

Bank of Bhutan Limited

Anti-Money Laundering and Countering the Financing of Terrorism Questionnaire

	General Information			
1	Legal Name of the Institution	Bank of Bhutan Limited		
2	Registered Address	Corporate Head Office, Bank of Bhutan Limited, P.O		
		No.102, Norzin Lam, Thim-Throm, Thim	phu, Bhutan	
3	Swift Address/Website	вниввтвт		
		www.bob.bt		
4	Registered Banking license Numberand	2004569		
	Date	4 th April,1991		
5	Is your institution listed on any stock exchange? If yes, which one?	Not listed		
6	List of Major Shareholders			
		SI no Name	Percentage	
		1 Druk Holding and	80%	
		Investment		
		2 State Bank of India	20%	
7	Name of the Regulatory Authority	Royal Monetary Authority		
8	Please indicate Principal Product and	✓ Deposit and Lending		
	Services offered to your client	✓ Wire Transfer		
		✓ Trade Financing		
9	Major Customer Base (Country(ies)	Bhutan		
10	Contact Person	Pem Gyem		
		Manager, Compliance and AML/CFT Sec	tion	
11	Telephone Number	+975-02-334333, IP:-0011		
12	Email Address	pem.gyem@bob.bt		
13	Have the FI been fined or censured for breach of AML legislation? If yes, please specify.	No		



	General Information		
	Name	Designation	
	Mr. Karma Yonten	Chairman, Office of Performance Management under His Majesty's Secretariat, Non-Independent, Non-Executive Director	
Name of the Board of	Mr.Baranchi Narayan Rath	General Manager (Credit) International Banking Group, State Bank of India, Non-Independent, Non-Executive Director	
Directors	Mr. Sonam Thinley	Deputy Chamberlin to His Majesty the King, Office of Gyelpoi Zimpon, HisMajesty's Secretariat, Independent, Non-Executive Director	
	Mr.Tshering Norbu	Chief Executive Officer, NANO, Independent, Non-Executive Director	
	Ms. Choni Ome	Managing Director, Druk Jasmine Tour, Thimphu Non-independent, Non-Executive Director	
	Mr. Dorji Kadin	Chief Executive Officer, Bank of Bhutan Limited	
	Mr.Dorji Kadin	Chief Executive Officer, Bank of Bhutan Limited	
	Mr.Tshering Tenzin	Director, Corporate Service Department	
	Mr.Prem Bahadur Moktan	Director, Credit & Operations Department	
	Mr.Tsewang Dorji	Director, ICT & Digital Banking Department	
Name of the Top Management	Mr.Pasang Dorji	Chief, Corporate Services Division	
management	Mr.Sangam Chhetri	Chief, ICT & Digital Banking Division	
	Ms.Upahar Subedi	Chief, Corporate Strategy Office	
	Ms.Lhakey Choden Tshering	Chief, Banking Division	
	Mr.Dasang Namgay	Chief, Finance Division	
	Ms.Sonam Lhakey	Chief, Credit Division	
	Mr. Karma Jambayyang	Chief, Internal Audit Division	

Bank of Bhutan Limited, Post Box No: 102, Thimphu, Fixed Line: +975-2-334333,

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ANTI-MONEY LAUNDERING & COMBATING FINANCING OF TERRORISM

QUESTIONNAIRE FOR CORRESPONDENT RELATIONSHIP

A. BASIC INFORMATION

1 Name of the Institution : Bank of Bhutan Limited

2 Registered Address : Corporate Head Office, Bank of Bhutan Limited,

P.O No.102, Norzin Lam, Thim-Throm, Thimphu, Bhutan

3 Website Address : www.bob.bt

4 Principal Business Activities : Commercial Bank

5 Regulatory Authority : Royal Monetary Authority

6 Operational Status : Active

Does your Bank maintain a physical presence in the licensing country?

 □No

B. OWNERSHIP / MANAGEMENT

1 Is your institution listed in any stock exchange? ☐Yes ☐No

If yes, which stock exchange?

2 If "No" to Q1, please provide a list of the major shareholders holding more than 10% shares in your institution.

SI no	Name	Percentage
1	Druk Holding and Investment	80%
2	State Bank of India	20%



C. ANTI-MONEY LAUNDERING AND TERRORIST FINANCING CONTROLS

Additional information to be incorporated at the end of the questionnaire if your answer is "no" to any of the following questions.

l. (General AML & CFT Policies, Practices and Procedures:		
1	Does your institution have policies and procedures approved by your institution's board or senior management to prevent money laundering and combating terrorist financing?	⊠Yes	□No
2	Does your institution have a legal and regulatory compliance program that includes a designated officer that is responsible for coordinating and overseeing the AML/CFT framework?	⊠Yes	□No
3	Has your institution developed written policies documenting the processes to prevent, detect and report suspicious transactions?	⊠Yes	□No
4	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	□No
5	Does your institution permit the opening of anonymous or numbered accounts by customers?	⊠Yes	□No
6	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?	⊠Yes	□No
7	Does your institution have policies covering relationships with Politically Exposed Persons (PEP's), their family and close associates?	⊠Yes	□No
8	Does your institution have policies and procedures that require keeping all the records related to customer identification and their transactions?	⊠Yes	□No
	If "Yes", for how long? Till the account is Active/Open for 10 years		

authorities?



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II.	Risk Assessment		
1	Does your institution have a risk-based assessment of its customer base and their transactions?	⊠Yes	□No
2	Does your institution determine the appropriate level of enhanced due diligence necessary for those categories of customers and transactions for those that have reason(s) to pose a heightened risk of illicit activities at or through the FI?	⊠Yes	□No
III.	Know Your Customer, Due Diligence and Enhanced Due Diligence		
1	Has your institution implemented processes for the identification of Beneficial Ownership (those customers on whose behalf it maintains or operates accounts or conducts transactions)?	⊠Yes	□No
2	Does your institution have a requirement to collect information regarding its customers' business activities?	⊠Yes	□No
3	Does your institution have a process to review and, where appropriate, update customer information relating to high risk client information?	⊠Yes	□No
4	Does your institution have procedures to establish a record for each new customer noting their respective identification documents and 'Know Your Customer' information?	⊠Yes	□No
5	Does your institution complete a risk-based assessment to understand the normal and expected transactions of its customers?	⊠Yes	□No
IV.	Reportable Transactions for Prevention and Detection of ML/TF		
1	Does your institution have policies or practices for the identification and	⊠Yes	□No

reporting of transactions that are required to be reported to the



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2	Where cash transaction reporting is mandatory, does your institution procedures to identify transactions structured to avoid such obligations	have	<u>dhi c</u> ompany	□No
3	Does your institution screen customers and transactions against lists of persons, entities or countries issued by government/competent authority		⊠Yes	□No
4	Does your institution have policies to reasonably ensure that it operates with correspondent banks that possess licenses to operate in countries of origin?	•	⊠Yes	□No
IV.	Transaction Monitoring			
1 [Ooes your institution have a monitoring program for unusual and poter suspicious activity that covers funds transfers and monetary instrunsuch as traveler's checks, money orders, etc?	•	⊠Yes	□No
V	AML Training			
1	Does your institution provide AML& CFT training to relevant employe your organization?	es of	⊠Yes	□No
2	Does your institution communicate new AML related laws or change existing AML related policies or practices to relevant employees?	es to	⊠Yes	□No
3	Does your institution provide AML training to relevant third parties if are employed to carry out some of the functions of your organization?	they	⊠Yes	□No
Space for additional information:				
(Please indicate which question the information is referring to.)				
			•••••	
••••				



D. GENERAL

Does the responses provide in this Declaration applies to the following			
entities?		⊠Yes □No	
· Head Office and all domestic branches		□Yes □No	
· Overseas branches		☐Yes ☐No	
· Domestic subsidiaries		☐Yes ☐No	

· Overseas subsidiaries

If the response to any of the above is "No", please provide a list of the branches and /or subsidiaries that are excluded, including the name of the institution, location and contact details.

I, the undersigned, confirm to the best of my knowledge 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.

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

Signature

Stimming .

Name

Pem Gyem

Designation

Manager, Compliance and AML/CFT Section

Date

26th July, 2023

Contact No

+975-02-334333

Email

pem.gyem@bob.bt