NOAA FORM 34-82

OMB NO 0648-0041 Expires: 06/30/2022

Mail report and tax return copy to:

NOAA Fishe Capital Con 1315 East-W Silver Sprin 301-713-23

U.S. DEPARTMENT OF COMMERCE NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION **NOAA Fisheries**

Capital Construction Fund Program DEPOSIT/WITHDRAWAL REPORT

Prepare a separate Form 34-82 report for each account you maintain. DEPOSITORY BANK, OR INVESTMENT FIRM lame:				AGREEMENT	HOLDER:	CCF CASE NUMBER				
				Name :						
						CCF -	CCF			
10.				Address:						
y and State:						REPORT OF DEPOSITORY				
Number:	Date Opened:					——— ACTIVITY FOR TAX YEAR ENDED				
			t Chacking					,		
e of Investment Account: Savings Money Market CheckIng							/ /			
Other: (describe)				Telephone No:						
YES NO			CLASSIFICATION	OF DEPOSITS:				Notes :		
.23	ORDINAR	ORDINARY INCOME CAPITAL G		AI GAIN	CAPITAL		SUMMARY			
YES 🗆 NO	(tax deferred) (tax deferr					BALANCE				
•	DEPOSIT	WITHDRAWAL	DEPOSIT	WITHDRAWAL	DEPOSIT	WITHDRAWAL				

st Highway MD 20910-3282 Did you reduce taxable Was a CCF deposit mae	Due 30 days after filing date of Federal Tax Return (including extensions). This report must be filed annually, whether or not agreement activity took place. Attach a signed copy of the Federal Income Tax Return, as filed with the IRS, to this report. e income for the current tax year due to CCF activity? Amount deferred \$ de during the current year for taxes deferred in the prior year? deposit in Account Activity section.	Number: Type of Investment Other: (describe) YES NO	Account: Saving			Telephone No:				FOR TAX YEAR E			
Did you reduce taxable Was a CCF deposit made	e income for the current tax year due to CCF activity? Amount deferred \$	☐ YES ☐ NO	ORDINARY		CLASSIFICATION O	· ·							
Was a CCF deposit made	Amount deferred \$				CLASSIFICATION O	DEPOSITS:							
	de during the current year for taxes deferred in the prior year? deposit in Account Activity section.	☐ YES ☐ NO								Notes:			
	deposit in Account Activity section.	□ 1 L3 □ 110	l l		CAPITAL (tax def		CAPITAL (funds <u>not</u> tax deferred)		SUMMARY BALANCE				
	DALANCE FORWARD, FROM DRIOD VEARIC REPORT		DEPOSIT	WITHDRAWAL	DEPOSIT	WITHDRAWAL	DEPOSIT	WITHDRAWAL	_				
	BALANCE FORWARD - FROM PRIOR YEAR'S REPORT (Should be same as last year's "Balance - End of Year" amou If different, attach a reconciling schedu												
vessel and Schedule A Schedule B page numl	nd dividend deposits. For deposits of vessel income, provide name of page number. For all withdrawals, provide name of vessel and ber for project.	SCH. A OR SCH. B											
DATE	DESCRIBE	PAGE#											
1									1				
2									2				
3									3				
4									4				
5									5				
6									6				
7									7				
8									8				
-													
9									9				
10									10				
To	OTAL EACH COLUMN (include "Balance Forward" amount for each colu	mn)	(()	()		()					
	WITHDRAWALS FOR THE YEAR (copy totals from adjacent colur	nn)	()	←	()	←	(←					
BALANCE - END OF TAX YEAR (net amounts and Summary Balance)													

Public Burden Statement

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with an information collection subject to the requirements of the Paperwork Reduction Act of 1995 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 0648-0041. Without this approval, we could not conduct this information collection. Public reporting for this information collection is estimated to be approximately 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information collection. All responses to this information collection are required to obtain benefits. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the NOAA Fisheries, F/MB5, 1315 East West Hwy., Silver Spring, MD 20910, Attn: Richard VanGorder, and Richard.VanGorder@noaa.gov if desired.

I certify that for this tax year, there were no withdrawals or transfers other than those enumerated above for this Capital Construction Fund agreement. This report reflects true and complete statements in accordance with all applicable rules and regulations issued or adopted by the Secretary of Commerce pertaining to Section 607 of the Merchant Marine Act of 1936, as amended. Information on this report is complete, true and correct to the best of my knowledge and belief. (Following Information is required.)

SIGNATURE	DATE	 Agreement holder or officer	Authorized
representative			