**Annual Activity Report**

This Annual Activity Report is only required to be completed by a Relevant Person[[1]](#footnote-1) (referred to in this Form as “Firm”).

The Astana Financial Services Authority (“AFSA”) expects Firms to complete the AFSA's Annual Activity Report on an annual basis and submit such form to the AFSA within two months after the calendar year ending on 31 December.

The purpose of the Annual Activity Report is to assist the AFSA in assessing a Firm’s compliance with its AIFC obligations.

An Ancillary Service Provider must not:

(a) provide information, which is false, misleading or deceptive to the AFSA; or

(b) conceal information where the concealment of such information is likely to mislead or deceive the AFSA.

(2) An Ancillary Service Provider must provide to the AFSA, on an annual basis, an activity report using the appropriate form specified by the AFSA.

Where appropriate, questions in the Annual Activity Report make reference to the AIFC Rules & Regulations to assist in framing the context of your answer and determining if the question is applicable to your Firm.

All answers in the Annual Activity Report must be typed. If there is insufficient space to answer a question, please attach the answer in an appendix.

Do not leave any questions blank – if a question is not applicable this should be indicated as “N/A” in the response section.

|  |  |
| --- | --- |
| Name of the Firm |  |
| Licence number |  |
| Annual Activity Report review period |  |
| Contact Information (Name, phone) |  |
| Registered Address |  |
| Registered email addresses |  |
| Date Annual Activity Report Submitted |  |

|  |
| --- |
| 1. **Declaration by the applicant** |

* 1. I declare that, to the best of my knowledge and belief, having made due inquiry, the information given in this form, the supplements and documents attached, as well as any applicable supporting documents, is complete and correct. I understand that it may be a breach of Article 119(e) of the AIFC Framework Regulations to provide to the AFSA any information which is deceptive, misleading or dishonest.
  2. Failure to comply with the reporting requirements or providing false or misleading information may result in regulatory sanctions, financial penalties, or other enforcement actions by AFSA, including potential suspension or revocation of the Firm’s license.
  3. I confirm that I have the authority to complete this questionnaire, to declare as specified above and sign this form for, or on behalf of, the Firm
  4. I understand that any personal data provided to the AFSA will be used to discharge its regulatory functions under the AIFC Data Protection Regulations, and other relevant legislation and may be disclosed to third parties for those purposes.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

|  |
| --- |
| Enter the name and position or title of the above signed individual: |
|  |

|  |
| --- |
| 1. **General Information** |

* 1. What is the entity’s registration number with the AIFC and the date of registration?

|  |
| --- |
| [Insert text here] |

* 1. What is the primary type of activity conducted under the AIFC license?

|  |
| --- |
| [Insert text here] |

* 1. What ancillary services does the entity provide (e.g., legal, audit, accounting, consulting, credit rating)?

|  |
| --- |
| [Insert text here] |

* 1. Were there any changes in the entity’s registered office or contact details during the reporting year?

|  |
| --- |
| [Yes/No, provide details if applicable] |

* 1. Has the entity complied with all AIFC rules and regulations during the reporting year?

|  |
| --- |
| [Insert text here] |

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| --- |
| 1. **Business Activities & Performance** |

* 1. What are the core services provided by the entity during the reporting period?

|  |
| --- |
| [Insert text here] |

* 1. What are the main client profiles and industries served?

|  |
| --- |
| [Insert text here] |

* 1. What were the key activities and achievements of the entity during the year?

|  |
| --- |
| [Insert text here] |

* 1. What efforts were made to acquire new clients or expand service offerings?

|  |
| --- |
| [Insert text here] |

* 1. What were the main business objectives set for the year, and were they achieved?

|  |
| --- |
| [Insert text here] |

* 1. What is the total number of clients served by the entity during the reporting period? (Completed/In process)

|  |
| --- |
| [Insert text here] |

3.7 What is the total number of service agreements concluded during the reporting period?

|  |
| --- |
| [Insert text here] |

|  |
| --- |
| 1. **Financial Performance** |

* 1. What is the total revenue generated during the reporting year?

|  |
| --- |
| [Insert text here] |

* 1. What are the total expenses incurred during the reporting year?

|  |
| --- |
| [Insert text here] |

* 1. What is the entity’s net profit or loss for the reporting year?

|  |
| --- |
| [Insert text here] |

* 1. Were there any significant financial transactions (e.g., mergers, acquisitions, or large investments)?

|  |
| --- |
| [Insert text here] |

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| 1. **Compliance & Risk Management** |

* 1. Has the entity conducted necessary compliance checks related to its Ancillary service activities within the AIFC? ?

|  |
| --- |
| [Insert text here] |

* 1. Has the entity been subject to any penalties, fines, or sanctions during the reporting period?

|  |
| --- |
| [Insert text here] |

* 1. How does the entity ensure ongoing compliance with AIFC rules and other applicable regulations?

|  |
| --- |
| [Insert text here] |

* 1. What key risks were identified during the year, and what actions were taken to mitigate them?

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| --- |
| [Insert text here] |

|  |
| --- |
| 1. **Corporate Governance** |

* 1. Who are the members of the Board of Directors?

|  |
| --- |
| [Insert text here] |

* 1. What governance structures and policies are in place to ensure compliance and transparency?

|  |
| --- |
| [Insert text here] |

* 1. Were there any changes in senior management or board membership during the year?

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| --- |
| [Insert text here] |

|  |
| --- |
| 1. **Human Resources** |

* 1. How many employees are currently employed by the entity?

|  |
| --- |
| [Insert text here] |

* 1. Has the entity conducted any training or professional development programs for employees?

|  |
| --- |
| [Insert text here] |

* 1. Have there been any updates or changes in the Firm's HR structure since the application? If yes, please provide details in Appendix 1, including information on the employee, employment status, and relevant background information.

|  |
| --- |
| [Insert text here] |

|  |
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| 1. **Ethics, Policies & Procedures** |

* 1. What measures have been taken to maintain ethical standards in business operations?

|  |
| --- |
| [Insert text here] |

* 1. Has the entity updated its policies or compliance framework during the year?

|  |
| --- |
| [Insert text here] |

* 1. Is there an internal Code of Business Conduct (with amendments as of 15 December 2024, which commence on 1 January 2025)) and the Anti-Money Laundering Rules (with amendments as of 15 December 2024, which commence on 1 January 2025) in place? (please attach)

|  |
| --- |
| [Insert text here] |

|  |
| --- |
| 1. **Technology and Software** |

* 1. What type of software is currently being used by the company?

|  |
| --- |
| [Insert text here] |

* 1. What are the subscription details and data sources used for the software?

|  |
| --- |
| [Insert text here] |

* 1. What measures are in place for IT and data security?

|  |
| --- |
| [Insert text here] |

* 1. What backup and business continuity procedures are implemented?

|  |
| --- |
| [Insert text here] |

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| 1. **Strategic Goals & Future Outlook** |

* 1. What are the entity’s key strategic goals for the next year?

|  |
| --- |
| [Insert text here] |

* 1. What market trends have been identified, and how does the entity plan to adapt?

|  |
| --- |
| [Insert text here] |

* 1. Has the entity engaged in AIFC community, participation of events or programs?

|  |
| --- |
| [Insert text here] |

|  |
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| 1. **Supervision** |

* 1. Has the Firm paid all required supervision fees to the AIFC within the specified deadlines?

|  |
| --- |
| [Insert text here] |

* 1. Were there any delays or issues in processing the payment of supervision fees?

|  |
| --- |
| [Insert text here] |

* 1. Has the Firm submitted all required annual filings to the AFSA within the specified deadlines?

|  |
| --- |
| [Insert text here] |

* 1. Has the Firm been subject to any regulatory investigations, enforcement actions, or compliance breaches during the reporting period? If yes, please provide details."

|  |
| --- |
| [Insert text here] |

* 1. Has the entity ensured that its registered email address for communication with the Registrar of Companies is updated and accurate in compliance with the amended [AIFC Companies Regulation](https://orderly.myafsa.com/articles/afsa-notice-no.-afsa-o-ec-2025-002-from-6-january-2025-on-amended-aifc-legal-entities-framework-and-requirement-to-notify-the-registrar-of-companies-of-the-registered-email-address)?

|  |
| --- |
| [Insert text here] |

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| --- |
| 1. **E-Residence** |

* 1. Has the entity ensured that it has access to its personal account, receives all notifications in a timely manner, and submits all online events as required?

|  |
| --- |
| [Insert text here] |

* 1. Has the Firm ensured that its registered email address is accurate, up to date, and valid for communication with the Registrar of Companies, in compliance with Section 24-1 of the AIFC Companies Regulations?

|  |
| --- |
| [Insert text here] |

|  |
| --- |
| 1. **Supporting Documents** |

* 1. Supporting Documents for the calendar year ending on 31 December. (if applicable):

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| --- |
| * 1. Detailed Financial Statements (Balance Sheet,Profit & Loss Statement   Cash Flow Statement,Significant Transactions & Notes)   * 1. Internal Policies & Procedures (Governance & Compliance Policies,Risk Management Framework,HR & Employee Guidelines,IT & Data Security Measures   2. Project Reports or Client Testimonials (Summary of Key Projects,Performance Metrics & KPIs,Client Feedback & Testimonials,   Lessons Learned & Future Recommendations   * 1. New Staff Information Form (Appendix 1) |

**Appendix 1: New Staff Information Form**

1. Full Name (as per passport/official ID).

|  |
| --- |
| [Insert text here] |

1. Job Title and Key Responsibilities in the Firm.

|  |
| --- |
| [Insert text here] |

1. Employment Type (Full-time, Part-time, Contract-based, Outsourced).

|  |
| --- |
| [Insert text here] |

4. Date of Appointment (Start date in the role).

|  |
| --- |
| [Insert text here] |

5. Qualifications & Professional Background (Education, Certifications, Relevant Experience).

|  |
| --- |
| [Insert text here] |

6. Regulatory Approval Status (if applicable) – Does the position require AFSA approval?

|  |
| --- |
| [Insert text here] |

7. MLRO or Director Role (if applicable) – If appointed to a controlled function, has approval been obtained?

|  |
| --- |
| [Insert text here] |

8. Previous Employment & Experience (Relevant past roles, especially in regulated firms).

|  |
| --- |
| [Insert text here] |

9. Disclosure of Conflicts of Interest (Any affiliations that may impact independence).

|  |
| --- |
| [Insert text here] |

10. Criminal Record & Regulatory Sanctions Check – Has the individual been subject to any criminal, regulatory, or financial penalties?

|  |
| --- |
| [Insert text here] |

11. KYC & Due Diligence Compliance – Has the Firm verified identity and background checks in accordance with AIFC requirements?

|  |
| --- |
| [Insert text here] |

12. Contact Information (Email, Phone, Office Address, if required).

|  |
| --- |
| [Insert text here] |

1. [↑](#footnote-ref-1)