

**TRANSFER AGENT REGISTRATION AND AMENDMENT FORM
FORM TA-1**

Please print or type responses. Complete all items for both registrations and amendments. Read all instructions before completing the form. Detailed guidance for each item on Form TA-1 appears in Part II (Special Instructions) of the instructions for Form TA-1.

1. **APPROPRIATE REGULATORY AGENCY** (*Check One*)

- Comptroller of the Currency
- Federal Deposit Insurance Corporation
- Board of Governors of the Federal Reserve System

2. **FILING STATUS OF THIS FORM** (*Check One*)

- Registration
- Amendment to Registration

3. **FULL NAME OF REGISTRANT**

Previous Name of Registrant (if Being Amended for Name Change)

4. **FINANCIAL INDUSTRY NUMBER STANDARD (FINS) NUMBER**

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5. **MAIN OFFICE LOCATION OF REGISTRANT**

Number and Street

City

9-Digit ZIP Code

6. **MAILING ADDRESS**

Number and Street

City

9-Digit ZIP Code

7. **TELEPHONE NUMBER**

Area Code Number

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8. **PRINCIPAL LOCATION (OF THE REGISTRANT) WHERE TRANSFER AGENT PROCESSING ACTIVITIES ARE LOCATED**

Number and Street

City

9-Digit ZIP Code

9. **LIST ALL OTHER LOCATIONS (OF THE REGISTRANT) WHERE TRANSFER AGENT PROCESSING ACTIVITIES ARE CONDUCTED**

Number and Street

City

9-Digit ZIP Code

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10. **DOES REGISTRANT ACT (OR WILL IT ACT) AS A TRANSFER AGENT SOLELY FOR ITS OWN SECURITIES AND/OR SECURITIES OF AN AFFILIATE(S)?**

- Yes
 No

11. **HAS THE REGISTRANT CONTRACTED TO HAVE AN OUTSIDE OGRANIZATION PERFORM TRANSFER AGENT FUNCTIONS IN THE REGISTRANT'S NAME? ("Private Label" Servicing)**

- No

If Yes, List the Name(s) of the Private Label Transfer Agents

ARA-Assigned Registered Transfer Agent Number				
8		-		
8		-		
8		-		

(ARA = "Appropriate Regulatory Agency")

12. **DOES THE REGISTRANT PERFORM ANY PRIVATE LABEL TRANSFER AGENT SERVICES FOR ANOTHER REGISTERED TRANSFER AGENT?**

- No

If Yes, List the Name(s) of the Named Transfer Agents

ARA-Assigned Registered Transfer Agent Number				
8				
8				
8				
8				
8				

(ARA = "Appropriate Regulatory Agency")

13. **EXECUTION:** The Registrant submitting this Form, and the person executing it, hereby represent that all the information contained herein is true, correct, and complete.

ATTENTION: Intentional misstatements or omissions of fact constitute Federal criminal violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

14. **FULL NAME AND TITLE OF OFFICIAL RESPONSIBLE FOR FORM** (Print or Type)
 [First Name] [Full Middle Name] [Last Name] [Title]

15. SIGNATURE OF OFFICIAL RESPONSIBLE FOR FORM

DATE