

## Anti-Money Laundering/Combating Financing of Terrorism (AML/CFT)

### Customer Due Diligence (CDD) Questionnaire for Financial Institutions

#### Section 1. General Information

Registered Name :	Suez Canal Bank S.A.E.		
Country of incorporation :	Egypt		
Registered Address :	127 Teraat El-Ismailia St., Ismailia, Egypt		
Principle places of operation:	7,9 Abd El-Kader Hamza St., Garden City, Cairo, Egypt		
Date of establishment :	Feb. 21, 1978		
Regulatory Authority:	Central Bank of Egypt		
Registration No. & Expiry Date:	No.: 9709		
A copy of commercial register is attached	Expiry Date: Mar. 12, 2023		
Banking License No. & Issuance Date :	Decree no.55/1978		
Is your FI a branch or a subsidiary of a parent financial institution :	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Tax Identification no. :	204-897-556		
External Auditors :	1- KMPG 2- BDO (Khaled & Co.)		
LEI no. :	549300L2TJKMRAVJC202		
Website :	<a href="http://www.scbank.com.eg">www.scbank.com.eg</a>		
Swift Bic Code :	SUCAEGCXXXX		
Name of Money Laundering Reporting Officer (MLRO) for AML/CFT:	Mr. Ashraf El-Maghraby		
Contact details:	Email: <a href="mailto:Compliance@scbank.com.eg">Compliance@scbank.com.eg</a> Phone Number: +20227989400 Extension: 1820		

## Section 2. Ownership Information

Name of Stock Exchange: <b>Egyptian Stock Exchange</b>					
Symbol: <b>CANA</b>					
Shareholders structure				<b>Attached</b>	
The beneficial owners (i.e. any individual or entity who ultimately owns or controls (either directly or indirectly) More than 10% of the FI capital				<b>Attached</b>	
Please provide the following information for the Controlling Person (The Controlling Person is one individual with significant responsibility for managing the legal entity: an executive officer or senior manager (e.g. Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, or equivalent):					
Name	Title	Identification Number	Nationality	Country of Residence	Date of Birth (dd/mm/yyyy)
Mr. Hussein Ahmed Ismail Refaei	Chairman & Managing director	26102100103813	Egyptian	Egypt	10/02/1961

## Section 3. Management Information / Name of Members of Board of Directors and Management

Lists of Board of Directors members and Senior Management (CEO, CFO, COO, CCO, CRO and CIA)	<b>Attached</b>
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## Section 4. Nature of Your Core Business

Type of legal entity	<input type="checkbox"/> Publicly Owned <input type="checkbox"/> Limited Company <input type="checkbox"/> Cooperative Bank <input checked="" type="checkbox"/> Joint-Stock Company
<b>Business activities</b> Sectors of your business activities	<input checked="" type="checkbox"/> Commercial Banking <input checked="" type="checkbox"/> Retail Banking <input type="checkbox"/> Investment Banking <input type="checkbox"/> Asset management <input type="checkbox"/> Private Banking (Wealth Management towards high net worth individuals)
<b>Products and services</b> Main products and services	<input checked="" type="checkbox"/> Trade finance products (e.g. FX, letter of credit) <input checked="" type="checkbox"/> Lending activities <input type="checkbox"/> Trust and asset management Services <input checked="" type="checkbox"/> Investment Products <input checked="" type="checkbox"/> Correspondent banking



## Section 5. Anti-Money Laundering (AML)/ Combating Financing of Terrorism (CFT)

i. Laws and Regulations:	Yes / No		Comments
Are money laundering and terrorist financing considered in your country as a crime?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Has the country of domicile of your FI established laws designed to prevent money laundering and terrorist financing? <i>If 'yes' please list your country's relevant laws</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Our Bank abides by laws no. 80 in 2002 and its subsequent amendments no. 78 in 2003, no. 181 in 2008, no. 36 in 2014, no. 17 in 2020 and no. 94 in 2015 concerning Anti-Money Laundering (AML) and combating the financing of terrorism (CFT) and customer acceptance instructions.
Is your FI subject to such laws?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Does your FI have branches and/or subsidiaries?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Local branches only
If yes, are they subject to the anti-money laundering laws and regulations applicable to your Head Office?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Is your country (FATF) member?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Does your FI have a compliance programme that includes a designated officer who is responsible for coordinating and overseeing AML/CFT?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Does your FI has a formal/independent Anti Money Laundering Compliance function?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Does your FI have an internal audit function or other independent third party that assesses AML policies and practices on a regular basis?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Does the regulatory body/competent authority conduct AML/CFT reviews of your institution?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Has your FI been subjected to any investigation, indictment, conviction or civil enforcement related to money laundry and terrorism financing in the past five years?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Do you conduct transaction monitoring on customer transactions to identify unusual or suspicious activity? If Yes, please describe <input type="checkbox"/> Transaction Monitoring is Manual <input type="checkbox"/> Transaction Monitoring is Partly Automated <input checked="" type="checkbox"/> Transaction Monitoring is Fully Automated <i>If it is Automated, please provide Name of Vendor: <b>SAS</b></i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Do you provide services for cross-border remittance activity for non-account holders (i.e. walk-in non-customers)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	



ii. Policies & Procedures:	Yes / No	Comments
Do you have written policies & procedures concerning AML/CFT?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Are your policies/procedures compliant with applicable laws & regulations with regard to AML/CFT?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Does your AML/CFT/KYC procedures comply with the international standards (i.e. FATF, Basel Committee,...etc.)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Do your policies and procedures permit you to open or maintain anonymous accounts?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Do your policies and procedures detail the identification, reporting of suspicious transactions that are required to be reported to the authorities?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Do your policies and procedures permit you to conduct business with 'shell' banks? (shell banks maintain no physical presence in the country of their incorporation and unaffiliated with a regulated financial group)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
<b><u>Know Your Customer, Due Diligence Procedures:</u></b> <b><u>Does your policies and procedures require you to:</u></b>		
a) Maintain KYC for your clients	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
b) To perform Due Diligence on these clients	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
c) Verify the true identity of all customers prior to entering into a business relationship/undertaking any transactions?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
d) Verify the true identity of underlying beneficial owners, if any?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
e) Verify the source of wealth/funds and the level of economic activity of your customers?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
f) Apply Risk-based assessment: 'Risk rate' your customer base based on criteria such as residence/volume and type of activity and transactions, delivery channels?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
g) Apply enhanced customer due diligence (EDD) on those customers identified as having a higher risk profile?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
h) Periodically update due diligence information obtained?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
i) Review the AML/CFT controls of correspondent banks before opening an account for them?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	



Do your policies and procedures detail detection of Politically Exposed Persons (PEPs) and cover the FI relationship with them?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Does your FI have an established independent Audit/Compliance function to assess AML/CFT policies & procedures?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Do you have policies covering record retention of all relevant identity documents and transaction information? <i>If yes, for how long? For 6 years from ending business relationship with the customer</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

iii. Correspondent Banks :	Yes / No		Comments
Does your FI have policies to reasonably ensure that it only conduct business with correspondent banks that possess licenses to operate in their countries of establishment?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Does your FI have payable-through accounts that are used directly by third parties to transact business on their own behalf?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Does your FI provide downstream correspondent activity to other FIs?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Does your FI perform enhanced due diligence for customers that transact in abnormal transactions?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Has your FI provided a US Patriot Act Certification to Financial Institutions in the USA?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Do any of your correspondent banks originate from the non-cooperative jurisdictions as identified by the FATF?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	

iv. Sanctions :	Yes / No		Comments
Do you check existing and prospective customers and related parties and monitor all transactions against UN, OFAC Lists and any other sanctions or applicable official lists of suspected terrorist and terrorist organizations? <i>If 'yes' Please specify the used sanction lists?</i>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	OFAC, FATF, UN, EU, HMT, DFAT, CIA and Local Legal Terrorism List
Does the FI provide financial services directly or indirectly to high risk countries including those defined as non-cooperative jurisdictions in the fight against Money Laundering and Financing of Terrorists?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Does the FI provide financial services directly or indirectly and/or have any activities including investments within the following industries: Military Goods, the Defense Industry, the	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	




Nuclear Industry, Precious Metals and/or Diamonds, or Humanitarian Projects in Sanctioned Countries?			
Does your FI have Manual/Automated system for detecting the sanctioned names of these lists (OFAC, UN, EU, HMT, DFAT, FATF)? <input type="checkbox"/> Screening Monitoring is Manual <input type="checkbox"/> Screening Monitoring is Partly Automated <input checked="" type="checkbox"/> Screening Monitoring is Fully Automated <i>If it is Automated, please provide Name of Vendor: <b>DataGear</b></i>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Are there adequate measures taken by your Institution to ensure that no financial services (including bulk Cash) are provided to the listed terrorists and/or sanctioned names notified by your competent parties?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	

v. AML Training	Yes / No		Comments
Does your FI provide AML training to relevant employees?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Does your FI keep records of training sessions including attendance records and relevant materials used?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Does your FI employ agents to carry out some functions relevant to AML/CFT training?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	EBI – Central Bank of Egypt

vi. FATCA
FATCA Status: <b>Participating FFI</b>
GIIN: <b>3P9378.99999.SL.818</b>

I, the undersigned, on behalf of Suez Canal Bank confirm to the best of my knowledge and belief that the information provided in this questionnaire is current, accurate and representative of the anti-money laundering and anti-terrorist financing policies and procedures that are established in my institution further and that I will inform Suez Canal Bank if any changes occur related to the answers provided.

I also confirm that I am authorized to complete this questionnaire on behalf of my institution.

Name: Mr.Ashraf El-Maghraby
Title: Head of Compliance
Signature: 
Email: <b>Compliance@scbank.com.eg</b>
Phone: <b>+20227989400</b> Extension: <b>1820</b>

