Guidelines For Filing The Annual Report On Operating Subsidiaries

Public reporting burden for the collection of information for this report is estimated to average three hours, 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 Licensing Activities Division, Comptroller of the Currency, 250 E Street, SW, Washington, DC 20219 and to the Office of Management and Budget, Paperwork Reduction Project, Washington, DC 20503.

An organization or a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. OMB No. 1557-0014.

GENERAL INFORMATION AND INSTRUCTIONS

Preparation and Use

This report is used to identify certain national bank operating subsidiaries (OS) that are subject to OCC supervisory authority. This report identifies a bank's operating subsidiaries that do business directly with consumers in the United States and are not functionally regulated as defined in section 5(c)(5) of the Bank Holding Company Act of 1956, as amended (12 USC 1844(c)(5)). Specifically, an OS does business directly with consumers if it provides products or services to individuals to be used primarily for personal, family, or household purposes.

National banks that have OS covered by the annual reporting requirements can find additional information at 69 FR 64478 (November 5, 2004) and 12 CFR 5.34(e)(6).

All items must be answered with complete and accurate information that is subject to verification. If the answer is none or not applicable, so state. The OCC encourages national banks to use BankNet to submit this report using the BankNet secure mailbox. BankNet access is a free service for national banks and may be obtained by going to the BankNet site, www.banknet.gov, and selecting the item with the instructions, "If you are an OCC chartered bank and wish TO APPLY." The OCC provides a sample report document on BankNet and its public Web site (refer to the Comptroller's Licensing Manual, Investment in Subsidiaries and Equities booklet, Application Documents page, http://www.occ.gov/corpapps/forms.htm#Investment).

Report Submission

The report may be attached as a Word, Excel, RTF, or text document. Whichever format is used, the data should be in numerical order as on the line item requirements numbered (1) through (14) below, with each data element clearly labeled. NOTE: All e-mailed reports must be sent through the BankNet-secure site.

BankNet Members:

Attach the completed report to the e-mail created in BankNet's secure mailbox, opsubreporting@occ.treas.gov. This report may be written directly into the body of an e-mail message as long as each field is the proper length and listed sequentially down the page as displayed below.

Non-BankNet Members:

Mail or fax a hardcopy report, including the information that identifies the bank official submitting the report, to:

Licensing Activities, Attn: Op Sub Reporting, mail stop 7-13 Comptroller of the Currency 250 E Street, SW Washington, DC 20219

Fax: 202-874-5293

	Line Item Requirements	Maximum Character Length
1.	Parent national bank name (legal name)	72
2.	Charter number	6
	A blank line between line numbers 2 and 3.	(Line intentionally left blank)
3.	Name of the OS	72
4.	Any doing business as (DBA), abbreviated, or trade name(s) of the OS, separating each name with a comma if there are multiple names	40
5.	Street address or PO box of the OS	60
6.	City of the OS	28
	State of the OS	2
8.	ZIP code of the OS	10, include dash
9.	E-mail address of the contact person, if available	40
10.	Telephone number of the OS	12, including dashes
	Principal place of business (PPB) of the OS, if different from the information reported on lines 5 - 8 and using the same layout as in line numbers 5 - 8 above. (11)a Street address of the PPB (11)b City of the PPB (11)c State of the PPB (11)d ZIP code of the PPB (11)e Telephone number of the PPB	60 28 2 10, including dash 12, including dashes
12:	The types of activities in which the OS does business directly with consumers, using the appropriate code from Appendix B of the North American Industry Classification System (NAICS) Activity Codes for Commonly Reported Activities to the Instructions for Preparation of Report of Changes in Organizational Structure, Form FR Y-10. (If an OS is engaged in an activity not listed in Appendix B to the instructions for Form FR Y-10, a national bank shall report the code "0000" and provide a brief description of the activity on line 13.) Separate each activity code by a comma, if there are multiple reportable lines of business. The NAICS activity codes for commonly reported banking activities are located at http://www.federalreserve.gov	
	A copy of the current codes is attached.	4-6 per code

13. Brief description of activity. Use only if code 0000 is	
reported on line 12.	Unlimited
A blank line between each operating subsidiary listing of	
items 1 through 13, when applicable.	(Line intentionally left blank)
A blank line between items 13 and 14.	(Line intentionally left blank)
14. Name, title, mailing address, telephone number, and	
e-mail address, if available, of the bank official submitting	
the report.	

Example of Required Layout for a Bank with Two Operating Subsidiaries

Bank Name (legal name) ABC National Bank and Trust Company

Charter Number 000000

Operating Subsidiary Name ABC National Bank and Trust Mortgage Loans

DBA, Abbreviated, or Trade name(s) Anytime Mortgage Loans

Street Address or PO Box PO Box 61582

City Name Anytime

State NE ZIP code+4 99999-0000

E-mail Address AnytimeLoa n@ABCNBT.com

999-999-9999 Telephone Number

PPB Street Address 12 Main Street

PPB City Name Anytime

PPB State NE PPB ZIP code+4 99999-9999

PPB Telephone number 999-999-9999

NAICS codes 52231 **Activity Description** (Use only if the NAICS code is 0000)

Operating Subsidiary Name ABC National Bank and Finance DBA, Abbreviated, or Trade name(s) Anytime Finance

Street Address or PO Box 1 Main Street City Name Anywhere

State MA

ZIP code+4 99999-0000 E-mail Address of Contact Person AnytimeFinance@ABCNBT.com

Telephone Number 999-999-9999 PPB Street Address NA

PPB State NA PPB ZIP code+4 NA

PPB Telephone Number NA

NA

NAICS codes 52231 **Activity Description** (Use only if the NAICS code is 0000)

John Doe

Assistant Vice President

1 Main Street MA 99999-0000

johndoe@ABCNBT.com

555-555-9999

PPB City Name

Annual Report On Operating Subsidiaries (OS) For Year Ended _____

Parent National Bank Name (Legal Name) (72 characters)*	
Charter Number (6 characters)	
·	(Line intentionally left blank)
Name of OS # 1 (72 characters)	-
Doing Business As (DBA), Abbreviated, or Trade Name(s)	
(40 characters)	
Current Street or PO Box of OS (60 characters)	
City of OS (28 characters)	
State of OS (2 characters)	
ZIP code of OS (10 characters)	
E-mail Address of OS (40 characters)	
Telephone Number of OS: (12 characters, including dashes)	
Street Address of Principal Place of Business (PPB), if	
different from above (60 characters)	
PPB City (28 characters)	
PPB State (2 characters)	
PPB ZIP code (9 characters)	
North American Industry Classification System Code (NAICS)	
(4-6 characters; separate multiples with a comma)	
Activity Description (Use only if the NAICS code is 0000)	
	(Line intentionally left blank)
Name of OS #2 (72 characters)	
Doing Business As (DBA), Abbreviated, or Trade Name(s)	
(40 characters)	
Current Street or PO Box of OS (60 characters)	
City of OS (28 characters)	
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^{*}Indicates maximum number of characters to be entered.