Board of Governors of the Federal Reserve System



Annual Report of Foreign Banking Organizations—FR Y-7

Report at the close of business as of the end of fiscal year

This report form is authorized by law: Sections 8(a) and 13(a) of the International Banking Act (12 U.S.C. §§ 3106(a) and 3108(a)); sections 113, 165, 312, 618, 809 of the Dodd-Frank Act (12 U.S.C. §§ 5361, 5365, 5412, 1850a(c)(1), and 5468(b)(1)).

Return to the appropriate Federal Reserve Bank the original and number of copies of the completed report required by the Federal Reserve Bank. The Federal Reserve may not conduct or sponsor, and an organization (or a person) is not required to respond to, an information collection unless it displays a currently valid OMB control number.

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NOTE: The Annual Report of Foreign Banking Organizations must be signed by an authorized official of the foreign banking	Date of Report (foreign banking organization's fiscal ye		n's fiscal year-end):	
organization.	Month / Day / Year			
I,	Reporter's Legal Entity Identifier (LE) (20-Character LEI Co	de)	
Name of Foreign Banking Organization Authorized Official	Reporter's Name, Street, and Mailing Address			
Title of Foreign Banking Organization Authorized Official	Legal Name of Foreign Banking Organization (Top-tier if filing as a tiered organization)			
attest that the Annual Report of Foreign Banking Organizations				
(including the supporting attachments) for this report date have been prepared in conformance with the instructions issued by the	Street Address of the Foreign Banking Organization			
Federal Reserve System and are true and correct to the best of my knowledge and belief.	City	Country		
	Mailing Address of the Principal Office (If different from street address)			
With respect to information regarding individuals contained in this				
report, the Reporter certifies that it has the authority to provide this information to the Federal Reserve. The Reporter also certifies	City	Country		
that it has the authority, on behalf of each individual, to consent or object to public release of information regarding that individual.	Person in the United States to whom questions about this report should be directed:			
The Federal Reserve may assume, in the absence of a request for	siloula de difectea.			
confidential treatment submitted in accordance with the Board's "Rules Regarding Availability of Information," 12 C.F.R. Part 261,	Name	Title	Title	
that the Reporter <u>and</u> individual consent to public release of all details in the report concerning that individual.	Street			
	City	State	Zip Code	
	Area Code / Phone Number	Area Code / F	AX Number	
Signature of Foreign Banking Organization Authorized Official	E-mail Address			
Date of Signature	Address (URL) for the Foreign Banking Organization's web page			
Indicate status of Annual Report to Shareholders:	Is confidential treatment requested for any portion of this report submission?			
is included with the FR Y-7 report	'			
will be sent under separate cover	In accordance with the General Instructions for this report (check only one),			
is not prepared	1. a letter justifying this request is being provided along with the report			
For Federal Reserve Bank Use Only	2. a letter justifying this red	uest has been prov	rided separately	
RSSD ID	NOTE: Information for which confidential treatment is being requested			
C.I	must be provided separate as "confidential."	arately and labeled		

Public reporting burden for the information collection in the FR Y-7 is estimated to average 6 hours per response, including time to gather and maintain data in the required form and to review instructions and 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 (7100-0297), Washington, DC 20503.

Checklist

The checklist below is provided to assist the reporting foreign banking organization in filing all the necessary responses to the various report items. Each report item should be checked and the appropriate blanks filled in. The completed checklist should be returned with the report.

Check the Yes, No, or N/A checkbox below, as appropriate, to indicate if the report item is included with the initial filing.

Report Item 1: Financial Information Regarding the Foreign Banking Organization (FBO)							
☐ Yes	\square No	1(a) Response provided in Attachment(s) #					
Yes		1(b) Response provided in Attachment(s) #					
Report Ite	m 2: Organiz	ation Information for the FBO					
Yes		2(a) Response provided in Attachment(s) #					
☐ Yes	□ N/A	2(b) Response provided in Attachment(s) #					
Report Item 3: Shares and Shareholders							
☐ Yes		3(a) Response provided on Report Page #	or in Attachment(s) #				
☐ Yes	☐ No	3(b) Response provided on Report Page #	or in Attachment(s) #				
☐ Yes	☐ No	3(c) Response provided on Report Page #	or in Attachment(s) #				
Report Ite	em 4: Eligibilit	y as a Qualified Foreign Banking Organization (QFBO)					
☐ Yes	☐ No	Items 4(e) and 4(f) have been completed and provided on Report Page # or in Attachment(s) #					
☐ Yes	□ N/A	Items 4(j) and 4(k) have been completed and provided on Report Page # or in Attachment(s) #					
☐ Yes	□ N/A	Items 4(I) and 4(m) have been completed and provided on Report Page # or in Attachment(s) #					
Report Item 5: Regulation YY Compliance for the FBO							
☐ Yes	☐ No	Items 5(a) through 5(e) have been completed and provided on Report Page #					

For Use by Tiered Foreign Banking Organizations

Tiered foreign banking organizations must list the legal name, mailing address, and physical location of subsidiary foreign banking organizations below. Refer to Who Must Report in the general instructions for filing by tiered foreign banking organizations.

A. For the fiscal year ending on			
	Month / Day / Year		
Legal name of subsidiary foreign ba	inking organization:		
Mailing address of head office:			
Maining address of fload office.	Street		
	City	Country	
Physical location of principal office: (not mailing address)	Street		
	City	Country	
		Country	
Name and address of authorized of	ficial in the United States: Name		
	Street		
	City	State	ZIP Code
	Area Code / Phone Number	Area Code / FAX Number	
	E-mail Address		
I,			
Name	Title		
an authorized official of the company pared in conformance with the report i	named above, certify that this Aninstructions.	nual Report of Foreign Banking Orga	nizations has been pre-
	Signature of Authorized Official	Date	

For Use by Tiered Foreign Banking Organizations—Continued

If the Foreign Banking Organization has more than two tiers, use additional pages as needed.

B. For the fiscal year ending on	Month / Day / Year		
Legal name of subsidiary foreig	n banking organization:		
Mailing address of head office:	Street		
Physical location of principal off	City ice:	Country	
(not mailing address)	Street		
	City	Country	
Name and address of authorize	d official in the United States:		
	Name		
	Street		
	City	State	ZIP Code
	Area Code / Phone Number	Area Code / FAX I	Number
	E-mail Address		
l,			
Name	Title		
an authorized official of the compa prepared in conformance with the	ny named above, certify that this <i>Annu</i> report instructions.	al Report of Foreign Banking	Organizations has been
	Signature of Authorized Official		Date
	Signaturo Si / tatriorizoa Omolar		