance program that includes a designated officer that is responsible for coordinating and overseeing the AML framework?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.4. Has your institution developed written policies documenting the processes that they have in place to prevent, detect and report suspicious transactions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.5. In addition to inspections by the government supervisors/regulators, does your institution have an internal audit function or other independent third party that assesses AML policies and practices on a regular basis?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.6. Has your institution been subject of any investigation, indictment, conviction or civil enforcement action related to money laundering and terrorism financing or the breach of KYC policies in the past five years? If yes, please provide a detailed explanation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.7. Does your institution have a policy prohibiting accounts/relationships with shell banks? (A shell bank is defined as a bank incorporated in a jurisdiction in which it has no physical presence and which is unaffiliated with a regulated financial group).	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.8. Does your institution have policies covering relationships with Politically Exposed Persons (PEP's), their family and close associates?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.9. Do the laws / regulations in your jurisdiction prohibit opening or maintenance of anonymous or numbered accounts?	<input checked="" type="checkbox"/> (Prohibited)	<input type="checkbox"/> (Not Prohibited)
3.10. Does your institution permit your customers to pass transactions directly through your correspondent account? (payable-through accounts)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.11. Does your institution provide banking services for walk-in clients or others who do not maintain accounts? If yes, kindly define the type of service provided and your identification and verification process	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.12. Does the FI provide nested correspondent banking services?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.13. Does the FI act as downstream correspondent clearer?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>4. RISK ASSESSMENT</b>	<b>YES</b>	<b>NO</b>

4.1. Does your institution have a risk-based assessment of its customer base and their transactions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.2. Does your institution determine the appropriate level of enhanced due diligence necessary for those categories of customers and transactions that the institution has reason to believe pose a heightened risk of illicit activities at or through the institution?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>5. KNOW YOUR CUSTOMER, DUE DILIGENCE AND ENHANCED DUE DILIGENCE</b>	<b>YES</b>	<b>NO</b>
5.1. Has your institution implemented processes for the identification of those customers on whose behalf it maintains or operates accounts or conduct transactions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.2. Does your institution have a requirement to collect information regarding its customers' business activities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.3. Does your institution have procedures to establish a record for each new customer noting their respective identification documents and 'Know Your Customer' Information?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.4. Does your institution have monitoring programs for filtering transactions involving persons/entities suspected of terrorism, against lists issued by competent authority?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.5. Does your institution have policies or practices for the identification and reporting of transactions that are required to be reported to the authorities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.6. Where cash transaction reporting is mandatory, does your institution have policies and procedures to identify transactions structured to avoid such obligations?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.7. Does your institution have a policy of protecting employees who report, in good faith, any suspicious transactions/ activities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.8. Does your institution employ third parties to carry out some of the elements of the customer identification program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>6. TRANSACTION MONITORING</b>	<b>YES</b>	<b>NO</b>
6.1. Does your institution have a monitoring program for suspicious or unusual activities that covers funds transfers (incoming and outgoing) and monetary instruments (such as travellers checks, money orders, etc.)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.2. Does the FI search customer account database and transactions for persons and entities named under a particular sanction program?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

<p><i>If yes, please indicate list(s) of names used.</i></p> <p>OFAC <input checked="" type="checkbox"/></p> <p>United Nations <input checked="" type="checkbox"/></p> <p>European Union <input checked="" type="checkbox"/></p> <p>HM Treasury <input checked="" type="checkbox"/></p> <p>Patriot Act Section 311 <input checked="" type="checkbox"/></p> <p>Others <input checked="" type="checkbox"/></p> <p>Other: <b>DWJ Data File</b></p>		
<p><b>7. AML TRAINING</b></p>	<p><b>YES</b></p>	<p><b>NO</b></p>
<p><b>7.1.</b> Does your institution provide AML awareness training to relevant employees?</p>	<p><input checked="" type="checkbox"/></p>	<p><input type="checkbox"/></p>
<p><b>7.2.</b> Does your institution retain records of its training sessions including attendance records and relevant training materials used?</p>	<p><input checked="" type="checkbox"/></p>	<p><input type="checkbox"/></p>
<p><b>7.3.</b> Does your institution communicate new AML related laws or changes to existing AML related policies or practices to relevant employees?</p>	<p><input checked="" type="checkbox"/></p>	<p><input type="checkbox"/></p>

Space for additional information (Please indicate which question the information refers to)

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**Please also attach your duly signed "Wolfsberg AML Questionnaire".**

**Thank you very much in advance for your kind cooperation.**

I confirm that, to the best of my knowledge, the above information is current accurate and reflective of my bank/institution's anti-money laundering policies/procedures.	
<b>Name/Title:</b>	<b>ALPER SERDAR / Head of Compliance</b>
<b>Telephone/Fax:</b>	<b>0090 216 6877000</b>
<b>E-Mail:</b>	<b>compliance@anadolubank.com.tr</b>
<b>Address:</b>	<b>Saray Mah. Toya Sok. No:3 Umraniye-Istanbul</b>
<b>Date:</b>	<b>29.12.2022</b>
<b>Signature:</b>	