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PARTICIPANT FILE  
CHECKLIST OF CONTENTS

CONFIDENTIAL

Account-number: KEW 80726  
 Name: Bank Markazi Jamhuri  
Islami Iran, Tehran

MAIN ACCOUNT NO	Opened
<u>80726</u>	<u>14.12.94</u>
Sub-accounts and unpublished accounts	Opened

Participant Information

- Application for membership
- Information file
- Company profile
- Authorised signatures
- Annual report for the year 93
- Articles of Association
- Management regulations: signed yes date: 5/11/94
- Other documents: \_\_\_\_\_

Follow-up Items

- Approval of membership application
- CEDCOM     GE     SWIFT    (  TELERATE )
- Telex
- Mail
- Testkeys / passwords (authorisations)
- Documentation provided
- User Manuals
- Participant Handbook
- Others \_\_\_\_\_

Cedel Services

- Financing
- Securities Lending
- Securities Borrowing
- TOF
- Tripartite Agreement
- Others \_\_\_\_\_
- Case by case
- Standing Instruction
- Case by case
- Standing Instruction

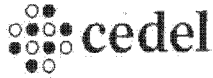
Other File contents

- Other \_\_\_\_\_
- Correspondence
- Press

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# Company Profile

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To enable Cedel to process your request for a customer account promptly, please complete the following:

Name of Company: BANK MARKAZI JOMHOURI ISLAMI IRAN

Registered office: 213, FERDOWSI AVENUE,  
P.O. BOX 11365/8531, TEHRAN  
ISLAMIC REPUBLIC OF IRAN

Telephone number: [REDACTED]

Contact name and title: [REDACTED] CHIEF DEALER  
[REDACTED] SENIOR OFFICER

## Background information

Date of incorporation: BANK MARKAZI JOMHOURI ISLAMI IRAN is a

Paid-in share capital: STATE-OWNED BANK, FOUNDED IN 1960

Shareholders:	Holding in %
(1) <u>NONE</u>	<u>-</u>
(2) <u>NONE</u>	<u>-</u>
(3) <u>NONE</u>	<u>-</u>

Legal status (where applicable) : Branch  Subsidiary

... / cont.

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Company Profile (réf. 4029)

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Main business activities : Bank  Broker \*   
Other (please specify) \_\_\_\_\_

(\* please specify, if applicable, of which Stock Exchange you are a member \_\_\_\_\_ )

Name and address of a bank which may be contacted to provide a reference if requested:

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

Please return this form together with :

- i) The form "Request for Customer Account" duly signed,
- ii) The "Customer Information",
- iii) An up-to-date list of authorised signatures,\*
- iv) A copy of the company's most recent Annual Report,\*
- v) Company Bye-laws, Statutes or Regulations\*

to the following address:

Credit Unit  
Cedel  
67 Bd Grande-Duchesse Charlotte  
L-1331 Luxembourg

\* For good order's sake the documentation under points iii), iv) and v) should be kept up-to-date by sending new copies to Cedel as they become available.

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# Customer Information

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1. CORRESPONDENCE - (statements, reports, information sheets, etc.)  
All correspondence from Cedel is to be addressed to :

Name of Company : BANK MARKAZI JOMHOURI ISLAMI IRAN

Department : INTERNATIONAL DEPARTMENT

Street & Number : 213, FERDOWSI AVENUE

P.O. Box : 11365/8531

City : TEHRAN Post Code : 11354

Country : ISLAMIC REPUBLIC OF IRAN Tel : [REDACTED]

Fax : [REDACTED] S.W.I.F.T. address : BMJIIRTH

Telex Numbers and Answerbacks for messages to Cedel (including all individual machine I.Ds)

[REDACTED]  
[REDACTED]

Telex Numbers and Answerbacks for messages from Cedel (including all individual machine I.Ds)

[REDACTED]  
[REDACTED]

2. TYPE OF ACCOUNT

Published

Unpublished

We wish our securities account with Cedel to be kept in :

FUNGIBLE FORM (we do not wish to know the bond numbers)

NON-FUNGIBLE FORM (we wish to know the bond numbers)

FUNGIBLE & NON-FUNGIBLE FORM (according to our instructions)

3. REPORT OPTIONS

We wish to receive Cedel reports using the following securities codification :

Common Code

ISIN

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Customer Information (réf. 4033)

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4. SETTLEMENT SEQUENCE

In accordance with the terms given in Cedel's Governing Documents we wish Cedel to operate the account listed above according to the following settlement sequence option (please tick one box):

- Option One: Customer Transaction Reference Number.  
(This is the default option applied by Cedel if none other is indicated)
- Option Two: Settlement Date (flexible)
- Option Three: Settlement Date (strict)
- Option Four: Nominal Amount (flexible)

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5. SECURITIES BORROWING AND SECURITIES LENDING

If you do not already participate in Cedel's Securities Borrowing and Securities Lending programme and are interested, please indicate below. (SUBJECT TO NEGOTIATIONS ON THE TERMS AND CONDITIONS FOR EACH CASE)

- We are interested in Securities Borrowing
- We are interested in Securities Lending
- We are not interested in Securities Borrowing or Securities Lending

6. CONTACT NAMES

Please indicate below the relevant contact names so that we may reach you without delay.

a) SECURITY TRANSACTIONS

Currency	Name	Tel & Ext	Telex
ALL	[REDACTED]	[REDACTED]	[REDACTED]
ALL	[REDACTED]	[REDACTED]	[REDACTED]
ALL	[REDACTED]	[REDACTED]	[REDACTED]

b) CASH TRANSACTIONS

Currency	Name	Tel & Ext	Telex
ALL	[REDACTED]	[REDACTED]	[REDACTED]
ALL	[REDACTED]	[REDACTED]	[REDACTED]
ALL	[REDACTED]	[REDACTED]	[REDACTED]

c) SPECIAL OPERATIONS - exercise of warrants, conversions, etc.

Name	Tel & Ext	Telex
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]

d) SECURITIES BORROWING AND SECURITIES LENDING

Name	Tel & Ext	Telex
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]

6. COMPANY LANGUAGE

What is the company's preferred language?

English  French  German

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7. ACCEPTANCE OF CEDEL'S GENERAL TERMS AND CONDITIONS

We, the undersigned, hereby confirm our acceptance to be bound by Cedel's General Terms and Conditions as amended from time to time.

Authorised signature(s):

Signature:

[Redacted Signature]

Name:

Title: DIRECTOR

Date: 28.11.94

Signature:

[Redacted Signature]

Name:

Title: CHIEF DEALER

Date: 28-11-94

SIGNATURE VÉRIFIÉE  
ET CERTIFIÉE EXACTE

14.12.94

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# CEDEL Request for Customer Account

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We, the undersigned, representing

Institution BANK MARKAZI JOMHOURI ISLAMI IRAN

Address 213, FERDOWSI AVENUE, P.O. BOX 11365/8531, TEHRAN,

ISLAMIC REPUBLIC OF IRAN

( )

having received a copy of Cedel's General Terms and Conditions and agreeing to comply with all provisions and conditions set forth therein, hereby apply to become a Cedel Customer.

If approved, we empower Cedel to open on our behalf the necessary security and cash accounts. We have attached certified copies of our company's bye-laws, our most recent annual report and/or audited financial statement and an authorised signature list and agree to supply Cedel immediately with any and all updates of the same.

( )

Signed in TEHRAN on WEDNESDAY NOVEMBER 9, 1994

Authorised Signature [Redacted]

Name (Print) [Redacted]

Authorised Signature [Redacted]

Name (Print) [Redacted]

*Suzin. varshias axo ctos*  
*12.11.2004*

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Our Ref. No. 941

BANK MARKAZI JOMHOURI ISLAMI IRAN  
(The Central Bank of the Islamic Republic of Iran)

Date 28 July 2004

“ IN THE NAME OF GOD “

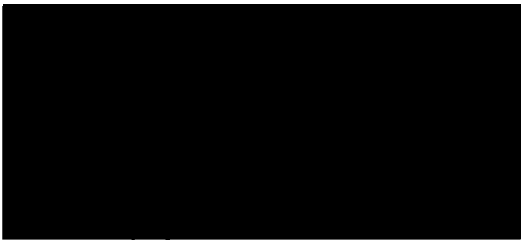
**CONFIDENTIAL**

Clearstream Banking  
City Tower 2, Flat # 902  
Sheikh Zayed Road  
Dubai – United Arab Emirates  
Fax #

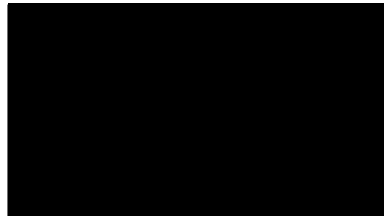
Subject : Anti – Money Laundering and Anti-Terrorist Financing Questionnaire

Dear Sir,

Please find attached, the completed questionnaire regarding the above,  
which was sent to us by Mr. on June 8, 2004.



Director  
International Department



Assistant Director

Form N/520 - 200 c. 1001 79/5



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1. Domicile and Organisation

Legal name of Institution	Bank Markazi Jomhuri Islami Iran
Principal place of business (address)	#144 Mirdamad Boulevard ,Tehran , Iran
Corporate legal form	Stock Company (100pct of shares owned by Government)
Jurisdiction of local licensing authority and regulator	Iran
Regulatory Authority responsible for anti-money laundering supervision of Institution*	Ministry of Economic Affairs and Finance
*If none, name of industry supervisor and/or industry code of practice	--
Name of external auditors	[Redacted] (Ministry of Finance)
Name of ultimate parent institution (if applicable)	Ministry of Finance
Relationship with parent (agency / branch / subsidiary)	Central Bank
Jurisdiction of licensing authority and regulator of parent	Iran

2. Non Shell Bank Arrangements

Institution is not a Shell Bank:

Institution does not maintain accounts for Shell Banks and does not conduct business with Shell Banks:

\* Shell Bank means a bank incorporated in a jurisdiction in which it has no physical presence and which is unaffiliated with a regulated financial group (cf. FATF Forty Recommendations).

3. Ownership and Executive Management

Institution is publicly held: . Please indicate exchange on which shares are traded:

None

Institution is privately owned: . Please list the names of all owners<sup>2</sup> in the table below and their ownership interest (add further rows if necessary).

<sup>2</sup> An 'owner' is any person or legal entity that, directly or indirectly, owns or controls any class of securities or other voting interests of the Institution.

Name and domicile	Ownership interest (%)	Nature of ownership (direct/indirect)

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If any of the above owners is a legal entity, indicate below the names of the shareholders of the legal entity, and their ownership interest in the legal entity. If these shareholders are also legal entities, please indicate their respective shareholders' names, ownership and nature of ownership. Please follow this process through until the true beneficial owners are identified. Note: if any legal entity is publicly held, please indicate only that it is publicly held and the exchange on which shares are traded.

Entity	Shareholders	Ownership interest (%)	Nature of ownership (direct/indirect)

Have there been any significant changes in ownership over the last five years? Yes:  No:   
 If yes, please provide details:

Executive management of Institution: please provide the names of senior executives and complete the table below (add further rows if necessary).

Name of senior executive	Position	Years of service
	GOVERNOR	15
	DEPUTY GOVERNOR	21
	SECRETARY GENERAL	23
	VICE GOVERNOR (FOREIGN EXCHANGE)	25
	VICE GOVERNOR (ECONOMICS)	6
	VICE GOVERNOR (ADMINISTRATIVE)	1

Are there any Politically Exposed Persons<sup>3</sup> among your Institution's ownership structure and executive management? Yes:  No:   
 If yes, please provide details (name and role):

[REDACTED] CENTRAL BANK GOVERNOR

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\* Politically Exposed Persons (PEPs) are individuals who are or have been entrusted with prominent public functions, for example Heads of State or of government, senior politicians, senior government, judicial or military officials, senior executives of state owned corporations, important political party officials, or their family members or close associates. The definition is not intended to cover middle ranking or more junior individuals in the foregoing categories (cf. FATF Forty Recommendations).

#### 4. Business Activity

Principle types of financial products and services offered to Institution's client base and geographical markets covered:

- (a) *Banker for the Government*  
 (b) *Central Bank Participation Papers distributed to public through Commercial Banks as a means to mop up excess liquidity*

#### 5. Anti-Money Laundering Controls

1. Please outline the laws and regulations to which your Institution is subject regarding anti-money laundering (AML), combating the financing of terrorism (CFT) and 'know your customer' (KYC), including regulatory reporting requirements for suspicious account activity, the extent to which they are FATF compliant, and state your degree of compliance.

*The Iranian Banking System is subject to Money and Credit council regulations approved on November 9, 2002 on prevention of money laundering through financial institutions*

2. Please describe your Institution's KYC policies and provide information on account opening procedures, documentation requirements and retention, the identification of beneficial owners and the acceptance of higher risk customers (such as non-FATF based customers, Politically Exposed Persons).

*The Central Bank does not hold accounts for private entities.*

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3. If applicable, is your Institution subject to the AML, CFT and KYC policies and procedures of your ultimate parent company? Yes:  No: .
4. Does your Institution open/maintain accounts for customers which are not identified (anonymous accounts)? Yes:  No: .
5. Does your Institution ensure that its credit/financial institution customers have adequate AML, CFT and KYC procedures in place? Yes:  No: .
6. Please describe procedures for updating and reviewing customer information.

*WE ONLY HOLD ACCOUNTS FOR GOVERNMENT.*

7. Please provide an overview of your Institution's procedures for monitoring customer account activity/transactions.

*NO PRIVATE CUSTOMER*

8. If applicable, please indicate the AML, CFT and KYC policies of foreign branches and subsidiaries (if different from head office) and the oversight efforts of head office concerning the AML, CFT and KYC procedures of foreign branches and subsidiaries.

*CENTRAL BANK DOES NOT HAVE ANY BRANCHES AND SUBSIDIARIES.*

9. Please describe your Institution's AML, CFT and KYC employee training programme.

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*Our Training Department, using the expertise from our Banks Supervision Department periodically conducts courses/ seminars on AML/CFT for participants from the Iranian banking system.*

10. Please indicate whether the AML, CFT and KYC measures implemented and described above are subject to independent and periodic internal and external audit reviews. If yes, can Clearstream Banking obtain, upon request, a copy of corresponding internal and external audit reports?

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11. Please provide a contact name for the AML/CFT/KYC programme.

\_\_\_\_\_, Director, Banks Supervision Department

12. Does your Institution allow third parties to directly or indirectly use your account(s) with Clearstream Banking, i.e. in the form of 'payable through' accounts? Yes:  No:

If yes, please indicate:

- the names and addresses of third parties,
- whether your Institution has formally identified these third parties;
- how your Institution performs the ongoing monitoring of the activities of these third parties.

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6. Certification

Questionnaire completed by (duly authorised officer of Institution):

Name: [Redacted]

Position: *Director*

Date: *July 28, 2004* [Redacted]

[Redacted Signature Area]

Signature vérifiée  
et certifiée exacte  
*06.08.05*  
*99*