



SUSPICIOUS TRANSACTION / SUSPICIOUS ACTIVITY REPORT

Made in accordance with Section 55A(1) of the Proceeds of Crime Act, Ch. 11:27 ("the POCA"), Section 22C(3) of the Anti-Terrorism Act, Ch. 12:07 ("the ATA") and Section 5(1) of the Counter-Proliferation Financing Act No. 8 of 2025 ("the CPFA").

For Official use only

Your Reference No.

ALWAYS COMPLETE ENTIRE REPORT

(Mandatory fields are preceded by an asterisk *)

Instructions:	A Financial Institution or Listed Business which knows or has reasonable grounds to suspect that the funds used for a transaction are the proceeds of criminal conduct, shall make a suspicious transaction or a suspicious activity report to the Financial Intelligence Unit of Trinidad and Tobago ("the FIUTT"). The report must be made as soon as possible, but in any event where there is a suspicion of Money Laundering ("ML") within five (5) days of; and where there is a suspicion of Terrorist Financing ("TF") or Proliferation Financing ("PF") immediately upon the date on which the financial institution or listed business knew or had reasonable grounds to suspect that the funds used for the transaction were the proceeds of criminal conduct. [Section 55A (1) of the POCA, and Sections 22AB (d) and 22C (3) of the ATA] and Section 5(1) of the CPFA].
Offences:	It is an offence to fail to report a suspicious transaction or activity to the FIUTT. The penalty on summary conviction is a fine of two million dollars and imprisonment for a term of two years and on conviction on indictment, a fine of five million dollars and imprisonment for a term not exceeding seven years [Section 57(1) of the POCA, Section 42(1) (a) of the ATA and Section 12(1) of the CPFA].

1. *Check appropriate box:
- a. ☐ Initial Report

b. ☐ Corrected Report

c. ☐ Supplemental Report

Part 1

INFORMATION ABOUT THE REPORTING FINANCIAL INSTITUTION OR LISTED BUSINESS

2. *Name:
-
3. *Address of main office:
- Address 1.
- Address 2.
- Address 3.
- Address 4.
4. *Address of Branch Office(s) where transaction or activity occurred
- Address 1.
- Address 2.
- Address 3.
- Address 4.
5. *Asset Size of Reporting Financial Institution/Listed Business: \$TT.

Part 2

REPORT NARRATIVE

6. REPORT NARRATIVE

INSTRUCTIONS: EXPLAIN THE TRANSACTION/ACTIVITY/ PARTIES INVOLVED IN THIS REPORT. INCLUDE ALL RELEVANT INFORMATION

CONTINUED ON SEPARATE SHEETS: () YES () NO

7. *First Name: 8. * Middle Initial: 9. *Last Name:
10. *Title: 11. *Phone Number:

CONTACT FOR ASSISTANCE
(If Different than Preparer information)

12. *First Name: 13. * Middle Initial: 14. *Last Name:
15. *Title: 16. *Phone Number:

*Signature *DATE:/...../..... YYYY / MM / DD

17. *What type of activity initiated the Transaction?

- | | |
|--|---|
| <input type="checkbox"/> Cash Deposit | <input type="checkbox"/> Encashed a Bank Draft |
| <input type="checkbox"/> Cheque Deposit | <input type="checkbox"/> Purchase a Bank Draft |
| <input type="checkbox"/> Credit Card Use/ Application | <input type="checkbox"/> Visa Travel Money (VTM) card |
| <input type="checkbox"/> Withdrawal from account | <input type="checkbox"/> Incoming wire transfer, |
| <input type="checkbox"/> Night deposit, | <input type="checkbox"/> Outgoing wire transfer, |
| <input type="checkbox"/> New Account | <input type="checkbox"/> Loan Application |
| <input type="checkbox"/> Life Insurance policy/ purchase/ cash in, | <input type="checkbox"/> Securities/Certificate of deposit |
| <input type="checkbox"/> FI's/LB Due diligence | <input type="checkbox"/> Redeemed PMC chips |
| <input type="checkbox"/> Purchase Real Estate | <input type="checkbox"/> Purchase Precious stones/Jewellery |
| <input type="checkbox"/> Purchase Motor vehicle/vessel, art, etc. | <input type="checkbox"/> Pre-paid Card Transaction |
| <input type="checkbox"/> Virtual Assets | |
| <input type="checkbox"/> Other:..... | |

18. Account Number(s) and branch location if the transaction involved an account. (Nos. 19 – 24) must be completed if an account number is provided)

(a) Account Numbers /
..... /
..... /

(b) Branch Location /

19. Type of account (if this part is applicable).....
☐ Chequing ☐ Fixed Deposit ☐ Loan ☐ Savings ☐ Virtual Assets
☐ Other

20.Account holder(s)
.....
.....

21. Account Balance: As at/...../..... YYYY / MM / DD

22. Account beneficial owner(s)
.....
.....

- ☐ No economic purpose
- ☐ Organized crime groups funds
- ☐ Physical condition of the currency
- ☐ Politically Exposed Person
- ☐ Social media presence
- ☐ SOF unverifiable
- ☐ Structured deposits to avoid reporting requirements
- ☐ Suspicious inquiry regarding reporting requirements
- ☐ Transaction with country assessed as high risk
- ☐ Transaction with a country identified by FATF/CFATF as non-compliant /not sufficiently compliant
- ☐ Unauthorized foreign exchange transactions
- ☐ Unduly complex
- ☐ Unusual large volume of cash deposits
- ☐ Use of personal account for business proceeds
- ☐ Unverified documents
- ☐ Suspected Terrorist Transaction
- ☐ Virtual Asset (Specify Type):
- ☐ Virtual Asset Service Provider (Specify Type):
- ☐ Other (Specify):

Part 6

SUSPECTED CRIMINAL CONDUCT

29.* INDICATE THE KNOWN OR SUSPECTED CRIMINAL CONDUCT [CHECK ALL THAT APPLY]

- ☐ Participation in an organized criminal group & racketeering
- ☐ Intellectual property offences including counterfeiting & piracy of products
- ☐ Money Laundering
- ☐ Environmental crimes
- ☐ Terrorism
- ☐ Murder, grievous bodily injury
- ☐ Financing of Terrorism
- ☐ Kidnapping, illegal restraint and hostage-taking
- ☐ Trafficking in human beings, body parts & migrant smuggling
- ☐ Robbery or theft
- ☐ Sexual exploitation including sexual exploitation of children
- ☐ Smuggling (including in relation to customs & excise duties and taxes)
- ☐ Illicit trafficking in narcotic drugs & psychotropic substances
- ☐ Tax crimes (relating to direct and indirect taxes)
- ☐ Illicit arms trafficking
- ☐ Extortion
- ☐ Illicit trafficking in stolen & other goods
- ☐ Forgery
- ☐ Corruption and bribery
- ☐ Piracy
- ☐ Counterfeiting currency
- ☐ Insider trading and market manipulation
- ☐ Fraud (explain: illegal lottery scam, scams, identity fraud, forgery, etc.)
- ☐ Illegal Gambling
- ☐ Proliferation Financing (evasion/breach)
- ☐ Other [specify e.g. unauthorized VASP, breach of targeted financial sanctions, etc.,]

Part 7

COURT / JUDICIAL INFORMATION

30. State any relevant charge, conviction, litigation (if known)

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Part 8

ATTACHMENTS

31. List the attachments included with this STR/SAR submission:

.....

.....

.....

32. * Relationship to Financial Institution:

() (a) Attorney

() (b) Borrower

() (c) Broker

() (d) Contracted Services

() (e) Customer / Client

() (f) Employee

() (g) Member

Senior Management

() (h) Chairperson

() (i) Company Director

() (j) Company Secretary

() (k) CEO

() (l) CFO

() (m) Other:

Individual

33. Title: ☐ Dr. ☐ Miss ☐ Mrs. ☐ Mr.

34. *First Name:

35. Middle Name:

36. * Last Name:

37. *Gender (M/F).....

38. Marital Status: ☐ Divorced. ☐ Married. ☐ Separated ☐ Single

39. Nationality.....

40. Citizenship

41. *Usual Place of residence (local address):.....

.....

42. Usual Place of Residence (outside Trinidad and Tobago):.....

.....

43. *Date of Birth/...../.....

44. (a) Home Tel. No.

YYYY MM DD

(b) Cell No.

45. Email address

(c) Work Tel. No.

46 *Occupation

47. *Place of employment

48. Forms of Identification: (a) () Driver’s License (b) () Passport (c) () National I.D. Card (d) () Social Security Card (e) () Other.....

Number..... Issuing Authority.....Date Issued...../...../..... YYYY / MM / DD

Number..... Issuing Authority.....Date Issued...../...../..... YYYY / MM / DD

Number..... Issuing Authority.....Date Issued...../...../..... YYYY / MM / DD

Company/Business Entity

49. Name of Company/Business Entity.....

(a) Company Reg. No./ Business Reg. No.....

(b) Date of Incorporation/Registration//...../..... YYYY / MM / DD

(c) Country of Incorporation/Registration.

(d) Status: ☐ Current ☐ Inactive ☐ Struck Off

(e) Address:.....

.....

(f) VAT Reg. No.

(g) B.I.R. No.

(h) Share Capital

(i) Website Address.....

50 *Nature of business operations.....

50(a) *Type of Legal Entity (☒ appropriate box):

☐ Private Limited Liability Company

☐ Private Unlimited Liability Company

☐ Public Limited Liability Company

☐ Incorporated Non-Profit Company

☐ Non-Profit Organisation incorporated by Act of Parliament

☐ Unincorporated Non-Profit Organisation

☐ Partnership

☐ Trusts and other Legal Arrangements

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51. *Transaction/Activity Status:

☐ (a) Completed

☐ (b) Attempted

52. *Date of Suspicious Transaction or Activity://
YYYY MM DD

53. *Dollar amount involved in this report \$.....
.
Currency Type

☐ TTD

☐ Pound Sterling

☐ USD

☐ CAD

☐ Euro

☐ Eastern Caribbean

☐ Barbados dollar

☐ Virtual Asset

☐ Other

*Item 52 refers to the date the transaction/activity was conducted, it is NOT the date the Compliance Officer deemed it suspicious, or the date it was sent to the FIUTT.

54. Is the suspicious transaction/activity an Isolated Incident? ☐ Yes ☐ No. If no, complete item 55

55. State the period during which the suspicious transaction or activity occurred: Start Date:/...../..... YYYY / MM / DD
End Date:/...../..... YYYY / MM / DD

56. Does the suspicious transaction/activity involve other parties? ☐ Yes ☐ No. If yes complete item 57

57. State name and full detail of the related parties
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