

LBMA RGG Questionnaire – Recyclable Gold

| 1. COMPANY DETAILS | |
|--|--|
| a. Name | |
| b. Registered Address | |
| c. Business Address | |
| d. Phone Number | |
| e. Date of Incorporation | |
| f. Country of Incorporation | |
| g. Business Registration Number | |
| h. Tax Identification number | |
| i. VAT number | |
| j. If listed, indicate name of stock exchange(s) and ticker | |
| k. Website | |
| l. External Financial Auditors | |
| m. How many direct and indirect subsidiaries does the company have? <i>Please provide a Group chart</i> | |
| n. Contact Person of the Company | |
| o. Has the Company, its ultimate beneficial owner(s) or member of top management been subject to legal proceedings or under investigation by national or international authorities (past 5 years/current)? <i>Please describe</i> | |

| 2. BUSINESS ACTIVITY | | | |
|----------------------|------------------------------|--------------------------|------------------------|
| a. Type of Business | Bank | <input type="checkbox"/> | Jeweller |
| | Precious Metals | <input type="checkbox"/> | Scrap dealer/pawn shop |
| | Trader/Dealer | <input type="checkbox"/> | Coins dealer |
| | Other Financial Intermediary | <input type="checkbox"/> | Mint |
| | Industrial | <input type="checkbox"/> | Others, please specify |

| | |
|---|---|
| | Wholesaler <input type="checkbox"/> _____ Refinery <input type="checkbox"/> _____ |
| b. Description of core business activity | |
| c. Description of other business activities, if any | |
| d. Does the company hold a specific license to conduct its business(es)? | <input type="checkbox"/> Yes – Please provide a copy Date of issue: _____ Expiry date: _____ <input type="checkbox"/> No <input type="checkbox"/> N/A |
| e. Main Market | |
| f. Main Products | |

| 3. BENEFICIAL OWNERS | | | | |
|---|------|---------|---|---|
| SHAREHOLDERS(S) MORE THAN 10% | | | | |
| Percentage Holding (%) | Name | Address | Country of Incorporation/ Nationality(ies) | Date of Incorporation/ Date of Birth |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| ULTIMATE BENEFICIAL OWNER | | | | |
| SHAREHOLDERS(S) MORE THAN 10% - INDIVIDUAL ONLY | | | | |

| Percentage Holding (%) | Name | Address | Country of Incorporation/ Nationality(ies) | Date of Incorporation/ Date of Birth | PEP Status (YES/NO) |
|------------------------|------|---------|---|---|---------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| 4. MANAGEMENT STRUCTURE | | | | |
|-------------------------|-------|-------|------------------|---------------|
| | Names | Title | Nationality(ies) | Date of Birth |
| a. Board of Directors | | | | |
| b. Management | | | | |

| 5. FINANCIAL INFORMATION | | | |
|-------------------------------|----------|-----------------------|---------------|
| | Currency | Last Reporting Period | Previous Year |
| a. Total Shareholder's Equity | | | |
| b. Turnover | | | |

Please provide copy of latest annual report

| 6. HUMAN RESOURCES | |
|---|--|
| a. Number of Employees within the Company | |
| b. Number of Employees within the Group | |

| 7. ORIGIN OF PHYSICAL PRECIOUS METALS |
|--|
| a. From whom do you source your precious metal products? |

| | | | |
|---|--------------------------|---|--------------------------|
| Bank | <input type="checkbox"/> | Jeweller | <input type="checkbox"/> |
| Precious Metals Trader/Dealer | <input type="checkbox"/> | Scrap dealer/pawn shop | <input type="checkbox"/> |
| Other Financial Intermediary | <input type="checkbox"/> | Coins dealer | <input type="checkbox"/> |
| Industrial | <input type="checkbox"/> | Mint | <input type="checkbox"/> |
| Wholesaler | <input type="checkbox"/> | Others, please specify | <input type="checkbox"/> |
| Refinery | <input type="checkbox"/> | | |
| Individuals | <input type="checkbox"/> | | |
| b. List all country(ies) of origin of precious metals delivered to you | | | |
| c. Do the precious metals supply by you originate from/transit to a conflict affected and human right abuse high risk areas (CAHRA) as defined on the EU CAHRA list? | | | |
| d. Is the Company legally required to have a licence to import precious metals? | | <input type="checkbox"/> Yes – Please provide a copy Date of issue: Expiry date: <input type="checkbox"/> No <input type="checkbox"/> N/A | |

| 8. FACILITIES | YES | NO | N/A |
|--|-----|----|-----|
| a. Does the Company have refining facilities? Location (if different as registered address): | | | |
| b. Does the Company have any melting facilities? Location (if different as registered address): | | | |
| c. Does the Company produce its own jewellery? | | | |
| d. What are the types, forms and percentage of precious metals sourced by the Company? | | | |

| | |
|---|---|
| <input type="checkbox"/> Recycled precious metals (%_____) | |
| <input type="checkbox"/> LBMA GD Bullion <input type="checkbox"/> Rudimentary Bars <input type="checkbox"/> Coins <input type="checkbox"/> Industrial By-product | <input type="checkbox"/> Non LBMA Good Delivery Bullion (Au=>995/AG=>9999) <input type="checkbox"/> Jewellery <input type="checkbox"/> Collected waste <input type="checkbox"/> Broken jewellery <input type="checkbox"/> Others, please specify <hr/> |
| <input type="checkbox"/> Primary material – mined precious metals (%_____) | |
| <input type="checkbox"/> LSM <input type="checkbox"/> ASM | <input type="checkbox"/> Mining By-Product |
| e. What type of precious metals is the Company planning to send for refining? | |
| <input type="checkbox"/> Gold/Silver <input type="checkbox"/> Others, please specify | |
| f. What is the form of precious metals planned to be sent for refining? | |
| <input type="checkbox"/> Unprocessed, recycled precious metals | |
| <input type="checkbox"/> LBMA GD Bullion <input type="checkbox"/> Coins <input type="checkbox"/> Own production waste | <input type="checkbox"/> Non LBMA Good Delivery Bullion (Au=>995/AG=>9999) <input type="checkbox"/> Jewellery <input type="checkbox"/> Collected waste <input type="checkbox"/> Broken jewellery <input type="checkbox"/> Others, please specify <hr/> |
| <input type="checkbox"/> Melted recycled precious metals | |
| <input type="checkbox"/> Melted recycled precious metals <input type="checkbox"/> Rudimentary Bars (undefined dimension and fineness) | |
| <input type="checkbox"/> Others, please specify | |
| <input type="checkbox"/> Industrial by-product | |
| <input type="checkbox"/> Grand-fathered product | |
| g. If you source non LBMA GD bullion / bars (Au =>995 / AG=>9999): | |
| <ul style="list-style-type: none"> Do you identify the refinery? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <ul style="list-style-type: none"> Do you assess if the refinery has any red flags in its supply chain? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| | |
|--|---|
| h. If the refinery has red flags in its supply chain, do you request the refinery to be audited for its compliance with the OECD due diligence guidance on responsible supply chains from conflict and high risk areas? If yes, please provide a copy of the audit report | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|--|---|

| 9. RESPONSIBLE PRECIOUS METAL SUPPLY CHAIN POLICY | |
|--|--|
| a. Did your institution establish a responsible supply chain of gold from conflict-affected and high risk areas policy which is consistent with the standards set forth in the model supply chain policy in Annex II of the OECD Due Diligence Guidance for Responsible Supply Chains of Minerals from Conflict-Affected and High-Risk Areas? http://www.oecd.org/daf/inv/mne/GuidanceEdition2.pdf | <input type="checkbox"/> Yes Please provide a copy <input type="checkbox"/> No |
| b. Does your institution comply or plan to comply with the OECD Due Diligence Guidance for Responsible Supply Chains of Minerals from Conflict-Affected and High-Risk Areas? | <input type="checkbox"/> Currently complies <input type="checkbox"/> Plans to comply <input type="checkbox"/> No |
| c. Is the company complying with any of the following industry initiatives/Regulations? <input type="checkbox"/> LBMA Responsible Gold Guidance <input type="checkbox"/> LBMA Responsible Silver Guidance <input type="checkbox"/> RJC Code of Practice <input type="checkbox"/> EU Conflict Minerals Regulation or equivalent <input type="checkbox"/> RJC Chain of Custody Standard <input type="checkbox"/> WGC Conflict Free Gold Standard <input type="checkbox"/> Responsible Minerals Initiative <input type="checkbox"/> Others, please specify: _____ | Additional comments: |

| 10. ANTI MONEY LANDERING (AML) – COMBATING FINANCIAL TERRORISM (CFT) | |
|--|---|
| a. Is your institution subject to Anti-Money Laundering/Combating financial terrorism Law/Regulation | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| | |
|--|---|
| b. Name of the AML-CFT Law/Regulation | |
| c. Name of the Regulator | |
| d. Has your institution established a conformity program that contains AML/CFT policies and procedures, according to internal & international laws, rules and standards? | <input type="checkbox"/> Yes – Please provide a copy <input type="checkbox"/> No |

| 11. ANTI-BRIBERY POLICY | |
|---|--|
| a. Does your Company have any anti-bribery policy in place? | <input type="checkbox"/> Yes – Please provide a copy <input type="checkbox"/> No |
| b. Has the company or the Senior Management ever been charged for violation of applicable anti-bribery laws or regulations? | <input type="checkbox"/> Yes – Please provide details <input type="checkbox"/> No |

| 12. PRECIOUS METALS SUPPLIERS DUE DILIGENCE QUESTIONNAIRE | YES | NO | N/A |
|--|-----|----|-----|
| <i>Organisation</i> | | | |
| a. Does the Company have a person responsible (Compliance Officer) for all AML-CFT matters (Due Diligence, AML policies, internal training)? If yes, please provide us with his/her name, phone number and e-mail address | | | |
| b. Does the Company have a person responsible for all responsible supply chain matters? | | | |
| c. Is the Company subject to an AML-CFT audit by an independent party or a governmental party? Date of your last AML-CFT compliance audit: | | | |
| d. Does the Company have an AML-CFT training for the employees? | | | |
| e. Does the Company have a responsible supply chain training for the employees? | | | |
| f. Does the Company delegate to third parties some of the due diligence functions to be carried out? If yes, what functions and to which company do you delegate? | | | |
| g. How long does the Company keep its due diligence files (records)? | | | |
| <i>Precious Metals Suppliers Due Diligence</i> | YES | NO | N/A |

h. What type of information does the Company request from its precious metals suppliers type?

| Companies | YES | NO | Individuals | YES | NO |
|--|--------------------------|--------------------------|---|--------------------------|--------------------------|
| Company name | <input type="checkbox"/> | <input type="checkbox"/> | Name and first name | <input type="checkbox"/> | <input type="checkbox"/> |
| Address | <input type="checkbox"/> | <input type="checkbox"/> | Address | <input type="checkbox"/> | <input type="checkbox"/> |
| Date of Incorporation | <input type="checkbox"/> | <input type="checkbox"/> | Date of birth | <input type="checkbox"/> | <input type="checkbox"/> |
| Country of Incorporation | <input type="checkbox"/> | <input type="checkbox"/> | Nationality | <input type="checkbox"/> | <input type="checkbox"/> |
| Business register extract or equivalent document | <input type="checkbox"/> | <input type="checkbox"/> | Copy of ID card or passport | <input type="checkbox"/> | <input type="checkbox"/> |
| Beneficial Owners | <input type="checkbox"/> | <input type="checkbox"/> | Beneficial Owners | <input type="checkbox"/> | <input type="checkbox"/> |
| Origin of Precious Metals | <input type="checkbox"/> | <input type="checkbox"/> | Origin of Precious Metals | <input type="checkbox"/> | <input type="checkbox"/> |
| Description of main activity and financial information | <input type="checkbox"/> | <input type="checkbox"/> | Supplier profile (activity, wealth, etc.) | <input type="checkbox"/> | <input type="checkbox"/> |
| Tax conformity declaration | <input type="checkbox"/> | <input type="checkbox"/> | Tax conformity declaration | <input type="checkbox"/> | <input type="checkbox"/> |
| Supply chain policy or procedures | <input type="checkbox"/> | <input type="checkbox"/> | | | |

| | YES | NO | N/A | | | | | | |
|--|-------------------------|--------------------------------|-----|---------------|-------------------------|--------------------------------|--|--|--|
| i. Does the Company have a risk-based assessment of its precious metals suppliers (e.g. low, medium or high risks) based on? <ul style="list-style-type: none"> Location of the counterparty/supply chain <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Profile of the counterparty <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Supply chain risk (product) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | | | | | | | | |
| j. Does the Company screen precious metals suppliers and transactions against lists of persons, entities or countries issued by government/competent authorities? | | | | | | | | | |
| k. Does the Company perform enhanced due diligence for high risk precious metals suppliers/supply chains? | | | | | | | | | |
| l. Does the Company assess its corporate precious metals suppliers' AML-CFT procedures and practices? | | | | | | | | | |
| <i>Transaction monitoring</i> | YES | NO | N/A | | | | | | |
| m. Does the Company perform a risk-based assessment to understand the normal and expected transactions of its suppliers (in order to identify the unusual transactions)? | | | | | | | | | |
| n. Does the Company have a monitoring program for unusual and potentially suspicious activity that covers funds transfers and monetary instruments (e.g. traveller's cheques) or third party payments? | | | | | | | | | |
| o. Does the Company have to register all purchases and sales? | | | | | | | | | |
| p. To which of the following suppliers does the Company purchase its precious metals and what is the average amount of purchase by deal? <table border="1" data-bbox="277 1814 1378 1850"> <thead> <tr> <th>Supplier type</th> <th>Purchase percentage (%)</th> <th>Average amount in USD per deal</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> | | | | Supplier type | Purchase percentage (%) | Average amount in USD per deal | | | |
| Supplier type | Purchase percentage (%) | Average amount in USD per deal | | | | | | | |
| | | | | | | | | | |

| | | |
|------------|--|--|
| Bank | | |
| Corporate | | |
| Individual | | |

q. What usual payment method does the Company use to pay its precious metals suppliers?

| Payment type | Percentage (%) |
|----------------|----------------|
| Bank transfers | |
| Checks | |
| Cash | |

r. Does the Company have a procedure in place to prevent, detect and report suspicious transactions from its suppliers to the relevant Authority?

s. How many suspect reports has the Company filled and handed over to the relevant Authority the last two years?

| | YES | NO | N/A |
|---|-----|----|-----|
| t. Does the Company have a maximum amount as per internal policy or regulatory framework? | | | |
| <ul style="list-style-type: none"> amount allowed for cash payment? If yes, how much? amount of deal per supplier in USD? If yes, how much? | | | |
| u. Where cash transaction reporting is mandatory, does the Company have procedures to identify transactions structured to avoid such obligations? | | | |

| 14. TRANSACTION MONITORING ON PURCHASE FROM INDIVIDUALS ONLY - TO BE FILLED ONLY BY COMPANY PURCHASING PRECIOUS METALS FROM INDIVIDUALS | YES | NO | N/A |
|--|-----|----|-----|
| a. Does the Company maintain a transactions register? | | | |
| b. Does the Company have a specific procedure to identify unusual transactions? If yes, please describe: | | | |
| c. Is the Company able to verify that a person does not come several times in the counter/in different counters to sell each time a small amount but for a global material amount (smurfing)? If yes, how? | | | |

15. TRANSPORTATION

| |
|--|
| <p>a. How is the recycled gold transported from your company to the refinery?</p> <p><input type="checkbox"/> By your own company</p> <p><input type="checkbox"/> By a third party (external company), which company? _____</p> |
| <p>b. What is the transport method?</p> <p><input type="checkbox"/> Road</p> <p><input type="checkbox"/> Boat</p> <p><input type="checkbox"/> Plane</p> |

| 16. Authorised Signatories – Please provide ID copies | | |
|---|--|---------------------|
| First Name: | Last Name: | Signature Specimen: |
| Position: | Signatory Right: <input type="checkbox"/> Joint <input type="checkbox"/> Individual | |
| | | |
| First Name: | Last Name: | Signature Specimen: |
| Position: | Signatory Right: <input type="checkbox"/> Joint <input type="checkbox"/> Individual | |
| | | |
| First Name: | Last Name: | Signature Specimen: |
| Position: | Signatory Right: <input type="checkbox"/> Joint <input type="checkbox"/> Individual | |
| | | |
| First Name: | Last Name: | Signature Specimen: |
| Position: | Signatory Right: <input type="checkbox"/> Joint <input type="checkbox"/> Individual | |
| | | |

Comments / Additional information (please indicate which question the information is referring to):

SIGNATURE

I hereby declare that the information given above is true and accurate as of the date of writing.

I undertake to automatically inform *[The refinery]* of any material changes.

| | Authorised Signatory | Authorised Signatory |
|---------------------------|----------------------|----------------------|
| Signature: | | |
| Print Name: | | |
| Title: | | |
| Company Name | | |
| Date and location: | | |