

**Financial Intelligence Analysis Unit**  
**Risk Evaluation Questionnaire**
**Designated Non Financial Businesses and Professions Sector**  
**VFA**

General remarks from the subject person:

As indicated in the Guidance for Completion of the Anti-Money Laundering and Countering the Financing of Terrorism Risk Evaluation Questionnaire, sole practitioners and entities should, for each of the questions included in this questionnaire, choose the answer option that is best suited to them / their internal organization.

The FIAU acknowledges that the answer options defined by it do not always fully capture the actual situation within each subject person. When choosing from the answer options available, it is therefore important to select an option that is a true reflection of your actual situation / the actual situation within your entity and that can be justified later on.

In the text box, you can formulate general remarks on the answers submitted by you / your entity. Please note that these general remarks are not taken into account in the initial, automated analysis of your / your entity's answers.

[Text]

**1 Subject Person Information**

|      |   |   |
|------|---|---|
| 1.01 | Please select the legal formation of your entity.   | Public Limited Company / Private Limited Company / Civil Partnership / Commercial Partnership / Branch of a Foreign entity / Association / Other  |
| 1.02 | If "Other", please specify.   | [Text] / Not Applicable   |
| 1.03 | Please select the status of your entity.  | Subsidiary of a foreign traded company / Subsidiary of a privately held foreign company / Subsidiary of a local traded company / Subsidiary of a privately held local company / Privately held foreign company / Privately held local company / Other |
| 1.04 | If "Other", please specify.   | [Text] / Not Applicable   |
| 1.05 | Please indicate total annual turnover according to the latest available audited financial statements and / or tax declaration.  | [€] / Not Applicable  |
| 1.06 | Please provide the year end reference date for the financial statements or tax declaration as indicated above.  | [Date] / Not Applicable   |
| 1.07 | Please indicate the total number of employees (including partners, executive directors, associates and staff), expressed in full time equivalents ("FTEs"), working for you / your entity as at the end of the prior calendar year. | [Number] / Not Available / Not Applicable   |
| 1.08 | How many years experience in this industry do you / does the principal(s) and / or partners and / or director(s) and / or senior management of your entity have?  | 10 or more years / Between 5-9 years / Between 3-5 years / Between 1-3 years / Less than 1 year   |

|      |  |   |
|------|--|---|
| 1.09 | Does the ownership structure of your entity include one or more of the following: foundation and / or trust and / or partnership and / or direct or indirect holding through bearer shares?            | No / Yes  |
| 1.10 | If your entity is a subsidiary of a foreign traded company or a subsidiary of a privately held foreign company, is the parent company located in EU / EEA jurisdictions or non-EU / EEA jurisdictions? | EU/EEA jurisdictions / non-EU/non-EEA jurisdictions / Not Applicable  |
| 1.11 | Please list all persons (name and surname) who are considered as your entity's beneficial owners as defined in the PMLFTR.   | [Text] / Not Applicable   |
| 1.12 | Do any of the BOs reside in a non-EU / EEA jurisdiction?   | No / Yes  |
| 1.13 | Does your entity have nominee shareholders in its ownership structure?   | No / Yes  |
| 1.14 | If "Yes", what percent of the total shares are held by nominee shareholders?   | [%] / Not Applicable  |
| 1.15 | Has your entity undergone changes in its ownership structure during the prior calendar year?   | No / Yes  |
| 1.16 | Has your entity undergone significant changes in its management and control structure during the prior calendar year?  | No / Yes  |
| 1.17 | What kind of VFA Agent activities does your registration allow you to carry out?   | Acting as VFA Agent in terms of Article 7 of the VFA Act / Acting as VFA Agent in terms of Article 14 of the VFA Act / Acting as VFA Agent in terms of both Article 7 and Article 14 of the VFA Act |

## 2 Governance

|      |   |  |
|------|---|--|
| 2.01 | How many agents / distributors did the entity have at the end of the prior calendar year?   | [Number] / Not Available / Not Applicable                                    |
| 2.02 | When was the current MLRO appointed?  | More than 2 years ago / Between 1-2 years ago / Less than 1 year ago         |
| 2.03 | How many years of experience does the MLRO have in AML / CFT?   | More than 5 years / Between 3-5 years / Between 1-3 years / Less than 1 year |
| 2.04 | Is the MLRO responsible for areas other than AML / CFT?   | No / Yes   |
| 2.05 | Does the MLRO also hold MLRO positions with other entities?   | No / Yes   |
| 2.06 | If yes, please include total number of MLRO positions held.   | [Number] / Not Available / Not Applicable                                    |
| 2.07 | How many staff members, expressed as FTEs, are part of the AML / CFT team (if one exists)?  | [Number] / Not Available / Not Applicable                                    |
| 2.08 | Is any of the AML / CFT team staff responsible for other roles and responsibilities not attributable to AML / CFT (e.g. front office, back office, etc.)? | No / Yes / Not Applicable  |

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|------|--|---|
| 2.09 | Do you / does your entity implement appropriate procedures (including obtaining a police conduct or equivalent upon hiring) and assess the conduct and integrity of employees (including partners and directors) handling relevant financial business or relevant activity?  | No / Yes / Not Applicable   |
| 2.10 | Have you / your entity, MLRO, Compliance officer, senior management, partners, directors, BOs, and / or shareholders (as applicable) been subject to any regulatory enforcement actions, criminal investigations for ML / FT or any other financial crime and / or subject of negative news reports (if known) in the last five (5) years either in Malta or abroad? | No / Yes  |
| 2.11 | In the past five (5) years, have any employees (including directors and partners) been disciplined for non-compliance with the AML / CFT policies within your entity?  | No / Yes  |
| 2.12 | Have you / your entity outsourced the carrying out of any applicable AML / CFT obligations (within or outside the group)?  | No / Yes (within Group) / Yes (outside Group) / Yes (within and outside Group)  |
| 2.13 | If "Yes", please specify the obligations that are being outsourced.  | Business Risk Assessment / Customer Acceptance Policies / Customer Risk Assessment procedures / Internal controls / Employee screening procedures / CDD procedures / On-going monitoring / Record keeping obligations / Two of the above / Three of the above / All of the above / Not Applicable |

### 3 Business Risk Assessment

|      |  |   |
|------|--|---|
| 3.01 | Have you / your entity performed a Business Risk Assessment?   | No / Yes  |
| 3.02 | What is your / your entity's most recent Business Risk Assessment inherent risk scoring / rating for ML / FT risk?     | High / Medium High / Medium / Low Medium / Low / Not Applicable |
| 3.03 | What is your / your entity's most recent Business Risk Assessment residual risk scoring / rating for ML / FT risk?     | High / Medium High / Medium / Low Medium / Low / Not Applicable |
| 3.04 | Did the Business Risk Assessment conducted take into account the risks and controls related to:                        |   |
|      | a) your / your entity's customers  | No / Yes / Not Applicable                                       |
|      | b) the products and services offered by you / your entity and the transaction risk exposure through same               | No / Yes / Not Applicable                                       |
|      | c) specific countries or geographical areas  | No / Yes / Not Applicable                                       |
|      | d) the distribution channels   | No / Yes / Not Applicable                                       |
| 3.05 | Did the Business Risk Assessment conducted take into account the results of the SNRA and NRA?                          | No / Yes / Not Applicable                                       |
| 3.06 | Has the Business Risk Assessment been approved by senior management (including directors and partners) of your entity? | No / Yes / Not Applicable                                       |

|      |   |  |
|------|---|--|
| 3.07 | Did you / your entity review and / or update the business risk assessment in the prior calendar year? | No / Yes / Not Applicable                      |
| 3.08 | Please ATTACH latest Business Risk Assessment   | [File Upload] / Not Available / Not Applicable |

#### 4 Customer Acceptance and Risk Assessment

|      |   |   |
|------|---|---|
| 4.01 | Do you / does your entity perform a customer risk assessment ("CRA") prior to the acceptance and approval of customers?   | No / Yes sometimes / Yes most of the times / Yes always / Not Applicable                  |
| 4.02 | Please indicate, for all your issuers and / or prospective licensees, where an occasional transaction is carried out, whether you / your entity collects the following:   |   |
|      | a) Identification and verification information (for both natural and legal persons and BOs of legal persons) including: name, nationality / country of incorporation or registration, country of residence, registered office or main place of business               | No / Yes sometimes / Yes most of the times / Yes always / Not Applicable                  |
|      | b) Information on the PEP status of the customer and, where applicable of the beneficial owner  | No / Yes sometimes / Yes most of the times / Yes always / Not Applicable                  |
| 4.03 | Where an occasional transaction is carried out, do you / your entity, depending on the risk, collect information on the customer's source of funds and wealth?  | No / Yes when risk is not low / Yes only when risk is high / Yes, always / Not Applicable |
| 4.04 | Please indicate for all your issuers and / or prospective licensees, where a business relationship is formed or, or depending on the risk, only for a specific part of your issuers and / or prospective licensees, whether you / your entity collects the following: |   |
|      | (a) Nationality / country of incorporation  | No / Only for high risk / Yes / Not Applicable  |
|      | (b) Country of residence / main place of business   | No / Only for high risk / Yes / Not Applicable  |
|      | (c) Nature of business / employment   | No / Only for high risk / Yes / Not Applicable  |
|      | (d) Information on the activities (to be) carried out and on the level of income or turnover  | No / Only for high risk / Yes / Not Applicable  |
|      | (e) Information on the origin of the funds, including any VFAs, used by the customer to finance initial operations  | No / Only for high risk / Yes / Not Applicable  |
|      | (f) the assets which will be accepted or transacted in by the (prospective) issuer and/or prospective licensee and their characteristics  | No / Only for high risk / Yes / Not Applicable  |
|      | (g) Information on the overall wealth of the customers  | No / Only for high risk / Yes / Not Applicable  |
|      | (h) Information on the expected frequency, the geographical distribution and or size of the transactions and cash flows   | No / Only for high risk / Yes / Not Applicable  |
|      | (i) PEP status  | No / Only for high risk / Yes / Not Applicable  |

|      |   |  |
|------|---|--|
| 4.05 | When is the customer due diligence performed on the licence holder and / or issuer?   | Prior to the submission of the whitepaper and/or licence application / Following the submission of the whitepaper and/or licence application / Other |
| 4.06 | If "Other", please specify.   | [Text] / Not Applicable  |
| 4.07 | Did you / your entity acquire new clients through an introducer/s in the prior calendar year?   | No / Yes   |
| 4.08 | If "yes", please indicate the number of introducers used during the prior calendar year.  | [Number] / Not Available / Not Applicable  |
| 4.09 | In the case where an introducer was used, was due diligence performed on the introducer?  | Never / Yes in some instances / Yes in all instances / Not Available / Not Applicable  |
| 4.10 | Do your / your entity's policies and procedures require you to ask each customer if they are acting on behalf of someone else?  | No / Yes   |
| 4.11 | Do you / your entity's policies and procedures require enhanced due diligence to be applied in higher risk situations?  | No / Yes   |
| 4.12 | Do your / your entity's policies and procedures require enhanced due diligence to be applied where the customer or beneficial owner is a PEP?   | No / Yes when risk is not low / Yes only when risk is high / Yes, always   |
| 4.13 | Do you / does your entity screen customers and, where applicable, their beneficial owners against sanction lists, PEP lists and to see whether they were the subject of adverse media at onboarding?  | No / Yes   |
| 4.14 | Does your entity accept (prospective) issuers and/or prospective licensees which allow their customers to:  |  |
|      | (a) Make use of privacy coins   | No / Yes   |
|      | (b) Transfer VFAs from non-custodial wallets  | No / Yes   |
|      | (c) Transfer VFAs which have passed through mixers, tumblers etc  | No / Yes   |
|      | (d) Make use of unverifiable IP addresses or otherwise obscure their location   | No / Yes   |
| 4.15 | Does your entity accept service issuers who do not impose any capping on the amounts invested by acquirers of their VFA?  | No / Yes   |
| 4.16 | Where customer due diligence cannot be completed, do the policies and procedures require you / your entity to consider whether there is a need to file a STR with the FIAU and only proceed with the cancellation / termination of the business relationship once it is determined that there is no suspicion justifying the filing of a STR? | No / Yes, except where CDD can be delayed as per IPs / Yes   |
| 4.17 | When making use of any of the exceptions provided for under Regulation 8 of the PMLFTR, do the customer files include a written justification for the exception and formal approval of the exception?   | No / Yes   |

|      |  |   |
|------|--|---|
| 4.18 | Do policies and procedures require due diligence (including customer risk assessment) to be repeated when there are doubts about the completeness, reliability or accuracy on priorly obtained customer identification information, data or documentation? | No / Yes  |
| 4.19 | In the event that there are changes to your customer's business model, ownership structure or service offering, do you / does your entity review the existing customer risk assessment and, if necessary, update the said risk assessment?                 | No / Yes sometimes / Yes most of the times / Yes always |
| 4.20 | Do policies and procedures require the carrying out of identification and verification of the identity measures and a revisions of the CRA, whenever there is a change in BOs?   | No / Yes  |
| 4.21 | Are any of the customers providing / have any of the customers provided inconsistent / misleading / false information or information which is difficult to verify?   | No / Yes / Not Available                                |

## 5 Ongoing Monitoring / Transaction Scrutiny

|      |  |  |
|------|--|--|
| 5.01 | Where business relationships are established, how frequently does your entity review and update the information held in their files on customers and BOs that are assessed as high risk (or higher)?     | Annually / Every 2-3 years / More than every 3 years / Never / Not Available / Not Applicable                |
| 5.02 | Where business relationships are established, how frequently does your entity review and update the information held in their files on customers and BOs that are not assessed as high risk (or higher)? | Annually / Every 2-3 years / More than every 3 years / Never / Not Available / Not Applicable                |
| 5.03 | Do you / does the entity have an automated transaction monitoring system or is transaction monitoring performed manually?  | Transaction monitoring occurs by means of a system / Transaction monitoring occurs manually / Not Applicable |
| 5.04 | Are you or your entity aware of any of your customers whose assets were frozen, confiscated or seized (in any jurisdiction)?   | No / Yes   |
| 5.05 | How many internal suspicious reports were raised during the prior calendar year?   | [Number] / Not Available / Not Applicable  |
| 5.06 | From the internal reports raised in the prior calendar year, how many cases are still open?  | [Number] / Not Available / Not Applicable  |
| 5.07 | How many customer relationships were terminated / blocked / suspended or were otherwise provided limited services, for AML / CFT related reasons, during the prior calendar year?                        | [Number] / Not Available / Not Applicable  |
| 5.08 | How many potential customers did you / your entity refuse to onboard or service during the prior calendar year, because the ML / FT risk presented fell outside your / your entity's risk appetite?      | [Number] / Not Available / Not Applicable  |

## 6 Policies and Procedures

|      |  |   |
|------|--|---|
| 6.01 | Do you / your entity have written AML / CFT policies and procedures?   | No / Yes  |
| 6.02 | How frequently do you / does your entity review and, where necessary, update your AML / CFT written policies and procedures? | As needed / Monthly / Quarterly / Annually / Between 1-3 years / Every 3 or more years / Not Applicable |

|      |  |   |
|------|--|---|
| 6.03 | Do you / do your entity's procedures provide for measures to determine whether customers and, where applicable, their beneficial owners, are politically exposed persons (PEPs) or PEPs' family members or close associates, prior to commencement of service and on an ongoing basis in line with the ongoing monitoring obligations? | No / Yes                                    |
| 6.04 | Do you / do your entity's policies and procedures require senior management's approval to service or otherwise continue business relationships with, or having the involvement of, PEPs or their family members / close associates?  | No / We do not offer services to PEPs / Yes |
| 6.05 | Do you / does your entity have policies, procedures and measures to follow up on missing documentation from the customer file?   | No / Yes / Not Applicable                   |

## 7 Internal Audit / Independent Testing

|      |  |   |
|------|--|---|
| 7.01 | Have you / your entity, given the size and nature of its business, appointed an officer at management level to monitor the day to day implementation of its AML / CFT measures, policies, controls and procedures?   | No, MLRO has taken this role / Yes, other officer at management level appointed / Considered but not required / Not considered  |
| 7.02 | What was the frequency of the reviews carried out by the appointed officer in the prior calendar year?   | Monthly / Half yearly / Annually / As needed / No reviews performed / Not Applicable  |
| 7.03 | Have you / your entity, given the size and nature of its business, appointed an independent audit function to test its AML / CFT measures, policies, controls and procedures?  | Not considered / Considered but function not required / Yes, independent officer at management level / Yes, external consultant / Yes, internal audit / Not Applicable          |
| 7.04 | What is the frequency of audits carried out by the independent audit function?   | Monthly / Quarterly / Half yearly / Annually / Between 1-3 years / Every 3 or more years / As needed / No reviews performed / Not Applicable                                    |
| 7.05 | When was the last independent audit performed in regards to you / your entity's compliance with the AML / CFT regulations?   | Less than 1 year ago / Between 1 -2 years ago / More than 2 years ago / Never / Not Applicable  |
| 7.06 | What was the overall result of the last audit (relating to AML / CFT) carried out?   | Satisfactory / Satisfactory but improvements required / Unsatisfactory / No audits carried out / Not Applicable   |
| 7.07 | How many "high risk" audit issues were identified in the latest audit report (relating to AML / CFT)?  | [Number] / Not Available / Not Applicable   |
| 7.08 | How many "high risk" audit issues are currently open (relating to AML / CFT)?  | [Number] / Not Available / Not Applicable   |
| 7.09 | If you / your entity outsourced the carrying out of any applicable AML/CFT obligations (within or outside the Group), have you / your entity defined a policy or procedure for testing the quality of the outsourced tasks?                                      | No / Yes / Not Applicable   |
| 7.10 | Where applicable, when was the last time that you / your entity formally assessed the quality of the services provided to you by your outsourced service provider (within and outside the group) which are located in a EU / EEA jurisdiction (including Malta)? | Within the last 3 months / Within the last 6 months / Within the last 12 months / Within the last 2 years / Within the last 3 years / Over 3 years ago / Never / Not Applicable |
| 7.11 | Where applicable, when was the last time that you / your entity formally assessed the quality of the services provided to you by your outsourced service provider (within and outside the group) which are located in a non-EU or non-EEA jurisdiction?          | Within the last 3 months / Within the last 6 months / Within the last 12 months / Within the last 2 years / Within the last 3 years / Over 3 years ago / Never / Not Applicable |

**8 Reporting**

|      |   |   |
|------|---|---|
| 8.01 | Do you / does your entity have policies and procedures regarding the reporting of suspicious activity or transactions?  | No / Yes  |
| 8.02 | Do you inform the MFSA immediately when you / your entity determine that a customer / prospective customer is not a fit and proper person to hold a licence / conduct an offer to the public? | No / Yes sometimes / Yes always   |
| 8.03 | Were there any "internal reports" or "alerts", received during prior calendar year, which were analysed by the MLRO but did not instigate a STR?  | No measures relating to internal reporting or alerts are in place / Yes less than 10 / Yes more than 10 / No, all instigated STRs / Not Available / Not applicable  |
| 8.04 | Were records of all "internal reports" raised during the prior calendar year and the analysis conducted thereon maintained by you / your entity?  | No measures relating to internal reporting or alerts are in place / No / No internal reports submitted / Only internal reports maintained / Yes, internal report & analysis maintained / Not Available / Not Applicable |
| 8.05 | How many requests for information from the Maltese authorities did you / your entity receive about any of your customers during the prior calendar year?                                      | [Number] / Not Available / Not Applicable   |

**9 AML / CFT Training**

|      |  |  |
|------|--|--|
| 9.01 | How often do you and / or any relevant staff attend AML / CFT training?  | Every 3 or more years / Between 1-3 years / Annually / Monthly / Quarterly / As needed |
| 9.02 | Have you and / or relevant staff from your entity attended or received training in the prior calendar year, in relation to specific Maltese AML / CFT regulations (PMLA, PMLFTR, IPs)?   | No / Yes   |
| 9.03 | Please provide the % of staff that received AML / CFT training in the prior calendar year.   | [%] / Not Available / Not Applicable   |
| 9.04 | Please provide the % of board members / partners that received AML / CFT training throughout the prior calendar year.  | [%] / Not Available  |
| 9.05 | Following the attendance of AML / CFT training, are staff tested on the knowledge gained during such training?   | No / Yes   |
| 9.06 | Is your entity's training program uniformly applied to all staff carrying out a relevant activity / relevant financial business (including directors and partners) equally, or is it differentiated according to their duties? | Differentiated / The same for everyone / Not Applicable                                |
| 9.07 | Where AML operational tasks are outsourced (within or outside the Group), have the outsourced provider's staff directly servicing your entity, received training during the prior calendar year in relation to:                |  |
|      | a) Specific Maltese AML/CFT regulations (PLMA, PLMFTR, IPs)  | No / Yes / Not Applicable  |
|      | b) You / your entity's AML/CFT policies and procedures?  | No / Yes / Not Applicable  |



|      |   |                                      |
|------|---|--------------------------------------|
| 9.08 | Where tasks relating to AML / CFT compliance are outsourced (within or outside the Group), what % of the provider's staff directly servicing you / your entity, received training on AML / CFT throughout the prior year? | [%] / Not Available / Not Applicable |
| 9.09 | Does your entity provide AML / CFT training to agents to ensure that agents have an adequate understanding of relevant ML / FT risks and of the AML / CFT policies and procedures they are to apply?                      | No / Yes / Not Applicable            |

## 10 Record Keeping

|       |   |   |
|-------|---|---|
| 10.01 | Do you / your entity have policies and procedures in place providing for compliance with the record keeping obligations arising from the PMLFTR?  | No / Yes  |
| 10.02 | Upon request from the designated authority, is your entity in a position to retrieve the requested customer records / or investigative records immediately?<br>*If you / your entity received reminders or requested extensions for deadlines imposed by the FIAU, do not mark as [yes, always] | Depending on the request / No / Yes, always / Yes, most of the time |

## 11 Customers

|       |   |   |
|-------|---|---|
| 11.01 | Please list the total number of customers as at the end of the prior calendar year.               | [Number] / Not Available / Not Applicable |
| 11.02 | Please list the total number of customer relationships terminated during the prior calendar year. | [Number] / Not Available / Not Applicable |
| 11.03 | Please list the total number of new customers onboarded during the prior calendar year.           | [Number] / Not Available / Not Applicable |

### Customer Type

|       |  |   |
|-------|--|---|
| 11.04 | For each instance noted below, please state the total expressed as a % of the total customers as at the end of the prior calendar year:                        |   |
|       | a) Customers with an ownership structure that includes offshore vehicles, trusts, or other legal arrangements including bearer shares and nominee shareholding | [%] / Not Available                       |
|       | b) Customers with an ownership structure that includes foundations, charities or other not-for-profit entities.  | [%] / Not Available                       |
| 11.05 | How many prospective licensees are you servicing?  | [Number] / Not Available / Not Applicable |
|       | Of the total number of clients, how many offer the following services:   |   |
|       | a) Reception and transmission of orders  | [Number] / Not Available / Not Applicable |
|       | b) Execution of orders on behalf of other persons  | [Number] / Not Available / Not Applicable |

|       |   |   |
|-------|---|---|
| 11.06 | c) Dealing on own account   | [Number] / Not Available / Not Applicable |
|       | d) Portfolio management   | [Number] / Not Available / Not Applicable |
|       | e) Custodian or nominee Services  | [Number] / Not Available / Not Applicable |
|       | f) Investment advice  | [Number] / Not Available / Not Applicable |
|       | g) Placing of virtual financial assets  | [Number] / Not Available / Not Applicable |
|       | h) The operation of a VFA exchange  | [Number] / Not Available / Not Applicable |
| 11.07 | Of the total number of customers, what % are rated as:  |   |
|       | a) % of customers scored / rated as "High Risk"   | [%] / Not Available                       |
|       | b) % of customers scored / rated as "Medium Risk"   | [%] / Not Available                       |
|       | c) % of customers scored / rates as "Low Risk"  | [%] / Not Available                       |
| 11.08 | Does a percentage of your customer base have a risk rating outside of the "high", "medium" and "low" categories?  | No / Yes / Not Applicable                 |
| 11.09 | If a percentage of your customer base have a risk rating outside of the "high", "medium" and "low" categories, please specify any additional risk rating.   | [Text] / Not Applicable                   |
| 11.10 | Please specify the corresponding % of customers of the risk rating stated above.  | [%] / Not Applicable                      |
| 11.11 | Please list the number of customers, of which you are / your entity is aware, which have not filed the financial statements of the year preceding the prior calendar year with the Malta Business Registry. | [Number] / Not Available / Not Applicable |
| 11.12 | Please list the number of customers whereby the independent audit opinion expressed in the last financial statements is either a qualified opinion, an adverse opinion or a disclaimer of opinion.          | [Number] / Not Available / Not Applicable |
| 11.13 | Please list the number of customers who are operating in high-risk industries or trading in high risk or dual use products (as designated by your policies and procedures), or separately as per SL 365.12. | [Number] / Not Available / Not Applicable |
| 11.14 | Please list the number of customers who presented any one or more of the following characteristics:   |   |
|       | a) Carried out VFA offerings with no capping per user   | [Number] / Not Available / Not Applicable |
|       | b) Allow their customers to transact or make use of privacy coins   | [Number] / Not Available / Not Applicable |
|       | c) Allow customers to transfer VFAs from non-custodian wallets  | [Number] / Not Available / Not Applicable |

|       |   |   |
|-------|---|---|
|       | d) Allow customers to transfer VFAs which have passed through mixers, tumblers, etc             | [Number] / Not Available / Not Applicable |
|       | e) Allow customers to make use of unverifiable IP Addresses or otherwise obscure their location | [Number] / Not Available / Not Applicable |
| 11.15 | Do any of your customers accept payments through the following funding methods:                 |   |
|       | a) Prepaid cards  | No / Yes / Not Available                  |
|       | b) Crypto-backed credit cards   | No / Yes / Not Available                  |
|       | c) Funds transferred from institutions that are located in non-EU / EEA jurisdictions           | No / Yes / Not Available                  |

#### Politically Exposed Persons ("PEPs")

*\*as defined in Regulation 2 of the PMLFTR*

|       |  |   |
|-------|--|---|
| 11.16 | How many PEPs (including family members and close associates) are in your / your entity's customer base (including BOs) as at the end of the prior calendar year?  | [Number] / Not Available                                    |
| 11.17 | Please provide a breakdown of the total number of PEPs in your / your entity's customer base as at the end of the prior calendar year:   |   |
|       | a) % of Maltese PEPs (including BOs)   | [%] / Not Available / Not Applicable                        |
|       | b) % of PEPs (including BOs) from EU or EEA jurisdictions (other than Malta)   | [%] / Not Available / Not Applicable                        |
|       | c) % of PEPs (including BOs) from non-EU / EEA jurisdictions.  | [%] / Not Available / Not Applicable                        |
| 11.18 | Do you / your entity have, as at the end of the prior calendar year, PEPs from jurisdictions listed in the FATF lists and / or in the EU list identifying high risk 3rd countries with strategic deficiencies and / or the jurisdictions featuring in the top 20 countries of the Basel Index? | No / Yes / Not Applicable                                   |
| 11.19 | If your answer to the above question was "YES", please identify the top 3 highest risk jurisdictions from the list.  | Select from drop down list / Not Available / Not Applicable |

## 12 Geography

#### Residence of Customers

|       |  |                                      |
|-------|--|--------------------------------------|
|       | Please provide the following information based on your / your entity's customers as at end of prior calendar year  |                                      |
| 12.01 | What percentage of your / your entity's total customers are resident or otherwise incorporated or their principal place of business is in Malta?   | [%] / Not Available / Not Applicable |
| 12.02 | What percentage of your / your entity's total customers are foreign and resident or otherwise incorporated or their principal place of business is in an EU or EEA jurisdiction outside Malta? | [%] / Not Available / Not Applicable |

|       |  |   |
|-------|--|---|
| 12.03 | What percentage of your / your entity's total customers are foreign and resident, or otherwise incorporated or their principal place of business, in a non-EU / EEA jurisdiction?  | [%] / Not Available / Not Applicable                        |
| 12.04 | Did you / your entity have customers, based on the prior calendar year, who are resident or otherwise incorporated or their principal place of business is in a jurisdiction listed in the FATF lists and / or in the EU list identifying high risk 3rd countries with strategic deficiencies and / or the jurisdictions featuring in the top 20 countries of the Basel Index? | No / Yes / Not Applicable                                   |
| 12.05 | If your answer to the above question was "YES", please identify the top 3 highest risk jurisdictions from the list.  | Select from drop down list / Not Available / Not Applicable |
| 12.06 | Do any of your customers provide goods / services (main markets) in or to, a jurisdiction listed in the FATF lists and / or the EU list identifying high risk 3rd countries with strategic deficiencies and / or the jurisdictions featuring in the top 20 countries of the Basel Index?   | No / Yes / Not Available / Not Applicable                   |
| 12.07 | If your answer to the above question was "YES", please identify the top 3 highest risk jurisdictions from the list.  | Select from drop down list / Not Available / Not Applicable |

|       |   |   |
|-------|---|---|
| 12.08 | How many of your total customers market their services in Malta?        | [Number] / Not Available / Not Applicable |
| 12.09 | How many of your total customers market their services in EU / EEA?     | [Number] / Not Available / Not Applicable |
| 12.10 | How many of your total customers market their services in non-EU / EEA? | [Number] / Not Available / Not Applicable |

#### Residence of BOs

*"Beneficial owner" (BO) refers to the natural person(s) who ultimately owns or controls a customer and/or the natural person on whose behalf a transaction is being conducted. It also includes those persons who exercise ultimate effective control over a legal person or arrangement.*

Please provide the following information regarding the BOs of your entity's customers as at end of the prior calendar year:

|       |   |   |
|-------|---|---|
| 12.11 | What % of your / your entity's customers' BOs are resident in Malta?  | [%] / Not Available / Not Applicable                        |
| 12.12 | What % of your / your entity's customers' BOs are foreign and resident in an EU or EEA jurisdiction outside Malta?  | [%] / Not Available / Not Applicable                        |
| 12.13 | What % of your / your entity's customers' BOs are foreign and resident in a non-EU or non-EEA member state jurisdiction?  | [%] / Not Available / Not Applicable                        |
| 12.14 | Did you / your entity's customers, based on the prior calendar year, have BOs who are resident in a jurisdiction listed in the FATF lists and / or the EU list identifying high risk 3rd countries with strategic deficiencies and / or the jurisdictions featuring in the top 20 countries of the Basel Index? | No / Yes / Not Applicable                                   |
| 12.15 | If your answer to the above question was "YES", please identify the top 3 highest risk jurisdictions from the list:   | Select from drop down list / Not Available / Not Applicable |

**13 Interface / Distribution Channels**

Please provide the following information regarding your entity's customers as at end of the prior calendar year:

|       |   |  |
|-------|---|--|
| 13.01 | Of the total number of customers, what % were onboarded or serviced on a non-face-to-face basis in the prior calendar year?   | [%] / Not Available / Not Applicable   |
| 13.02 | Of those customers, who are legal persons and who were onboarded / serviced on a non-face-to-face basis in the prior calendar year, indicate whether the majority are incorporated in Malta, within EU / EEA or outside EU / EEA? | Majority of non-face-to-face customers are incorporated in Malta / Majority of non-face-to-face customers are incorporated within EU/EEA / Majority of non-face-to-face customers are incorporated outside EU/EEA / Not Available / Not Applicable |
| 13.03 | Does your entity have any reliance agreements in place in terms of Regulation 12 of the PMLFTR?   | No / Yes   |
| 13.04 | If reliance was placed on third parties, where are the third parties located?   | Malta / EU / Non-EU / Not Applicable   |
| 13.05 | If reliance is placed on third parties, do the third parties carry out relevant financial business (or equivalent activities) or relevant activity (or equivalent)?   | Relevant financial business (or equivalent activities) / Relevant activity (or equivalent) / Not applicable  |