

Anti-Money Laundering Questionnaire Certification

(To be completed by Correspondent Banks)

Section I – General Administrative Information

Legal Name of Institution	Kyongnam Bank		
Legal Form	Corporation		
SWIFT Address / Website	KYNKRZ22 / www.knbank.co.kr		
Principal Place of Business (Address)	246-1, Sokchon-dong, masan, KN, 630-010 Korea		
Registered at / Banking License issuing authority, date and number	18-April, 1970 608-81-00555		
Does your Institution maintain a physical presence¹ in the licensing country?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Is your institution an agency, branch or subsidiary of a bank with a physical presence? If yes, please answer the following questions : • Name of affiliate / parent company : • Licensing country of affiliate / parent company : • Indicate affiliation :: <input type="checkbox"/> agency <input type="checkbox"/> branch <input type="checkbox"/> subsidiar • Is affiliate / parent company publicly traded? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list exchanges and symbols:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is your institution a publicly traded entity? • If yes, please list the exchanges & symbols:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Owners²	Name	Ownership (%)	In case the owner is a juridical entity
			Shareholders Ownership (%)
			Woori Financial Group 99.99992%
Board members & Directors	Name	Position	Years of Service
	Dong-sung, Moon	CEO	1
	Jeung-Hwan, Park	Standing Auditor	2
Are there any Politically Exposed Persons³ among your Institution's ownership structure and executive management?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

1. Physical presence means your institution maintains a physical place of business, other than an electronic address, in a country where it is authorized to conduct banking activities, at which it employs at least one employee on a full-time basis and maintains records of its banking activities, and is subject to supervision by the regulators of the country authorizing the institution's license.
2. For purposes of this questionnaire, an "owner" is any person or juridical entity that, directly or indirectly, owns, controls or has voting power of ten percent (10%) or more of any class of securities of your institution.
3. Politically Exposed Persons (PEPs) are individuals who are or have been entrusted with prominent public functions. (cf. FATF Forty Recommendations).

Section II – Scope of Business Activities

Please list the principal areas of business in which your institution participates in terms of contribution to revenue.

No.	Principal areas of business activity (Commercial, Private, Corporate, Wholesale, Insurance, etc.)		
1	Commercial, Corporate, Private Banking		
2	Insurance		
3	Credit Card		
4			
5			
Major Customers (Multiple choices are applicable)		<input checked="" type="checkbox"/> Individuals <input checked="" type="checkbox"/> Enterprises <input checked="" type="checkbox"/> Financial Institutions <input checked="" type="checkbox"/> Government Others:	
Total Operating Revenue in the latest Fiscal year	US\$ 2,155 Million	Total Employees	2,139 Persons

Section III – Anti-Money Laundering Questionnaire

1. Is your institution subject to supervision by the banking authority which in the country where your institution has banking license? Authority Name : Financial Supervisory Committee Country : Republic of Korea	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. Does your Institution have a legal and regulatory compliance program that includes a designated Compliance officer that is responsible for coordinating and overseeing the AML program which has been approved by senior management?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Does your Institution have policies or practices for the identification and reporting of transactions that are required to be reported to the authorities?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4. Has your Institution developed written policies documenting the processes that they have in place to prevent, detect and report suspicious transactions that has been approved by senior management?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. Does your Institution have a policy prohibiting accounts/relationships with shell banks? (A shell bank is defined as a bank incorporated in a jurisdiction in which it has no physical presence and which is unaffiliated with a regulated financial group.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6. Does your Institution have policies covering relationships with politically exposed persons consistent with industry best practices?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7. Does your Institution require that its AML policies and practices be applied to all branches and subsidiaries in the home country and in locations outside of the home country?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

AML Questionnaire

8. Has your Institution implemented systems for the identification of its customers, including customer information in the case of recorded transactions, account opening, etc. (for example; name, nationality, street address, telephone number, occupation, age / date of birth, number and type of valid official identification, as well as the name of the country / state that issued it)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9. Does your Institution have a risk focused assessment of its customer base and transactions of its customers?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10. Does your Institution determine the appropriate level of enhanced due diligence necessary for those categories of customers and transactions that your Institution has reason to believe pose a heightened risk of illicit activities at or through your institution?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11. Does your Institution have procedures to identify transactions structured to avoid large cash reporting requirements?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12. Does your Institution screen customers or transactions that your institution deems to be of significantly high risk (which may include persons, entities or countries that are contained on lists issued by government/international bodies) required special attention prior to completing any such transactions?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13. Does your Institution have appropriate record retention procedures pursuant to applicable law?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14. Does your Institution provide AML training to relevant employees that includes identification and reporting of transactions that must be reported to government authorities, examples of different forms of money laundering involving your institution's products and services and internal policies to prevent money laundering?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15. Does your Institution retain records of its training sessions including attendance records and relevant training materials used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16. Does your Institution have policies to communicate new AML related laws or changes to existing AML related policies or practices to relevant employees?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17. Does your Institution employ agents to carry out some of the functions of your institution and if so does your institution provides AML training to relevant agents that includes identification and reporting of transactions that must be reported to government authorities, examples of different forms of money laundering involving your institution's products and services and internal policies to prevent money laundering?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
18. Does your Institution provide Payable-through accounts ?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
19. Does your Institution provide Nested accounts?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
※ If you checked "No" from questionnaire no. 1 to 17, please provide comments on any 「No」 responses :	
※ If you checked "Yes" from questionnaire no. 18 to 19, please provide comments on any 「Yes」 responses :	

AML Questionnaire

The undersigned, based on his/her best knowledge and belief, certifies that the aforementioned questions were answered an accurate representation of the existing state of the institution's AML and KYC internal controls and financial service activities, and further that below clauses shall be kept firmly.

- A. The institution responded this certification ensures that any of correspondent accounts or products is not conducted with or on behalf of shell banks.
- B. In any case the institution responded this certification deals a Nested Account; it ensures that an investigation for the AML activities of sub-account holder should be conducted.
- C. In any case the institution responded this certification deals a Payable-through Account; it ensures that reasonably appropriate customer due diligence should be conducted.
- D. The institution responded this certification ensures that it will provide the identification information of customer whom conducted a transaction through Correspondent Account with respondent bank's requirement.

Completed by :	Han-geun, Lee
Position :	Compliance Officer
Date :	May-1, 2009
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Signature :	