|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **General information** | | | | |
|  | Company name: |  | | |
|  | Address of registered office (or address of the branch): |  | | |
|  | CBE number: |  | | |
|  | Please indicate whether your company acts as a parent company / stand-alone company in Belgium, or whether it operates as part (subsidiary, branch, establishment) of a group in Belgium: | Parent company / Stand-alone company: |  | |
| Part (subsidiary, branch, establishment) of a group: |  | |
|  | (i) Shareholder structure of your company **or**, if your company is part of a group, (ii) the shareholder structure of its ultimate parent company[[1]](#footnote-1) + the percentage of shares held: |  | *Type* | *Percentage of shares* |
| Listed: |  | % |
| Private: |  | % |
| Public: |  | % |
| Other (please specify): |  | % |
|  | Member of the statutory governing body (or, where appropriate, the management committee) responsible at the highest level for proper compliance with the Belgian AML/CFT legislation: | Name: |  | |
| Function: |  | |
| Telephone number: |  | |
| E-mail address: |  | |
|  | Compliance Officer: | Name: |  | |
| Telephone number: |  | |
| E-mail address: |  | |
|  | Person responsible for AMLF/CFT: | Name: |  | |
| Telephone number: |  | |
| E-mail address: |  | |
|  | Number of FTEs employed in your company (across departments; branches should only report the number of FTEs active in Belgium): |  | | |
|  | Number of FTEs employed in the compliance function (both internal and external staff members; branches should only report the number of FTEs active in Belgium): |  | | |
|  | Number of FTEs within the compliance function dedicated to AML/FT (both internal and external staff members; branches should only report the number of FTEs active in Belgium): |  | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Geographical presence** | | | | | **Notes / Comments** |
| **2.A Insurance companies governed by Belgian law (only to be completed by insurance companies governed by Belgian law)** | | | | | |
|  | Number of agents in Belgium as at 31/12/2016 (total): | |  | |  |
|  | Number of agents in Belgium holding the legal status of credit institution or banking agent as at 31/12/2016: | |  | |  |
|  | Number of brokers and/or brokerage firms in Belgium working for your company as at 31/12/2016: | |  | |  |
|  | Branches within the EU as at 31/12/2016: | Number: | |  |  |
| Locations (please mention the countries where the branches are established): | |  |  |
|  | Branches outside the EU as at 31/12/2016: | Number: | |  |  |
| Locations (please mention the countries where the agents are established): | |  |  |
|  | Subsidiaries in Belgium performing an activity in the financial sector[[2]](#footnote-2) as at 31/12/2016: | Number: | |  |  |
|  | Subsidiaries within the EU performing an activity in the financial sector[[3]](#footnote-3) as at 31/12/2016: | Number: | |  |  |
| Locations (please mention the countries where the subsidiaries are established): | |  |  |
|  | Subsidiaries outside the EU performing an activity in the financial sector[[4]](#footnote-4) as at 31/12/2016: | Number: | |  |  |
| Locations (please mention the countries where the subsidiaries are established): | |  |  |
|  | If your company is part of a group, please annex a schematic representation of the group structure to this document. | | | |  |
| **2.B Branches of foreign insurance companies (only to be completed by Belgian branches of foreign insurance companies)** | | | | | |
|  | Number of agents and/or agencies in Belgium as at 31/12/2016 (total): | |  | |  |
|  | Number of agents and/or agencies in Belgium holding the legal status of credit institution or banking agent as at 31/12/2016: | |  | |  |
|  | Number of brokers and/or brokerage firms in Belgium working for your company as at 31/12/2016: | |  | |  |
|  | Please annex a schematic representation of the group structure to this document. | | | |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Activities** | | | | | **Notes / Comments** |
|  | Please indicate which activities are **effectively** performed by your company as at 31/12/2016 (activities for which your company has received authorisation but which are not actually performed, need **not** be mentioned).  Please also state whether your company is currently still offering portfolios to its customers in the different classes of insurance, or whether it only has a run-off portfolio (or both). |  | Active portfolio(s) | Run-off portfolios |  |
| CLASS 21 |  |  |  |
| CLASS 22 |  |  |  |
| CLASS 23 |  |  |  |
| CLASS 24 |  |  |  |
| CLASS 25 |  |  |  |
| CLASS 26 |  |  |  |
| CLASS 27 |  |  |  |
| CLASS 28 |  |  |  |
| CLASS 29 |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **Mortgage activity** | | | | **Notes / Comments** |
|  | Does your company have any mortgage receivables on the asset side of its balance sheet? | YES |  |  |
| NO |  |  |
|  | If your company answered 'YES' to the previous question, please state the number of mortgage receivables recorded by your company on the asset side of its balance sheet, as well as the corresponding accounting value of these receivables (under BGAAP): | | | |
| * Number of mortgage receivables: |  | |  |
| * Corresponding amount of these receivables (in euros): |  | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **Type of customers** | | | | **Notes / Comments** |
| *Note: 'customers' refers to the holders of the life insurance contracts or other products (not the proxies of the accounts and/or the legal representatives of the holders of products).* | | | | |
|  | Total number of customers as at 31/12/2016: |  | |  |
|  | Total number of new customers in 2016: |  | |  |
|  | Breakdown of the number of customers by category: | number of natural persons: |  |  |
| number of legal persons: |  |  |
| number of trusts or other legal arrangements (without legal personality): |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **Geographical distribution of customers** | | | | **Notes / Comments** |
|  | Number of customers who are not domiciled in Belgium or whose registered office is not situated in Belgium as at 31/12/2016 : | |  |  |
|  | Number of customers as referred to in 6.1 who are domiciled or have their registered office outside Belgium but within the EU: | |  |  |
|  | Number of customers as referred to in 6.1 who are domiciled or have their registered office outside Belgium and outside the EU: | |  |  |
|  | Number of customers as referred to in 6.1 who are domiciled or have their registered office in (i) a high-risk country, (ii) a sanctioned country or (iii), an offshore country, as included in Annex 1. | |  |  |
|  | Give a breakdown of the number of customers as referred to in 6.4 per country (please add additional lines if your institution has clients who are domiciled or have their registered office in more than 5 of the countries mentioned in annex 1): | | | |
| *Country:* | *Number of customers:* | |  |
|  |  | |  |
|  |  | |  |
|  |  | |  |
|  |  | |  |
|  |  | |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Breakdown of customers by risk category** | | | **Notes / Comments** |
|  | Please provide a breakdown of your customers by risk category as at 31/12/2016 (if you use another breakdown, please fill in this information in a way that most closely approximates the 3 aforementioned categories and provide further clarification in the notes): | | |
| * Number of 'high-risk' customers: |  |  |
| * Number of 'medium-risk' customers: |  |  |
| * Number of 'low-risk' customers: |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Remotely identified customers** | | | **Notes / Comments** |
|  | The total number of customers identified remotely by your company as at 31/12/2016: |  |  |
|  | The number of customers identified remotely by your company in 2016: |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Numbered accounts** | | | **Notes / Comments** |
|  | The total number of your customers that have numbered accounts or numbered contracts as at 31/12/2016: |  |  |
|  | The total number of your customers for whom your company opened numbered accounts or with whom it concluded a numbered contract in 2016: |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Politically exposed persons (PEPs)** | | | **Notes / Comments** |
| *Note: when calculating the number of PEPs, you should not only include the number of PEP customers, but also the number of PEP agents of your customers, the number of PEP beneficial owners of your customers and the number of PEP beneficial owners of your customers' agents.* | | | |
|  | Please provide the following information regarding PEPs (as at 31/12/2016): | | |
| * Total number of PEPs in your customer base: |  |  |
| * + Number of PEPs – customers (holders of products – policyholder(s)) |  |  |
| * + Number of PEPs – customers' agents |  |  |
| * + Number of PEPs – insured |  |  |
| * + Number of PEPs – beneficiaries of life insurance contracts |  |  |
| * + Number of PEPs – UBOs (of both customers and their agents) |  |  |
| * Number of PEPs domiciled outside Belgium: |  |  |
| * Number of PEPs domiciled in one of the countries included in Annex 1: |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Ultimate beneficial owners (UBOs)** | | | **Notes / Comments** |
|  | Please provide the following information regarding the ultimate beneficial owners of your customers (as at 31/12/2016): | | |
| * Number of UBOs domiciled outside Belgium: |  |  |
| * Number of UBOs domiciled in one of the countries included in Annex 1: |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Refused customers** | | | **Notes / Comments** |
|  | Please provide the following information regarding persons or entities that fit into your company's customer acceptance policy but were refused by your company for AML/CFT related reasons (if the figures provided by your company only cover the refusals decided upon by the compliance function or another competent body, please clarify this in the notes): | | |
| * Total number of refused customers: |  |  |
| * + Number of refused customers – natural persons (PEPs included): |  |  |
| * + Number of refused customers – PEPs: |  |  |
| * + Number of refused customers – legal persons or other legal arrangements (trusts, etc.): |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Life insurance contracts** | | | **Notes / Comments** |
|  | Please provide the total number of life insurance contracts concluded by your company as at 31/12/2016, as well as the corresponding amount of technical provisions: | | |
| * Total number of life insurance contracts concluded as at 31/12/2016: |  |  |
| * Corresponding amount of technical provisions: |  |  |
|  | Please provide the number of new life insurance contracts concluded by your company in 2016, as well as the corresponding amount of technical provisions: | | |
| * Total number of life insurance contracts concluded in 2016: |  |  |
| * Corresponding amount of technical provisions: |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **Volume of life insurance contracts per AML/CFT risk group** | | | | **Notes / Comments** |
| *Note: please answer the following questions, taking into account the cartography of risks according to the nature of the insurance product (and the classification of insurance products by risk category) developed by Assuralia in 2012. If your company does not follow the product typology developed by Assuralia for the classification of its life insurance contracts by risk group, please answer the questions in this chapter by matching the risk categories used by your company and the risk categories used in this chapter as closely as possible (insurance products with significant risk / insurance products with moderate risk / insurance products with low risk) and clarify in the notes that the figures provided were collected based on another methodology than the one underlying the product typology developed by Assuralia.* | | | | |
|  | Classification of life insurance contracts by risk group as at 31/12/2016 | *Number of life insurance contracts:* | *Corresponding amount of technical provisions:* |  |
| *'Significant risk' contracts:* |  |  |  |
| *'Moderate risk' contracts:* |  |  |  |
| *'Low-risk' contracts:* |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Life insurance contracts, risk and distribution channels used** | | | | **Notes / Comments** | |
| *Note: Please answer the questions in this chapter taking into account Assuralia's product typology (also see the note to Chapter 14). If your company does not possess concrete numerical data, please use the answer box provided for in question 15.1 to give a qualitative description of the importance to your company of each of the distribution channels used.* | | | | |
|  | Qualitative description of the importance of each of the distribution channels used by your company (not to be completed if you have the necessary statistical data): |  | | |
|  | For **total** life insurance contracts as at 31/12/2016 | *Number of life insurance contracts:* | *Corresponding amount of technical provisions:* |  | |
| *Direct sales:* |  |  |  | |
| *Sales through insurance brokers:* |  |  |  | |
| *Sales through an insurance agent holding the legal status of credit institution or banking agent:* |  |  |  | |
| *Sales through insurance agents other than those holding the legal status of credit institution or banking agent:* |  |  |  | |
|  | For the **significant risk** life insurance contracts as at 31/12/2016 | *Number of life insurance contracts:* | *Corresponding amount of technical provisions:* |  | |
| *Direct sales:* |  |  |  | |
| *Sales through insurance brokers:* |  |  |  | |
| *Sales through an insurance agent holding the legal status of credit institution or banking agent:* |  |  |  | |
| *Sales through insurance agents other than those holding the legal status of credit institution or banking agent:* |  |  |  | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **Cash transactions** | | | | **Notes / Comments** |
|  | Do your company's internal procedures allow premiums for life insurance contracts to be paid in cash? | YES |  |  |
| NO |  |
|  | If the answer to the previous question was 'YES', what was the total amount of premiums received in cash by your company in 2016 (in euros)? | |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **Premiums received** | | | | **Notes / Comments** |
|  | Please provide the total amount of premiums received in 2016 for life insurance contracts, in euros (gross premium income and single premium): | |  |  |
|  | Please provide the total (in euros) of the amounts received in 2016 that were paid from a foreign bank account or other type of account: | |  |  |
|  | Please provide the total (in euros) of the amounts received in 2016 that were paid from a bank account or other type of account from one of the countries included in Annex 1: | |  |  |
|  | Do your company's internal procedures state that customers may only pay their premiums from an account held (partly) in their name? In other words, do your company's internal procedures prohibit the payment of customers' premiums by a third party, barring a number of well-defined exceptions (e.g. transfers from accounts of minors)? | YES |  |  |
| NO |  |
| N/A |  |
|  | If your company answered 'YES' to the previous question, does your company also take concrete control measures to ensure that the premiums on behalf of customers are paid solely by these customers themselves? (e.g. by verifying whether the account numbers from which the premiums are paid, correspond with the accounts provided by your customers, possibly on a sample basis?) | YES |  |  |
| NO |  |
| N/A |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Capital paid, interest rates or other sums** | | | **Notes / Comments** |
|  | Please provide the total amount of the sums paid by your company in 2016 in the context of the life insurance contracts concluded by your company (payments to beneficiaries, refunds to the policyholder, etc.): |  |  |
|  | Please provide the total amount of the payments as referred to in 18.1, made to a foreign bank account or other type of account (in euros): |  |  |
|  | Please provide the total amount of the payments as referred to in 18.1, made to a bank account or other type of account from one of the countries included in Annex 1 (in euros): |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Significant deposits** | | | **Notes / Comments** |
|  | Please indicate for how many life insurance contracts a one-off initial investment or additional deposit amounting to 100,000 euros or more was made in 2016. Please also indicate the total amount of these investments or additional deposits.  *Note: this only applies to investments or deposits made by the customer himself, not by another insurer or pension fund.* | | |
| * Number of life insurance contracts: |  |  |
| * Total amount (in euros): |  |  |
|  | Please indicate how many of the deposits as referred to in 19.1 relate to the life insurance contracts identified as contracts with significant risk in Assuralia's code of conduct: | | |
| * Number of life insurance contracts: |  |  |
| * Total amount (in euros): |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Significant payments** | | | **Notes / Comments** |
|  | With regard to the life insurance contracts, please indicate below the number of one-off payments of 250,000 euros or more made in 2016, as well as the total amount of these payments.  *Note: this refers only to payments to the customer himself, not payments to other insurers or pension funds.* | | |
| * Number of payments: |  |  |
| * Total amount (in euros): |  |  |
|  | Please indicate how many of the payments as referred to in 20.1 pertain to the life insurance contracts identified as contracts with significant risk in Assuralia's code of conduct: | | |
| * Number of payments: |  |  |
| * Total amount (in euros): |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Surrender and terminated contracts** | | | **Notes / Comments** |
|  | Please indicate below the number of life insurance contracts (as well as the total value of these contracts) surrendered by customers in 2016. Only life insurance contracts surrendered within three years after conclusion with a value of 25,000 euros or more should be taken into account. | | |
| * Number of contracts surrendered: |  |  |
| * Total amount (in euros): |  |  |
|  | Please indicate how many of the surrenders as referred to in 21.1 pertain to the life insurance contracts identified as contracts with significant risk in Assuralia's code of conduct: | | |
| * Number of contracts surrendered: |  |  |
| * Total amount (in euros): |  |  |
|  | Please indicate below the number of life insurance contracts terminated within the legal notice period in 2016, for which premium deposits or refunds of 2,500 euros or more were made. | | |
| * Number of contracts surrendered: |  |  |
| * Total amount (in euros): |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Analysis of atypical transactions** | | | **Notes / Comments** |
|  | How many atypical transactions for which an internal report was submitted to the person responsible for AML/CFT were detected by your company in 2016? |  |  |
|  | How many of the atypical transactions as referred to in 22.1 were detected by first-line monitoring (the staff maintaining contact with customers) and by second-line monitoring (the automatic system for the detection of atypical transactions)? | | |
| * Number detected by first-line monitoring: |  |  |
| * Number detected by second-line monitoring: |  |  |
|  | What is the total number of customers covered by the reports as referred to in 22.1? |  |  |
|  | How many of the atypical reports as referred to in 22.1 pertain to: | | |
| * ... 'high-risk' customers: |  |  |
| * ... 'medium-risk' customers: |  |  |
| * ... 'low-risk' customers: |  |  |
|  | How many of the reports as referred to in 22.1 pertain to cash transactions? |  |  |
|  | How many of the reports as referred to in 22.1 were analysed in 2016 under the responsibility of the person responsible for AML/CFT in your company? |  |  |
|  | What was the average number of staff (expressed in FTEs) specifically tasked with analysing the aforementioned internal reports in 2016, both within the department of the person responsible for AML/CFT and in other departments, but under the direction of the person responsible of AML/CFT? |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Funds and asset freezing** | | | **Notes / Comments** |
|  | Over the course of 2016, how many warnings were handled by your company in relation to the implementation of financial embargos and asset freezing orders?  *Note: 'warnings' should be understood to mean all possible correspondence with the lists of sanctions or embargos: both the warnings generated by your company's automatic screening tools and the warnings detected by first-line monitoring (in case of manual screening against the lists).* |  |  |
|  | Over the course of 2016, how many notifications for asset freezing were sent by your company to the FPS Finance – Treasury, and what was the total amount (in euros)? | | |
| * Number: |  |  |
| * Corresponding amount: |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Notification of suspicious transactions to the CTIF-CFI** | | | **Notes / Comments** |
|  | Over the course of 2016, how many notifications of suspicious transactions did your company submit to the CTIF-CFI, and what was the total amount of the transactions covered by these notifications? | | |
| * Number: |  |  |
| * Corresponding amount: |  |  |
|  | How many of the notifications to the CTIF-CFI as referred to in 24.1 pertain to: | | |
| * ... 'high-risk' customers: |  |  |
| * ... 'medium-risk' customers: |  |  |
| * ... 'low-risk' customers: |  |  |
|  | Over the course of 2016, how many requests for information or other requests regarding AML/CFT did your company receive concerning persons that effectively are or were your customers, their ultimate beneficial owners, their agents or the beneficiaries of life insurance contracts, depending on whether these requests came from: | | |
| * The CTIF-CFI: |  |  |
| * The police or the courts: |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Termination of the business relationship for AML/CFT related reasons** | | | **Notes / Comments** |
|  | Over the course of 2016, how many business relationships with customers were terminated by your company for AML/CFT related reasons? |  |  |
|  | If your company could not terminate the business relationship because of legal provisions of public policy or mandatory legal provisions, or if the termination of the business relationship would cause severe and disproportionate damage to your customer, for how many of your business relationships did your company take other restrictive measures in 2016? |  |  |
|  | In 2016, how many of the terminations as referred to in 25.1 and the other restrictive measures as referred to in 25.2 regarding business relationships pertained to: | | |
| * Customers – natural persons: |  |  |
| * Customers – legal persons or other legal arrangements: |  |  |
|  | How many of the terminations as referred to in 25.1 and the other restrictive measures as referred to in 25.2 regarding business relationships with customers were the subject of a notification to the CTIF-CFI (notifications before as well as after the termination): |  |  |
|  | Please provide the total amount of assets or funds held of customers with whom the business relationship was terminated in 2016 (in euros):  *Note: please provide the amount of assets or funds held at the moment of the decision to terminate the business relationship.* |  |  |
|  | In 2016, how many of the terminations as referred to in 25.1 and the other restrictive measures as referred to in 25.2 regarding business relationships pertained to: | | |
| * ... 'high-risk' customers: |  |  |
| * ... 'medium-risk' customers: |  |  |
| * ... 'low-risk' customers: |  |  |
|  | In 2016, how many of the terminations as referred to in 25.1 and the other restrictive measures as referred to in 25.2 regarding business relationships pertained to PEPs: |  |  |

1. Definition of 'group': a group of companies consisting of a parent company, its branches, its subsidiaries and the entities in which the parent company or its subsidiaries has/have a participating interest, as well as the companies related to each other within the meaning of Article 22 of Directive 2013/34/EU of the European Parliament and of the Council of 26 June 2013 on the annual financial statements, consolidated financial statements and related reports of certain types of undertakings. [↑](#footnote-ref-1)
2. Companies holding a legal status that places them under the supervision of the NBB or the FSMA. [↑](#footnote-ref-2)
3. Companies holding a similar legal status as set out in footnote 2. [↑](#footnote-ref-3)
4. Companies holding a similar legal status as set out in footnote 2. [↑](#footnote-ref-4)