

**the  
Wolfsberg  
Group**

Financial Institution Name:  
Location (Country):

BANK OF INDIA  
FRANCE

| No #                                         | Question                                                                                                                | Answer                                                                                                                                         |
|----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1. ENTITY &amp; OWNERSHIP</b>             |                                                                                                                         |                                                                                                                                                |
| 1                                            | Full Legal name                                                                                                         | BANK OF INDIA                                                                                                                                  |
| 2                                            | Append a list of foreign branches which are covered by this questionnaire (if applicable)                               | NA                                                                                                                                             |
| 3                                            | Full Legal (Registered) Address                                                                                         | 4 RUE HALEVY<br>75009 PARIS                                                                                                                    |
| 4                                            | Full Primary Business Address (if different from above)                                                                 | SAME AS ABOVE                                                                                                                                  |
| 5                                            | Date of Entity incorporation/establishment                                                                              | 17/05/1974                                                                                                                                     |
| 6                                            | Select type of ownership and append an ownership chart if available                                                     |                                                                                                                                                |
| 6 a                                          | Publicly Traded (25% of shares publicly traded)                                                                         | Yes                                                                                                                                            |
| 6 a1                                         | If Y, indicate the exchange traded on and ticker symbol                                                                 | BSE AND NSE<br>532149 AND BANK OF INDIA<br>INE084A01016                                                                                        |
| 6 b                                          | Member Owned/Mutual                                                                                                     | No                                                                                                                                             |
| 6 c                                          | Government or State Owned by 25% or more                                                                                | Yes                                                                                                                                            |
| 6 d                                          | Privately Owned                                                                                                         | No                                                                                                                                             |
| 6 d1                                         | If Y, provide details of shareholders or ultimate beneficial owners with a holding of 10% or more                       | Bank of India Paris is the french branch of the Bank of India Group which is a nationalised bank and owned by the Government of India by > 25% |
| 7                                            | % of the Entity's total shares composed of bearer shares                                                                | Nil                                                                                                                                            |
| 8                                            | Does the Entity, or any of its branches, operate under an Offshore Banking License (OBL) ?                              | No                                                                                                                                             |
| 8 a                                          | If Y, provide the name of the relevant branch/es which operate under an OBL                                             | Not applicable to Bank of India Paris branch                                                                                                   |
| 9                                            | Does the Bank have a Virtual Bank License or provide services only through online channels?                             | No                                                                                                                                             |
| 10                                           | Provide Legal Entity Identifier (LEI) if available                                                                      | 213800TTJFBWZSFU7C73                                                                                                                           |
| <b>2. AML, CTF &amp; SANCTIONS PROGRAMME</b> |                                                                                                                         |                                                                                                                                                |
| 11                                           | Does the Entity have a programme that sets minimum AML, CTF and Sanctions standards regarding the following components: |                                                                                                                                                |
| 11 a                                         | Appointed Officer with sufficient experience/expertise                                                                  | Yes                                                                                                                                            |
| 11 b                                         | Adverse Information Screening                                                                                           | Yes                                                                                                                                            |
| 11 c                                         | Beneficial Ownership                                                                                                    | Yes                                                                                                                                            |
| 11 d                                         | Cash Reporting                                                                                                          | Yes                                                                                                                                            |
| 11 e                                         | CDD                                                                                                                     | Yes                                                                                                                                            |
| 11 f                                         | EDD                                                                                                                     | Yes                                                                                                                                            |



|                                                              |                                                                                                                                                                                |                |                                     |
|--------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------------------|
| 11 g                                                         | Independent Testing                                                                                                                                                            | Yes            | <input type="checkbox"/>            |
| 11 h                                                         | Periodic Review                                                                                                                                                                | Yes            | <input type="checkbox"/>            |
| 11 i                                                         | Policies and Procedures                                                                                                                                                        | Yes            | <input type="checkbox"/>            |
| 11 j                                                         | PEP Screening                                                                                                                                                                  | Yes            | <input type="checkbox"/>            |
| 11 k                                                         | Risk Assessment                                                                                                                                                                | Yes            | <input type="checkbox"/>            |
| 11 l                                                         | Sanctions                                                                                                                                                                      | Yes            | <input type="checkbox"/>            |
| 11 m                                                         | Suspicious Activity Reporting                                                                                                                                                  | Yes            | <input type="checkbox"/>            |
| 11 n                                                         | Training and Education                                                                                                                                                         | Yes            | <input type="checkbox"/>            |
| 11 o                                                         | Transaction Monitoring                                                                                                                                                         | Yes            | <input type="checkbox"/>            |
| 12                                                           | Is the Entity's AML, CTF & Sanctions policy approved at least annually by the Board or equivalent Senior Management Committee?                                                 | Yes            | <input type="checkbox"/>            |
| 13                                                           | Does the Entity use third parties to carry out any components of its AML, CTF & Sanctions programme?                                                                           | No             | <input type="checkbox"/>            |
| 13 a                                                         | If Y, provide further details                                                                                                                                                  |                |                                     |
| 14                                                           | Does the entity have a whistleblower policy?                                                                                                                                   | Yes            | <input checked="" type="checkbox"/> |
| <b>3. ANTI BRIBERY &amp; CORRUPTION</b>                      |                                                                                                                                                                                |                |                                     |
| 15                                                           | Has the Entity documented policies and procedures consistent with applicable ABC regulations and requirements to reasonably prevent, detect and report bribery and corruption? | Yes            | <input type="checkbox"/>            |
| 16                                                           | Does the Entity's internal audit function or other independent third party cover ABC Policies and Procedures?                                                                  | Yes            | <input type="checkbox"/>            |
| 17                                                           | Does the Entity provide mandatory ABC training to:                                                                                                                             |                |                                     |
| 17 a                                                         | Board and Senior Committee Management                                                                                                                                          | Yes            | <input type="checkbox"/>            |
| 17 b                                                         | 1st Line of Defence                                                                                                                                                            | Yes            | <input type="checkbox"/>            |
| 17 c                                                         | 2nd Line of Defence                                                                                                                                                            | Yes            | <input type="checkbox"/>            |
| 17 d                                                         | 3rd Line of Defence                                                                                                                                                            | Yes            | <input type="checkbox"/>            |
| 17 e                                                         | Third parties to which specific compliance activities subject to ABC risk have been outsourced                                                                                 | Not applicable | <input type="checkbox"/>            |
| 17 f                                                         | Non-employed workers as appropriate (contractors/consultants)                                                                                                                  | Not Applicable | <input type="checkbox"/>            |
| <b>4. AML, CTF &amp; SANCTIONS POLICIES &amp; PROCEDURES</b> |                                                                                                                                                                                |                |                                     |
| 18                                                           | Has the Entity documented policies and procedures consistent with applicable AML, CTF & Sanctions regulations and requirements to reasonably prevent, detect and report:       |                |                                     |
| 18 a                                                         | Money laundering                                                                                                                                                               | Yes            | <input type="checkbox"/>            |
| 18 b                                                         | Terrorist financing                                                                                                                                                            | Yes            | <input type="checkbox"/>            |
| 18 c                                                         | Sanctions violations                                                                                                                                                           | Yes            | <input type="checkbox"/>            |
| 19                                                           | Does the Entity have policies and procedures that:                                                                                                                             |                |                                     |
| 19 a                                                         | Prohibit the opening and keeping of anonymous and fictitious named accounts                                                                                                    | Yes            | <input type="checkbox"/>            |
| 19 b                                                         | Prohibit the opening and keeping of accounts for unlicensed banks and/or NBFIs                                                                                                 | Yes            | <input type="checkbox"/>            |
| 19 c                                                         | Prohibit dealing with other entities that provide banking services to unlicensed banks                                                                                         | Yes            | <input type="checkbox"/>            |
| 19 d                                                         | Prohibit accounts/relationships with shell banks                                                                                                                               | Yes            | <input type="checkbox"/>            |
| 19 e                                                         | Prohibit dealing with another Entity that provides services to shell banks                                                                                                     | Yes            | <input type="checkbox"/>            |
| 19 f                                                         | Prohibit opening and keeping of accounts for Section 311 designated entities                                                                                                   | Yes            | <input type="checkbox"/>            |
| 19 g                                                         | Prohibit opening and keeping of accounts for any of unlicensed/unregulated remittance agents, exchanges houses, casa de cambio, bureaux de change or money transfer agents     | Yes            | <input checked="" type="checkbox"/> |
| 19 h                                                         | Assess the risks of relationships with domestic and foreign PEPs, including their family and close associates                                                                  | Yes            | <input type="checkbox"/>            |
| 19 i                                                         | Define the process for escalating financial crime risk issues/potentially suspicious activity identified by employees                                                          | Yes            | <input type="checkbox"/>            |
| 19 j                                                         | Outline the processes regarding screening for sanctions, PEPs and Adverse Media/Negative News                                                                                  | Yes            | <input type="checkbox"/>            |



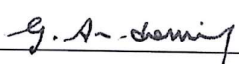

|                            |                                                                                                                                                                                                            |                                                   |                                     |
|----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-------------------------------------|
| 20                         | Has the Entity defined a risk tolerance statement or similar document which defines a risk boundary around their business?                                                                                 | Yes                                               |                                     |
| 21                         | Does the Entity have record retention procedures that comply with applicable laws?                                                                                                                         | Yes                                               |                                     |
| 21 a                       | If Y, what is the retention period?                                                                                                                                                                        | 5 years or more                                   |                                     |
| <b>5. KYC, CDD and EDD</b> |                                                                                                                                                                                                            |                                                   |                                     |
| 22                         | Does the Entity verify the identity of the customer?                                                                                                                                                       | Yes                                               |                                     |
| 23                         | Do the Entity's policies and procedures set out when CDD must be completed, e.g. at the time of onboarding or within 30 days?                                                                              | Yes                                               |                                     |
| 24                         | Which of the following does the Entity gather and retain when conducting CDD? Select all that apply:                                                                                                       |                                                   |                                     |
| 24 a                       | Customer identification                                                                                                                                                                                    | Yes                                               | <input checked="" type="checkbox"/> |
| 24 b                       | Expected activity                                                                                                                                                                                          | Yes                                               | <input checked="" type="checkbox"/> |
| 24 c                       | Nature of business/employment                                                                                                                                                                              | Yes                                               | <input checked="" type="checkbox"/> |
| 24 d                       | Ownership structure                                                                                                                                                                                        | Yes                                               | <input checked="" type="checkbox"/> |
| 24 e                       | Product usage                                                                                                                                                                                              | Yes                                               | <input checked="" type="checkbox"/> |
| 24 f                       | Purpose and nature of relationship                                                                                                                                                                         | Yes                                               | <input checked="" type="checkbox"/> |
| 24 g                       | Source of funds                                                                                                                                                                                            | Yes                                               | <input checked="" type="checkbox"/> |
| 24 h                       | Source of wealth                                                                                                                                                                                           | Yes                                               | <input checked="" type="checkbox"/> |
| 25                         | Are each of the following identified:                                                                                                                                                                      |                                                   |                                     |
| 25 a                       | Ultimate beneficial ownership                                                                                                                                                                              | Yes                                               | <input checked="" type="checkbox"/> |
| 25 a1                      | Are ultimate beneficial owners verified?                                                                                                                                                                   | Yes                                               | <input checked="" type="checkbox"/> |
| 25 b                       | Authorised signatories (where applicable)                                                                                                                                                                  | Yes                                               | <input checked="" type="checkbox"/> |
| 25 c                       | Key controllers                                                                                                                                                                                            | Yes                                               | <input checked="" type="checkbox"/> |
| 25 d                       | Other relevant parties                                                                                                                                                                                     | Yes                                               | <input checked="" type="checkbox"/> |
| 26                         | Does the due diligence process result in customers receiving a risk classification?                                                                                                                        | Yes                                               |                                     |
| 27                         | Does the Entity have a risk based approach to screening customers and connected parties to determine whether they are PEPs, or controlled by PEPs?                                                         | Yes                                               |                                     |
| 28                         | Does the Entity have policies, procedures and processes to review and escalate potential matches from screening customers and connected parties to determine whether they are PEPs, or controlled by PEPs? | Yes                                               |                                     |
| 29                         | Is KYC renewed at defined frequencies based on risk rating (Periodic Reviews)?                                                                                                                             | Yes                                               |                                     |
| 29 a                       | If yes, select all that apply:                                                                                                                                                                             |                                                   |                                     |
| 29 a1                      | Less than one year                                                                                                                                                                                         | Yes                                               | <input checked="" type="checkbox"/> |
| 29 a2                      | 1 – 2 years                                                                                                                                                                                                | Yes                                               | <input checked="" type="checkbox"/> |
| 29 a3                      | 3 – 4 years                                                                                                                                                                                                | No                                                | <input type="checkbox"/>            |
| 29 a4                      | 5 years or more                                                                                                                                                                                            | No                                                | <input type="checkbox"/>            |
| 29 a5                      | Trigger-based or perpetual monitoring reviews                                                                                                                                                              | Yes                                               | <input checked="" type="checkbox"/> |
| 29 a6                      | Other (please specify)                                                                                                                                                                                     |                                                   |                                     |
| 30                         | From the list below, which categories of customers or industries are subject to EDD and/or are restricted, or prohibited by the Entity's FCC programme?                                                    |                                                   |                                     |
| 30 a                       | Arms, Defence, Military                                                                                                                                                                                    | Do not have this category of customer or industry | <input type="checkbox"/>            |
| 30 b                       | Correspondent Banks                                                                                                                                                                                        | Always subject to EDD                             | <input checked="" type="checkbox"/> |
| 30 b1                      | If EDD or EDD & restricted, does the EDD assessment contain the elements as set out in the Wolfsberg Correspondent Banking Principles 2022?                                                                | Yes                                               | <input checked="" type="checkbox"/> |
| 30 c                       | Embassies/Consulates                                                                                                                                                                                       | EDD on risk-based approach                        | <input checked="" type="checkbox"/> |
| 30 d                       | Extractive industries                                                                                                                                                                                      | Do not have this category of customer or industry | <input type="checkbox"/>            |
| 30 e                       | Gambling customers                                                                                                                                                                                         | Prohibited                                        | <input checked="" type="checkbox"/> |
| 30 f                       | General Trading Companies                                                                                                                                                                                  | EDD on risk-based approach                        | <input checked="" type="checkbox"/> |
| 30 g                       | Marijuana-related Entities                                                                                                                                                                                 | Prohibited                                        | <input checked="" type="checkbox"/> |
| 30 h                       | MSB/MVTS customers                                                                                                                                                                                         | Do not have this category of customer or industry | <input type="checkbox"/>            |
| 30 i                       | Non-account customers                                                                                                                                                                                      | Do not have this category of customer or industry | <input type="checkbox"/>            |
| 30 j                       | Non-Government Organisations                                                                                                                                                                               | Always subject to EDD                             | <input checked="" type="checkbox"/> |
| 30 k                       | Non-resident customers                                                                                                                                                                                     | EDD on risk-based approach                        | <input checked="" type="checkbox"/> |





|                                      |                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                      |                                     |
|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| 30 l                                 | Nuclear power                                                                                                                                                                                                                                                                              | Prohibited                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/>            |
| 30 m                                 | Payment Service Provider                                                                                                                                                                                                                                                                   | Always subject to EDD                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> |
| 30 n                                 | PEPs                                                                                                                                                                                                                                                                                       | Always subject to EDD                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> |
| 30 o                                 | PEP Close Associates                                                                                                                                                                                                                                                                       | Always subject to EDD                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> |
| 30 p                                 | PEP Related                                                                                                                                                                                                                                                                                | Always subject to EDD                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> |
| 30 q                                 | Precious metals and stones                                                                                                                                                                                                                                                                 | Do not have this category of customer or industry                                                                                                                                                                                                                                                                    | <input checked="" type="checkbox"/> |
| 30 r                                 | Red light businesses/Adult entertainment                                                                                                                                                                                                                                                   | Prohibited                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/>            |
| 30 s                                 | Regulated charities                                                                                                                                                                                                                                                                        | Always subject to EDD                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> |
| 30 t                                 | Shell banks                                                                                                                                                                                                                                                                                | Prohibited                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/>            |
| 30 u                                 | Travel and Tour Companies                                                                                                                                                                                                                                                                  | EDD on risk-based approach                                                                                                                                                                                                                                                                                           | <input checked="" type="checkbox"/> |
| 30 v                                 | Unregulated charities                                                                                                                                                                                                                                                                      | Prohibited                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/>            |
| 30 w                                 | Used Car Dealers                                                                                                                                                                                                                                                                           | Do not have this category of customer or industry                                                                                                                                                                                                                                                                    | <input checked="" type="checkbox"/> |
| 30 x                                 | Virtual Asset Service Providers                                                                                                                                                                                                                                                            | Do not have this category of customer or industry                                                                                                                                                                                                                                                                    | <input type="checkbox"/>            |
| 30 y                                 | Other (specify)                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                      |                                     |
| 31                                   | If restricted, provide details of the restriction                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                      |                                     |
| <b>6. MONITORING &amp; REPORTING</b> |                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                      |                                     |
| 32                                   | Does the Entity have risk based policies, procedures and monitoring processes for the identification and reporting of suspicious activity?                                                                                                                                                 | Yes                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/>            |
| 33                                   | What is the method used by the Entity to monitor transactions for suspicious activities?                                                                                                                                                                                                   | Combination of automated and manual                                                                                                                                                                                                                                                                                  | <input type="checkbox"/>            |
| 33 a                                 | If manual or combination selected, specify what type of transactions are monitored manually                                                                                                                                                                                                | Enhanced due diligence controls carried out manually for transactions related to high risk third countries and for significant amounts ( threshold levels defined as per line of business ( funds transfer, cross border payments etc) All trade Finance operations are subject to due diligence controls pre trade. |                                     |
| 34                                   | Does the Entity have regulatory requirements to report suspicious transactions?                                                                                                                                                                                                            | Yes                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/>            |
| 34 a                                 | If Y, does the Entity have policies, procedures and processes to comply with suspicious transactions reporting requirements?                                                                                                                                                               | Yes                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/>            |
| 35                                   | Does the Entity have policies, procedures and processes to review and escalate matters arising from the monitoring of customer transactions and activity?                                                                                                                                  | Yes                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/>            |
| <b>7. PAYMENT TRANSPARENCY</b>       |                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                      |                                     |
| 36                                   | Does the Entity adhere to the Wolfsberg Group Payment Transparency Standards?                                                                                                                                                                                                              | Yes                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/>            |
| 37                                   | Does the Entity have policies, procedures and processes to reasonably comply with and have controls in place to ensure compliance with:                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                      |                                     |
| 37 a                                 | FATF Recommendation 16                                                                                                                                                                                                                                                                     | Yes                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/>            |
| 37 b                                 | Local Regulations                                                                                                                                                                                                                                                                          | Yes                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/>            |
| 37 b1                                | If Y, Specify the regulation                                                                                                                                                                                                                                                               | EU regulation 2015-847, US travel rules , India, Singapore (MAS Guidance)                                                                                                                                                                                                                                            |                                     |
| 37 c                                 | If N, explain                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                      |                                     |
| <b>8. SANCTIONS</b>                  |                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                      |                                     |
| 38                                   | Does the Entity have a Sanctions Policy approved by management regarding compliance with sanctions law applicable to the Entity, including with respect to its business conducted with, or through accounts held at foreign financial institutions?                                        | Yes                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/>            |
| 39                                   | Does the Entity have policies, procedures or other controls reasonably designed to prohibit and/or detect actions taken to evade applicable sanctions prohibitions, such as stripping, or the resubmission and/or masking, of sanctions relevant information in cross border transactions? | Yes                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/>            |



|                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                     |                                                                                                     |                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------|
| 40                                                                                                                                                                                                                                              | Does the Entity screen its customers, including beneficial ownership information collected by the Entity, during onboarding and regularly thereafter against Sanctions Lists?                                                                                                       | Yes                                                                                                 | <input checked="" type="radio"/> |
| 41                                                                                                                                                                                                                                              | Select the Sanctions Lists used by the Entity in its sanctions screening processes:                                                                                                                                                                                                 |                                                                                                     |                                  |
| 41 a                                                                                                                                                                                                                                            | Consolidated United Nations Security Council Sanctions List (UN)                                                                                                                                                                                                                    | Used for screening customers and beneficial owners and for filtering transactions                   | <input checked="" type="radio"/> |
| 41 b                                                                                                                                                                                                                                            | United States Department of the Treasury's Office of Foreign Assets Control (OFAC)                                                                                                                                                                                                  | Used for screening customers and beneficial owners and for filtering transactions                   | <input checked="" type="radio"/> |
| 41 c                                                                                                                                                                                                                                            | Office of Financial Sanctions Implementation HMT (OFSI)                                                                                                                                                                                                                             | Used for screening customers and beneficial owners and for filtering transactions                   | <input checked="" type="radio"/> |
| 41 d                                                                                                                                                                                                                                            | European Union Consolidated List (EU)                                                                                                                                                                                                                                               | Used for screening customers and beneficial owners and for filtering transactions                   | <input checked="" type="radio"/> |
| 41 e                                                                                                                                                                                                                                            | Lists maintained by other G7 member countries                                                                                                                                                                                                                                       | Used for screening customers and beneficial owners and for filtering transactions                   | <input checked="" type="radio"/> |
| 41 f                                                                                                                                                                                                                                            | Other (specify)                                                                                                                                                                                                                                                                     | French List<br>Belgian List<br>Indian Ministry List<br>Chinese Ministry List<br>Japan Ministry List |                                  |
| 42                                                                                                                                                                                                                                              | Does the Entity have a physical presence, e.g. branches, subsidiaries, or representative offices located in countries/regions against which UN, OFAC, OFSI, EU or G7 member countries have enacted comprehensive jurisdiction-based Sanctions?                                      | No                                                                                                  | <input checked="" type="radio"/> |
| <b>9. TRAINING &amp; EDUCATION</b>                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                     |                                                                                                     |                                  |
| 43                                                                                                                                                                                                                                              | Does the Entity provide mandatory training, which includes:                                                                                                                                                                                                                         |                                                                                                     |                                  |
| 43 a                                                                                                                                                                                                                                            | Identification and reporting of transactions to government authorities                                                                                                                                                                                                              | Yes                                                                                                 | <input checked="" type="radio"/> |
| 43 b                                                                                                                                                                                                                                            | Examples of different forms of money laundering, terrorist financing and sanctions violations relevant for the types of products and services offered                                                                                                                               | Yes                                                                                                 | <input checked="" type="radio"/> |
| 43 c                                                                                                                                                                                                                                            | Internal policies for controlling money laundering, terrorist financing and sanctions violations                                                                                                                                                                                    | Yes                                                                                                 | <input checked="" type="radio"/> |
| 43 d                                                                                                                                                                                                                                            | New issues that occur in the market, e.g. significant regulatory actions or new regulations                                                                                                                                                                                         | Yes                                                                                                 | <input checked="" type="radio"/> |
| 44                                                                                                                                                                                                                                              | Is the above mandatory training provided to :                                                                                                                                                                                                                                       |                                                                                                     |                                  |
| 44 a                                                                                                                                                                                                                                            | Board and Senior Committee Management                                                                                                                                                                                                                                               | Yes                                                                                                 | <input checked="" type="radio"/> |
| 44 b                                                                                                                                                                                                                                            | 1st Line of Defence                                                                                                                                                                                                                                                                 | Yes                                                                                                 | <input checked="" type="radio"/> |
| 44 c                                                                                                                                                                                                                                            | 2nd Line of Defence                                                                                                                                                                                                                                                                 | Yes                                                                                                 | <input checked="" type="radio"/> |
| 44 d                                                                                                                                                                                                                                            | 3rd Line of Defence                                                                                                                                                                                                                                                                 | Yes                                                                                                 | <input checked="" type="radio"/> |
| 44 e                                                                                                                                                                                                                                            | Third parties to which specific FCC activities have been outsourced                                                                                                                                                                                                                 | Not Applicable                                                                                      | <input checked="" type="radio"/> |
| 44 f                                                                                                                                                                                                                                            | Non-employed workers (contractors/consultants)                                                                                                                                                                                                                                      | Not Applicable                                                                                      | <input checked="" type="radio"/> |
| <b>10. AUDIT</b>                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                     |                                                                                                     |                                  |
| 45                                                                                                                                                                                                                                              | In addition to inspections by the government supervisors/regulators, does the Entity have an internal audit function, a testing function or other independent third party, or both, that assesses FCC AML, CTF, ABC, Fraud and Sanctions policies and practices on a regular basis? | Yes                                                                                                 | <input checked="" type="radio"/> |
| <b>Signature Page</b>                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                     |                                                                                                     |                                  |
| Wolfsberg Group Financial Crime Compliance Questionnaire 2023 (FCCQ V1.2)                                                                                                                                                                       |                                                                                                                                                                                                                                                                                     |                                                                                                     |                                  |
| BANK OF INDIA, PARIS BRANCH _____ (Financial Institution name)                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                     |                                                                                                     |                                  |
| I, <u>Ginette ANDONISSAMY</u> (Senior Compliance Manager- Second Line representative), certify that I have read and understood this declaration, that the answers provided in this Wolfsberg FCCQ are complete and correct to my honest belief. |                                                                                                                                                                                                                                                                                     |                                                                                                     |                                  |
|  _____ (Signature & Date)<br>28/02/24                                                                                                                        |                                                                                                                                                                                                                                                                                     |                                                                                                     |                                  |
|                                                                                                                                                             |                                                                                                                                                                                                                                                                                     |                                                                                                     |                                  |