

Notification by a Bank Holding Company to Acquire a Nonbank Company and/or Engage in Nonbanking Activities—FR Y-4

Corporate Title of Notifica	nt		
Street Address			
City	State	Zip Code	
Hereby provides the	e Board with a notice	pursuant to:	
	action for certain non		Act of 1956, as amended ("BHC Act"— 12 U.S.C. § 1843), under the well-run bank holding companies" as described in section 225.23 of
(2) Section 4(c) of Regulation		IC Act, under the "Proc	cedures for other nonbanking proposals" as described in section 225.24
		directly in certain nonb ership, control, or powe	anking activities, <i>de novo</i> , through acquisition of the assets of a going r to vote at least(%) of the voting shares of: Number
Corporate Title of Compa	ny to be Acquired and/or D	escription of Nonbanking Act	ivity (refer to section 225.28 of Regulation Y, as applicable)
Street Address			
City	State	Zip Code	
			Does notificant request confidential treatment for any portion of this submission? Yes As required by the General Instructions, a letter justifying the request for confidential treatment is included. The information for which confidential treatment is being sought is separately bound and labeled "Confidential."

Public reporting burden for this collection of information is estimated to average 0.5 hours for a post-consummation notification, 5 hours for an expedited notification, and 12 hours for a complete notification, including the time to gather and maintain data in the required form, to review instructions, and to complete the information collection. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Secretary, Board of Governors of the Federal Reserve System, 20th and C Streets, NW, Washington, DC 20551; and to the Office of Management and Budget, Paperwork Reduction Project (7100-0121), Washington, DC 20503. The Federal Reserve 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.

Name, title, address, telephone number, and facsimile number of person(s) to whom inquiries concerning this notification may be directed:

Name Title Street Address			Name Title Street Address								
						City	State	Zip Code	City	State	Zip Code
						Area Code / Phone Number			Area Code / Phone Number		
Email Address			Email Address								

Certification

I certify that the information contained in this notification has been examined carefully by me and is true, correct, and complete, and is current as of the date of this submission to the best of my knowledge and belief. I acknowledge that any misrepresentation or omission of a material fact constitutes fraud in the inducement and may subject me to legal sanctions provided by 18 U.S.C. §§ 1001 and 1007.

I also certify, with respect to any information pertaining to an individual and submitted to the Board in (or in connection with) this notification, that the notificant has the authority, on behalf of the individual, to provide such information to the Board and to consent or to object to public release of such information I certify that the notificant and the involved individual consent to public release of any such information, except to the extent set forth in a written request by the notificant or the individual, submitted in accordance with the Instructions to this form and the Board's Rules Regarding

Signed this _____ day of _____ Day Month Availability of Information (12 C.F.R. Part 261), requesting confidential treatment for the information.

I acknowledge that approval of this notification is in the discretion of the Board of Governors of the Federal Reserve System (the "Federal Reserve"). Actions or communications, whether oral, written, or electronic, by the Federal Reserve or its employees in connection with this filing, including approval if granted, do not constitute a contract, either express or implied, or any other obligation binding upon the agency, the United States or any other entity of the United States, or any officer or employee of the United States. Such actions or communications will not affect the ability of the Federal Reserve to exercise its supervisory, regulatory, or examination powers under applicable laws and regulations. I further acknowledge that the foregoing may not be waived or modified by any employee or agency of the Federal Reserve or of the United States.

Signature of Chief Executive Officer or Designee

Print or Type Name

Year

Title