

## SECTION I – GENERAL ADMINISTRATIVE INFORMATION

1	Registered Name:	<b>Al Baraka Bank Syria</b>	
2	Trading Name (if different):	<b>The Same</b>	
3	Registered Address:	<b>Damascus Countryside- Yafour- The eighth gate project-Block B4</b>	
		Physical presence at this address?	Yes <input checked="" type="checkbox"/> NO <input type="checkbox"/>
4	Head Office Address	<b>Damascus Countryside- Yafour- The eighth gate project-Block B4</b>	
		Physical presence at this address?	Yes <input checked="" type="checkbox"/> NO <input type="checkbox"/>
5	Banking License No. & Date Issued:	<b>No. 21 Date: 09/02/2010</b>	
6	License Type:	<b>Islamic Bank</b>	
7	Commercial Registration No. and Expiry (if any)	<b>No. 16059 Date: 29/12/2009</b>	
8	Principal Local Regulator:	<b>Central Bank of Syria</b>	
9	Web Address:	<b>www.albarakasyria.com.sy</b>	
10	Name of External Auditor	<b>E&amp;Y</b>	
11	SWIFT Address:	<b>BBSYSYDA</b>	
12	Are your shares publicly traded? If 'yes', list exchanges and symbols:	<b>Damascus Securities Exchange. BBSY</b>	
13	Name of Parent Company (if applicable):	<b>Al Baraka Group B.S.C.</b>	
14	Country of Incorporation of Parent Company:	<b>Bahrain</b>	
15	Purpose for which the account will be opened:	<b>Commercial Dealings</b>	
16	FATCA Status and GIIN Number : If not what is your intention on becoming FATCA Compliant ?	<b>FATCA Status: PFFI GIIN Number: 86IIBW.00010.ME.760</b>	





**SECTION II – OWNERSHIP INFORMATION**

**1. OWNERSHIP INFORMATION – SHARE HOLDERS**

Please list (or attach a listing of) all parties owning 20% or more of the issued capital of your institution:

Name	Ownership Interest	Nature of ownership
<b>Al Baraka Banking Group</b>	<b>23%</b>	<b>Direct</b>

**2. MANAGEMENT STRUCTURE – BOARD OF DIRECTORS**

Please provide us with list of Board of Directors and top Management showing by nationality and country of resident:

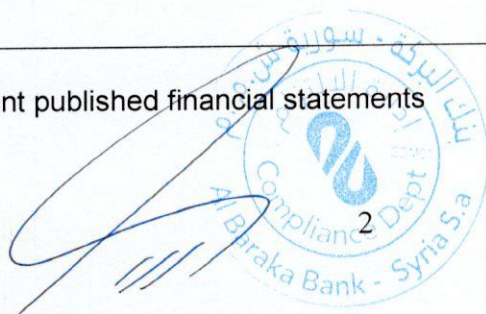
Name	Nationality	Country of Residence
<b>Attached</b>		

**SECTION III – BUSINESS ACTIVITIES**

Please list the principal areas of business in which your Bank participates in terms of contribution to Revenue:

Principal Areas of Business Activity (e.g.: Commercial, Private, Corporate, Wholesale, Insurance etc.)	Approximate % of *Revenue
Retail	2%
Corporate	19%
Treasury	27%
Fees and Commissions	52%

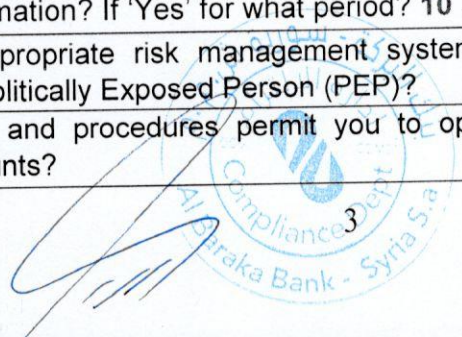
\* based on most recent published financial statements





## SECTION IV – POLICIES & PROCEDURES

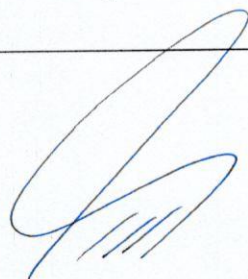
		YES	NO
1	Has your country established laws/regulations concerning Anti-Money Laundering(AML) and Combating the Financing of Terrorism (CFT)	✓	
2	Is your institution subject to such laws/regulations?	✓	
3 a)	Do you have a written policy and operational procedures for prevention of money laundering and terrorist financing?	✓	
3 b)	If not, are they planned to be introduced? Please indicate the estimated date of implementation:		
4	Are your policies / procedures compliant with local laws & regulations with regard to AML / CFT?	✓	
5	Are your policies / procedures compliant with the Financial Action Task Force's (40+9) Recommendations?	✓	
6	Would you provide us with a copy of your policies if we requested them?	✓	
7	Are the AML/CFT policies and procedures applicable to your head office also applied to your foreign branches and majority owned subsidiaries (both local and overseas)? If 'no' please give / attach details of any units that are excluded: <b>"we don't have any branches or subsidiaries outside our jurisdiction"</b>	✓	
8	Does your policy require you to:		
	a) Verify the true identity of all customers prior to entering into a business relationship / undertaking any transactions?	✓	
	b) Verify the true identity of underlying beneficial owners, if any?	✓	
	c) Verify the source of wealth / funds and the level of economic activity of your customers?	✓	
	d) 'Risk rate' your customer base based on criteria such as residence/ volume and type of activity?	✓	
	e) Apply enhanced customer due diligence on those customers identified as having a higher risk profile?	✓	
	f) Periodically update due diligence information obtained?	✓	
	g) Review the AML/CFT controls of respondent banks before opening an account for them?	✓	
9	Do you retain copies of all relevant customer Identity Documents and transactions information? If 'Yes' for what period? <b>10 Years</b>	✓	
10	Do you have appropriate risk management systems to determine whether a customer is a Politically Exposed Person (PEP)?	✓	
11	Do your policies and procedures permit you to open or maintain anonymous accounts?		✓





## Correspondent Banking Anti Money Laundering Due Diligence Questionnaire

		YES	NO
12	Do your policies and procedures permit you to conduct business with Shell banks, i.e., bank which maintain no physical presence in the country of their incorporation (except if a subsidiary of a regulated Financial group)?		✓
13	Are any third parties (e.g., 'payable through' accounts) allowed direct access to the account (if any) maintained with our bank?		✓
14	If 'yes' has their identity been verified in accordance with your AML/KYC policies and procedures?		
15	Does your institution comply with FATF Special Recommendation VII and ensure that full originator information is included in all payments that you make?	✓	
16	Does your institution have procedures for identifying payments / transactions related to persons / entities (appearing in relevant regulatory lists) suspected of terrorism? If 'yes' are these automated or manual? <b>"Combination automated and manual"</b>	✓	
17	Do you have a system for detecting abnormal customer transactions or patterns of activity in relation to the expected norm? Is this manual or automated? <b>"Combination automated and manual"</b>	✓	
18	Do you have policies and procedures for the identification and reporting of transactions that are required to be reported to the authorities?	✓	
19	Are you permitted by your local regulations to share relevant customer identification data with your correspondents should this be requested?		✓
20	If 'yes', would you be willing to do so if required by us where a legitimate need has arisen?		
21	Does your institution have an established audit and / or compliance review function to test the adequacy of compliance with your AML / CFT policies and procedures?	✓	
22	Does the Regulatory body / competent authority in your country conduct AML / CFT reviews of your institution. If 'yes' with what frequency: <b>"Annual"</b>	✓	
23	To the best of your knowledge, are you in compliance in all material respects with all relevant AML / CFT laws and regulations?	✓	
24	Has your institution been subject to any investigation, indictment, conviction or civil enforcement related to money laundering and terrorism financing in the past five years? If 'yes' please attach details.		✓
25	Does your institution have an established employee-training program to teach employees about money laundering and to assist them in identifying suspicious transactions? If 'yes' with what frequency is training required? <b>"According to annual plan"</b>	✓	






# Correspondent Banking Anti Money Laundering Due Diligence Questionnaire

## SECTION IV – CONTACT DETAILS

Has your institution appointed a Money Laundering Reporting Officer (MLRO)? If 'yes' please provide:

<b>Name:</b>	<b>Mohammad Ahmad</b>	<b>Phone:</b>	<b>00963 11 3977444</b>
<b>Title:</b>	<b>Head of Compliance</b>	<b>Fax:</b>	<b>00963 11 39774445</b>
<b>Address:</b>	<b>Damascus Countryside- Yafour- The eighth gate project-Block B4</b>	<b>E-Mail:</b>	<b>m.ahmad@albarakasyria.com</b>

### ACKNOWLEDGEMENT OF RESPONSIBILITIES

- a) We will ensure that full due diligence is performed on all our customers who are party to any transactions involving our bank or upon whose behalf payments are to be routed through accounts (if any) maintained with you.
- b) We will not allow a third party direct access to the account without prior notification to you.

I certify that I am authorized to complete this questionnaire and that to the best of my knowledge the information given is complete and correct

**Signed:**

**Date: 12 / 03 / 2024**

Where different to section IV above, form completed by:

<b>Name:</b>		<b>Phone:</b>	
<b>Title:</b>		<b>Fax:</b>	
<b>Address:</b>		<b>E-Mail:</b>	