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## **Notice by Financial Institutions of Government Securities Broker** or Government Securities Dealer Activities—Form G-FIN

This notice is required by law (15 U.S.C. § 780-5(a)(1)(B)).

This notice must be filed by all financial institutions that are government securities brokers or government securities dealers that are not exempt from the notice requirement under regulations of the Department of the Treasury. Generally, a financial institution will not be required to file as a government securities broker or dealer if its only government securities activities are to (1) Buy or sell government securities solely for investment for its own account; (2) Buy or sell government securities for fiduciary accounts; (3) Handle savings bond transactions; (4) Submit tenders for the account of

customers for purchase on original issue of U.S. Treasury securities; (5) Enter into repurchase or reverse repurchase agreements; (6) Effect fewer than 500 government securities brokerage transactions per year; (7) Effect brokerage transactions only through another government securities broker or dealer on a fully disclosed basis; or (8) Effect brokerage transactions that do not involve active solicitations.

An agency may not conduct or sponsor, and an organization (or a person) is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

For further information on the requirements to file this notice, please refer to the instructions.

OFFICIAL USE	Form G-FIN Page 2 of 3
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## Notice of Government Securities Broker or Government Securities Dealer Activities to be Filed by a Financial Institution under Section 15C(a)(1)(B) of the Securities Exchange Act of 1934

1.	Ch	eck appropriate regulatory ag	ency (ARA):		2.	Conducts business as:			
	A.	☐ Comptroller of the Currer	псу			A. Government Securities Broker			
	В.	Board of Governors of the Federal Reserve System				B. Government Securities Dealer			
	C.  Federal Deposit Insurance Corporation					C. Government Securities Broker and Dealer			
	D.								
					3.	Filing status of notice:			
						A. Notice			
						B. Amendment			
4.	A.	Full name of the financial ins	titution						
	B.	Address of principal office of financial institution:							
		Address							
		City	State	Zip Cod	de				
	C.	Address of principal office who (if different from item (B)):	nere government sed	curities b	roker or g	overnment securities dealer activities will be conducted			
		Address							
		City	State	Zip Cod	de				
	D.	Mailing address if different fr	om (B) or (C):						
		Address							
		City	State	Zip Cod	de				
	E.	. Name, title, and telephone number of contact person with respect to this notice:							
		Name		Title		Area Code / Phone Number			
	loc	es financial institution conduc ation other than given in Que: yes, provide addresses and d	stion 4 above?	governme A. 🗌 Y		ties broker or government securities dealer activities at any  No			
	Add	ress	City	State	Zip Code	Describe Activities			
	Add	ress	City	State	Zip Code	Describe Activities			
	Add	ress	City	State	Zip Code	Describe Activities			
	Add	lress	City	State	Zip Code	Describe Activities			

6.	Furnish the name and title of each person who is difinancial institution's government securities broker of				pervision of any of the			
	Full Name							
	Last / First / Middle			Title				
	Last / First / Middle			Title				
	Last / First / Middle			Title				
	Last / First / Middle			Title				
	Last / First / Middle			Title				
7	NOTE: Attach a separate Form G-FIN-4 (or, if prenamed in item 6.  Has any "associated person" (see definition in para	•	.,					
	Form G-FIN-4, or "yes" to one or more questions in							
	A. $\square$ Yes B. $\square$ No							
	NOTE: The financial institution and the person executing this form are responsible for making an inquiry of all other employers of any associated person during the immediately preceding three years for the purpose of verifying the accuracy of the information furnished on Form G-FIN-4. (See 17 C.F.R. § 400.4(c)). Similar requirements are applicable to Form MSD-4 and Form U-4.							
8.	8. The financial institution submitting this notice and the person executing it represent that all of the information contained herein is true, current, and complete.							
Please print name and title of person executing this notice:								
	Name (First, Middle, Last)							
	Title							
	Signature	Date						