

The Commercial Bank of Kuwait (CBK)

The State of Kuwait

AML/KYC Questionnaire

General Information

Name of the Bank	The Commercial Bank of Kuwait
Country of Incorporation	The State of Kuwait
Legal Status	Kuwaiti Public Shareholding Company (K.P.S.C)
Commercial Registration Number	7706
Banking License	Listed in Banking register since 10/01/1970
Website	https://www.cbk.com
Registered Address	Al-Qibla, Block5, Kuwait City, State of Kuwait
Mailing Address	P.O.Box 2861 Safat 13029 Kuwait
Line of Business	Corporate Lending, Trade Finance, Treasury, Retail Banking, International Banking, Investment
Major Shareholders	Please refer to : https://www.boursakuwait.com.kw/stock/103/profile
Board of Directors	Please refer to : https://www.cbk.com/About-CBK/CBK-Profile/Board-of-Directors
Executive Management	Please refer to : https://www.cbk.com/About-CBK/CBK-Profile/Executive-Management
CEO	Elham Mahfouz
AML Officer	Tamim khaled Al Meaan Acting/Head of AML Department
Number of local branches	43
Number of foreign branches	Nil
Regulator	The Central Bank of Kuwait http://www.cbk.gov.kw
External Auditors	Deloitte, Al -Fahad & Al-Wazzan & Co. Albazie & Co – member of RSM Network
Name of Stock Exchange the Bank is Listed	Boursa Kuwait
FATCA Status Compliance	Yes
GIIN Number	7SYKUR.00000.LE.414
TIN Number	115142



Bank AML Questionnaire

This questionnaire is designed to provide the Commercial Bank of Kuwait (CBK) with information about you, and your policies and procedures.

A- Corporate Information				
Full registered name Commercial Bank of Kuwait				
Full registered address Al-Qibla, Block 5, Mubarak Al Kabir Street , State of Kuwait				
Type of license Banking				
Issuing authority The Ministry of Commerce and Industry				
Registration date and number Date: 10/01/1970, Number: 7706				
Name of regulatory body (if other than the license issuing authority) Central Bank of Kuwait				
Main line of business Carrying out all banking activities.				
Total number of domestic branches 43			Total number of foreign branches Nil	
Website www.cbk.com				
Listed Entity	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Name of Stock Exchange Stock exchange website Ticker / Symbol	Boursa Kuwait CBK 103
AML Contact details Tamim Khaled Al Meaan			Job Title Acting / Head of AML Department	
Contact information (email, phone) talmeaan@cbk.com , (+965) 2299 0704				
Date 01 August 2019				

B- Ownership		Yes	No
1. Is your institution publicly owned?		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If "yes", please provide the names of individual(s)/legal person(s) or group that owns 5% or more of your share capital			
Name		Share %	
Please refer to the following link: https://www.boursakuwait.com.kw/stock/103/profile			



2. Confirm that your institution has performed an appropriate Due Diligence on all principal owners	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
3. Is any of the owners/Board Members/Executive Management a PEP or related to a PEP? If "yes" please provide the owner's name, his/her share % in your capital, and/or the PEP name and their relationship	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Name	Relation	Share %

C- Regulatory Framework	Yes	No
4. Are Money Laundering and Terrorist Financing a criminal offense?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
5. Are there specific laws and/or regulations in place covering Anti-Money Laundering and Counter Terrorist Financing (AML & CTF)? If "Yes", please mention the law name, number and date of issuance 106/2013 and its amendments dated 14 May 2019	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
6. Are all financial institutions in your country subject to AML & CTF laws & regulations?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
7. Are non-financial institutions subject to AML & CTF laws and regulations?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
8. Does your regulator require you to conduct Customer Due Diligence (CDD) on your customers before transacting any business with them?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
9. Does your regulator require you to verify the identity of your customer and apply AML & CTF controls in line with international accepted standards?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
10. Does your regulator require you to have effective controls in place to prevent and identify the proceeds of crime being laundered through your system?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
11. Does your regulator require you to report any suspicious transactions to a Law Enforcement or other agency designed for that purpose?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
12. Do the Laws and Regulations in your jurisdiction permit the opening or maintenance of anonymous or numbered accounts?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
13. Does the Laws and Regulations in your jurisdiction permit conducting business with Shell Banks?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
14. Did your regulator issue instruction covering AML & CTF? If "yes", does it cover all FATF standards?	Yes <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/> No <input type="checkbox"/>
15. Does your regulator conduct an off and on-site supervision on you covering the area of AML & CTF? If "yes", please indicate how often AML inspection is conducted by your regulator? Yearly	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>



C- Regulatory Framework	Yes	No
16. Has your regulator or any other authorities published any guidance and/or lists of individuals or entities known or suspected of Money Laundering or Terrorism Financing?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

D- General AML Policies, Practices and Procedures	Yes	No
17. Did you develop written policies and procedures covering all legal and regulatory requirements?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
18. Is the AML compliance policy and procedures approved by your board or a senior committee?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
19. Does your policy and procedures document the processes that they have in place to prevent, detect and report suspicious transactions?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
20. Have you been fined or censured for a breach of AML & CTF legislation? If "yes", please provide details	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
21. Do you have a written compliance program that includes a designated Anti Money Laundering Officer/Compliance Manager? If "yes", please provide details Tamim Khaled Al Meaan, Acting Head of AML	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
22. In addition to inspections by your regulators, do you have an internal audit function or other independent third party that assesses AML policies and practices on a regular basis? If "yes" please indicate how often this is done Yearly	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
23. Do you have procedures to establish a record for each new customer, ensuring they are properly identified, noting their respective identification documents and Customer Due Diligence information?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
24. Does your policy cover relationships with the following: a. Politically Exposed Persons (PEPs), their family and close associates? b. Private Banking services? c. Money Services Business (MSB) which are not authorized by competent authorities? If "yes" do you apply additional measures?	Yes <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/>
25. Does your policy include ensuring that all your correspondents must be licensed to undertake conventional correspondence activities and that they are screened and regulated by competent authorities?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
26. Do you have any Correspondent Relationships with Shell Banks?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
27. Do you allow your customers direct access to your account with us?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
28. Are your AML policies and practices being applied to all your branches and subsidiaries both in the home country and in locations outside that jurisdiction?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
29. Do you have specific systems and controls in place to screen transactions for customers or transactions deemed to be of significant high risk (which may include persons, entities or countries) against lists issued by government/international bodies/competent authorities? If "yes" please specify such lists	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>



E- Transaction Monitoring	Yes	No
30. Do you have policies or practices for the identification and reporting of transactions that are required to be reported to the authorities?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
31. Do you report cash transactions exceeding a regulatory defined threshold to the regulatory/competent authority?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
32. Do you report wire transfers exceeding threshold to a regulatory/competent authority?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
33. Where cash transaction reporting is mandatory, do you have procedures to identify transactions structured to avoid such obligations?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
34. Does your policy cover transactions for Walk-in customers & do you acquire a valid ID card from such customers prior to conducting business transactions?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
35. Does your outgoing wire transfer include names of originator & beneficiary and other relevant information such as account number, address etc.?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
36. Do you have a monitoring program for unusual and potentially suspicious activity that covers funds transfers and monetary instruments? If "yes", please advice of software used in monitoring such transactions & how many cases did your system trigger on a daily average basis over the last one year?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

F- Risk Assessment	Yes	No
37. Do you have policies for risk grading customers from a compliance perspective?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
38. Do you have a risk-based assessment of your customer base and their transactions?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
39. Do you determine the appropriate level of enhanced due diligence necessary for those categories of customers and transactions that you have reason to believe pose a heightened risk of illicit activities?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
40. Do you assess your customers' AML policies or practices?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
41. Do you have a process to review and, where appropriate, update customer information relating to high risk client information?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
42. Do you have record retention procedures that comply with applicable law?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
43. Do you have a risk based assessment to understand the normal and expected transactions of your customers and confirming the legitimacy of their business?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
44. Do you have Procedures for preventing, identifying and disclosing suspicious transactions?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
45. Does your risk assessment policy cover transactions involving NCCTs?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
46. Does your risk assessment policy cover risk associated with your products and services?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
47. Do you apply enhanced due diligence for high risk transactions? If "yes", please explain	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
48. Do you apply reduced customer due diligence on low AML customers? If "yes", please identify such customers	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>



G- AML & CTF Training	Yes	No
49. Do you provide mandatory AML training to your employees? If the answer is "yes", are all categories of staff members (including Board Members) required to undergo such training? If the answer is "No", do you internally provide AML training to the staff?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
50. How often do you organize training and awareness sessions/courses to your staff?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
51. Does your training/awareness address the following: ▪ Identification and reporting of transactions that must be reported to government authorities. ▪ Examples of different forms of money laundering involving your products and services. ▪ Internal policies to prevent money laundering.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
52. Do you communicate new AML related laws or changes to existing AML related policies and relevant employees?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
53. Do you employ third parties to carry out some of the functions of your financial institution? If "yes", do you provide AML training to third parties that includes: ▪ Identification and reporting of transactions that must be reported to government authorities. ▪ Examples of different patterns of money laundering involving your products and services. ▪ Internal policies to prevent money laundering.	Yes <input type="checkbox"/> Yes <input type="checkbox"/> Yes <input type="checkbox"/> Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/>
54. Do you retain records of its training sessions including attendance records and relevant training materials used?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

H- FATCA	Yes	No
55. Are you FATCA compliant or in the process to be compliant? If "yes", please provide GIIN number 7SYKUR.00000.LE.414	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
56. Completed form W-9 (for US Entity) / W-8BEN-E (for Non-US Entity) https://www.irs.gov/forms-instructions	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

If appropriate, please provide any other additional information which may be relevant.

To be completed by an Authorized Signatory

Name	Tamim Khaled Al Meaan
Title	Acting Head of AML Department
Signature	
Date	01 August 2019