


Shin Kong Bank

FINANCIAL INSTITUTIONS

KNOW YOUR CUSTOMER / ANTI-MONEY LAUNDERING & COUNTERING THE FINANCING OF TERRORISM

QUESTIONNAIRE

Section I – General Administrative Information	
Legal Name of Institution	Taiwan Shin Kong Commercial Bank Co., Ltd.
Legal Form	Company limited by shares
SWIFT Address / Website	MKTBWTP; http://www.skbank.com.tw
Principal Place of Business (Address)	26F~28F, 30F, No.66, SEC. 1, Jhongsiao W. Rd., Taipei 100, Taiwan, R.O.C.
Registered at / Banking License issuing authority、date and number	Banking Bureau, Financial Supervisory Commission, Executive Yuan, Taiwan; 1997/1/1; No.: 960066
Does your Institution maintain a physical presence ¹ in the licensing country?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Is your institution an agency, branch or subsidiary of a bank with a physical presence? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
If yes, please answer the following questions :	
<ul style="list-style-type: none"> • Name of affiliate / parent company: Shin Kong Financial Holding Company • Is affiliate / parent company publicly traded? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> 	
If yes, list exchanges and symbols: Taiwan Stock Exchange Corporation; SYMBOL: 2838	
<ul style="list-style-type: none"> • Indicate affiliation: agency <input type="checkbox"/> branch <input type="checkbox"/> subsidiary <input checked="" type="checkbox"/> • Licensing country of affiliate: Taiwan 	
Is your institution a publicly traded entity ² ?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
• If yes, please list the exchanges & symbols:	
Officer Responsible for Account / Relationship :	Secondary Contact :
Joyce Chang	Christine Hsu
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International Banking Department
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¹ Physical presence means your institution maintains a physical place of business, other than an electronic address, in a country where it is authorized to conduct banking activities, at which it employs at least one employee on a full-time basis and maintains records of its banking activities, and is subject to supervision by the regulators of the country authorizing the institution's license.

² If your institution is an agency, branch or subsidiary of a publicly traded entity that is listed on one of the exchanges listed in Appendix B, the answer to the question should be "Yes."

Section II -KNOW YOUR CUSTOMER / ANTI-MONEY LAUNDERING & COUNTERING THE FINANCING OF TERRORISM CONTROLS		
	Yes	No
1.Does the AML CFT, and KYC compliance program require approval of your institution's Board or a senior committee thereof?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
2.Does your Institution have a legal and regulatory compliance program that includes a designated Compliance officer that is responsible for coordinating and overseeing the AML program on a day-to-day basis, which has been approved by senior management of the FI?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
3.Has your Institution developed written policies documenting the processes that they have in place to prevent, detect and report suspicious transactions that has been approved by senior management?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
4.In addition to inspections by the government supervisors / regulators, does your institution's client 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"/>
5.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.)?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
6.Does your Institution have policies covering relationships with politically exposed persons consistent with industry best practices?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
7.Does your Institution have appropriate record retention procedures pursuant to applicable law?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
8.Does your Institution require that its AML policies and practices be applied to all branches and subsidiaries of the FI both in the home country and in locations outside of the home country?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
9.Does your Institution have a risk focused assessment of its customer base and transactions of its customers?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
10.Does your Institution determine the appropriate level of enhanced due diligence necessary for those categories of customers and transactions that your Institution has reason to believe pose a heightened risk of illicit activities at or through the FI?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
11.Has your Institution implemented systems for the identification of its	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

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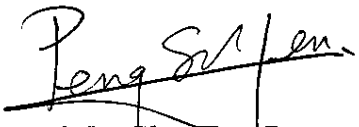
customers, including customer information in the case of recorded transactions, account opening, etc. (for example; name, nationality, street address, telephone number, occupation, age/ date of birth, number and type of valid official identification, as well as the name of the country / state that issued it)?		
12.Does your Institution have a requirement to collect information regarding its customers' business activities?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
13.Does your Institution collect information and assess its FI customers' AML policies or practices?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
14.Does your Institution have procedures to establish a record for each customer noting their respective identification documents and Know Your Customer Information collected at account opening?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
15.Does your Institution take steps to understand the normal and expected transactions of its customers based on its risk assessment of its customers?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
16.Does your Institution 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"/>
17.Does your Institution have procedures to identify transactions structured to avoid large cash reporting requirements?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
18.Does your Institution screen transactions for customers or transactions the FI deems to be of significantly high risk (which may include persons, entities or countries that are contained on lists issued by government/international bodies) that special attention to such customers or transactions is necessary prior to completing any such transactions?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
19.Does your Institution have policies to reasonably ensure that they will not conduct transactions with or on behalf of shell banks through any of its accounts or products? (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.)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
20.Does your Institution have policies to reasonably ensure that it only operates with correspondent banks that possess licenses to operate in their countries of origin?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
21.Does your Institution have a monitoring program for suspicious or unusual activity that covers funds transfers and monetary instruments (such as travelers checks, money orders, etc.)?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
22.Does your Institution provide AML training to relevant employees that includes identification and reporting of transactions that must be reported to government authorities, examples of different forms of money laundering involving the FI's products and services and internal policies to prevent money laundering?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
23.Does your Institution retain records of its training sessions including	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

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attendance records and relevant training materials used?		
24. Does your Institution have policies to communicate new AML related laws or changes to existing AML related policies or practices to relevant employees?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
25. Does your Institution employ agents to carry out some of the functions of the FI and if so does the FI provide AML training to relevant agents that includes identification and reporting of transactions that must be reported to government authorities, examples of different forms of money laundering involving the FI's products and services and internal policies to prevent money laundering?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
※ For all above, please provide comments on any 「 No <input checked="" type="checkbox"/> 」 responses :		
26. Does your Institution provide payable through accounts ? (if Yes, please comment)	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
27. Has your institution had any regulatory or criminal enforcement actions resulting from violations of AML laws or regulations in the last five years ? (if Yes, please comment)	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

The undersigned, based on his/her best knowledge and belief, certifies that the aforementioned questions were answered considering the existing internal controls of the subject financial institution, and further present an accurate representation of the existing state of the institution's AML, CFT, and KYC internal controls and financial service activities.

Signature : 

Completed by : Ms. Shu-Fen Peng

Position : Vice President

Date : Sept. 01, 2011

Name of Institution : Taiwan Shin Kong Commercial Bank Co., Ltd.

Address of Institution : 5F, No.66, Sec. 1, Hsin Sheng S. Rd., Taipei 100, Taiwan, R.O.C.

E-mail : PENG1126@skbank.com.tw

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