#### **DEPARTMENT OF THE TREASURY**

Office of the Comptroller of the Currency

#### FEDERAL RESERVE SYSTEM

## FEDERAL DEPOSIT INSURANCE CORPORATION

## Proposed Collection; Comment Request

AGENCIES: Office of the Comptroller of the Currency, Treasury; Board of Governors of the Federal Reserve System; and Federal Deposit Insurance Corporation.

**ACTION:** Notice and request for comments.

**SUMMARY:** The Office of the Comptroller of the Currency (OCC), the Board of Governors of the Federal Reserve System (Board), and the Federal Deposit Insurance Corporation (FDIC) (collectively, the Agencies), as part of their continuing efforts to reduce paperwork and respondent burden, invite the general public and other Federal agencies to comment on proposed information collections, as required by the Paperwork Reduction Act of 1995. Currently, the Agencies are soliciting comments concerning an information collection titled (MA)-Financial Institutions Securities Qualifications Forms.

**DATES:** Written comments should be submitted by February 28, 1997.

**ADDRESSES:** Direct all written comments to:

OCC: Communications Division, Attention: 1557–FISQ, Third Floor, Office of the Comptroller of the Currency, 250 E Street, SW, Washington, DC 20219. In addition, comments may be sent by facsimile transmission to (202) 874–5274, or by electronic mail to

REGS.COMMENTS@OCC.TREAS.GOV.

Board: Mr. William W. Wiles, Secretary, Board of Governors of the Federal Reserve System, 20th and C Streets, N.W., Washington, D.C. 20551, or delivered to the Board's mail room between 8:45 and 5:15 p.m., and to the security control room outside of those hours. Both the mail room and the security control room are accessible from the courtyard entrance on 20th Street between Constitution Avenue and C Street, N.W. Comments received may be inspected in room M-P-500 between 9:00 a.m. and 5:00 p.m., except as

provided in section 261.8 of the Board's Rules Regarding Availability of Information, 12 CFR 261.8(a).

FDIC: Office of the Executive Secretary, Federal Deposit Insurance Corporation, 550 17th Street, N.W., Washington, D.C. 20429. Comments may be hand-delivered to room F-402. 1776 F Street, N.W., Washington, D.C. 20429, on business days between 8:30 a.m. and 5:00 p.m. Comments may be sent through facsimile to (202) 898-3838 or by the Internet to: COMMENTS@FDIC.GOV. Comments will be available for inspection at the FDIC Public Information Center, room 100, 801 17th Street, N.W., Washington, D.C., between 9:00 a.m. and 4:30 p.m. on business days.

A copy of the comments may also be submitted to the OMB desk officer for the agencies: Alexander Hunt, Office of Information and Regulatory Affairs, Office of Management and Budget, New Executive Office Building, Room 3208, Washington, D.C. 20503.

#### FOR FURTHER INFORMATION CONTACT:

Requests for additional information or copies of the collection may be obtained by contacting:

OCC: Jessie Gates or Dionne Walsh, (202) 874–5090, Legislative and Regulatory Activities Division (1557– FISQ), Office of the Comptroller of the Currency, 250 E Street, SW, Washington, DC 20219. Internet address:

REGS.COMMENTS@OCC.TREAS.GOV. Board: Mary M. McLaughlin, Board Clearance Officer, (202) 452–3829, Division of Research and Statistics, Board of Governors of the Federal Reserve System, 20th & C Streets, N.W., Washington, D.C. 20551. For the hearing impaired only, Telecommunications Device for the Deaf (TDD), Dorothea Thompson, (202) 452–3544, Board of Governors of the Federal Reserve System, 20th & C Streets, N.W., Washington, D.C. 20551.

FDIC: Steven F. Hanft, FDIC Clearance Officer, (202) 898–3907, Office of the Executive Secretary, Federal Deposit Insurance Corporation, 550 17th Street, N.W., Washington, D.C. 20429. Internet address: COMMENTS@FDIC.GOV.

#### SUPPLEMENTARY INFORMATION:

*Title:* (MA)—Financial Institutions Securities Qualifications Forms OMB Number: Not yet assigned.

Form Number: Forms SB, SBW, U-4B, and U-5B.

*Abstract:* This information collection covers the securities qualifications

forms for banks and bank employees involved in retail securities sales programs. This information will promote safe and sound operations of financial institution-sponsored securities sales programs and will enhance customer protection.

Additionally, the collection will be instrumental in preventing unqualified or disqualified individuals from recommending or selling retail securities on behalf of financial institutions regulated by the OCC, Board, and FDIC.

*Type of Review:* New Collection. *Affected Public:* Businesses or other for-profit.

#### OCC

Number of Respondents: 120. Total Annual Responses: 1,248. Frequency of Response: Occasionally. Total Annual Burden Hours: 2,184.

#### Board

Number of Respondents: 100. Total Annual Responses: 754. Frequency of Response: Occasionally. Total Annual Burden: 2,142.

#### **FDIC**

Number of Respondents: 70. Total Annual Responses: 523. Frequency of Response: Occasionally. Total Annual Burden Hours: 1,483.

#### Comments

Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval. All comments will become a matter of public record. Comments are invited on:

- (a) Whether the collection of information is necessary for the proper performance of the functions of the agency, including whether the information has practical utility;
- (b) The accuracy of the agency's estimate of the burden of the collection of information:
- (c) Ways to enhance the quality, utility, and clarity of the information to be collected;
- (d) Ways to minimize the burden of the collection on respondents, including through the use of automated collection techniques or other forms of information technology; and
- (e) Estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information.

Dated: December 16, 1996.

Karen Solomon,

Director, Legislative and Regulatory Activities Division.

By order of the Board of Governors of the Federal Reserve System, December 16, 1996.

William W. Wiles,

Secretary of the Board.

By Order of the Board of Directors.

Dated at Washington, D.C., this 11th day of December, 1996.

Federal Deposit Insurance Corporation
Jerry L. Langley,

Executive Secretary.

BILLING CODE 4810-33-P, 6210-01-P, 6714-01-P

FORM SB

OMB APPROVAL

OMB Number: XXXXX

Expires: XXXXX

Estimated average burden hours per response .....

## UNIFORM NOTICE FOR SPONSORING BANK

OCC (12/96) FDIC (12/96) FRB (12/96)

#### FORM SB INSTRUCTIONS

#### GENERAL INSTRUCTIONS

1. FORM SB - The Uniform Notice for Sponsoring Banks. Sponsoring Banks are required to file this form with their primary federal banking agency. Filing of the Form is to be made with the Central Registration Depository ("CRD") system which is operated by the National Association of Securities Dealers, Inc. ("NASD"). Sponsoring Banks will be assigned a unique CRD identification number which will be used to identify banks engaged in covered transactions and to identify bank securities representatives. The CRD is also used to track customer complaints and movement of bank securities representatives/registered representatives from one broker-dealer/sponsoring bank employer to the next.

The NASD is acting as agent for each of the federal banking agencies for purposes of receiving filings from Sponsoring Banks. These instructions apply both to electronic filing with the CRD System as well as filing of paper copies with the NASD.

- 2. **UPDATING** By regulation, the Sponsoring Bank must update promptly Form SB information by submitting amendments whenever the information on file becomes materially inaccurate or incomplete for any reason.
- CONTACT EMPLOYEE The individual listed as the contact employee must be authorized to receive all compliance information, communications, and mailings, and be responsible for disseminating it within the Sponsoring Bank.
- 4. **FEDERAL INFORMATION LAW AND REQUIREMENTS** The information in this form is required by the federal banking agencies. <u>See</u> 12 CFR, Part 12 Subpart B (OCC); 12 CFR, Part 208 (FRB); and 12 CFR Part 342 (FDIC). The information is used for regulatory purposes, including deciding whether to grant registration. The federal banking agencies maintain files of the information on this form and, through the NASD, intend to make it publicly available. Sponsoring Banks are not required to file Form SB with the federal banking agencies if the form does not have a current OMB number.

#### A. PAPER FILING INSTRUCTIONS

#### FORMAT

- a. Attach the Execution Page (Page 5) with original manual signatures to the initial Form SB filing and each amendment to the Form. Complete all amended pages in full.
- b. Give the name of the Sponsoring Bank and date on each page.
- c. Use only the current version or photocopy of Form SB.

#### I. GENERAL INSTRUCTIONS (Cont'd)

#### B. ELECTRONIC FILING INSTRUCTIONS

Contact the NASD's CRD ((301) 590-6500) for information and software concerning electronic access to the CRD.

#### FORMAT

- a. A full paper Form SB is required when the Sponsoring Bank is filing with the federal banking agency for the first time.
- b. All items must be answered and all fields requiring a response must be completed before the filing will be accepted.
- c. A Sponsoring Bank must complete the execution screen certifying that Form SB and amendments thereto have been executed properly and that the information contained therein is accurate and complete.
- d. To amend information, the Sponsoring Bank must update the appropriate Form SB screens.
- e. A paper copy, with original manual signatures, of the initial Form SB filing and amendments must be retained by the Sponsoring Bank and made available for inspection by the bank's federal banking agency.

The mailing address for the federal banking agencies for questions and correspondence regarding Form SB is:

Federal Deposit Insurance Corporation
Office of the Comptroller of the Currency, or
Board of Governors for the Federal Reserve System
c/o NASD Central Registration Depository
P.O. Box 9401
Gaithersburg, Maryland 20898-9401

#### II. DISCLOSURE REPORTING PAGE (DRP)

Information concerning the Sponsoring Bank that relates to the occurrence of an event reportable under Item 5 must be provided on the Sponsoring Bank's appropriate DRP (SB).

#### **EXPLANATION OF TERMS**

(The following terms are italicized throughout this form)

#### **List of Defined Terms**

GENERAL

Applicant - The Sponsoring Bank applying on or amending this form.

**Bank** - any insured depository institution, as defined at 12 U.S.C. 1813(c)(2). Bank shall not include a branch of a bank located outside of any state as defined at 12 U.S.C. 1813 (a)(3).

Central Registration Depository (CRD) - database operated by the NASD.

Covered Sale - means a retail solicitation, recommendation, purchase, or sale of a covered product by a bank through its employees regardless of the means through which the solicitation, recommendation, purchase or sale occurs. The term shall not include a covered transaction involving a fiduciary account administered by a bank, a transaction involving a municipal security by a municipal securities dealer bank registered under section 15B of the Securities Exchange Act of 1934, 15 U.S.C. 78o-4, or a transaction by a bank of its own securities consistent with the conditions set forth in Securities Exchange Act Rule 3a4-1(a)(4), 17 CFR 240.3a4-1(a)(4).

**Covered Transaction** - has the same meaning as "security" as defined at section 3(a)(10) of the Securities Exchange Act, 15 U.S.C. 78c(a)(10). The term shall not include any product that is a deposit as defined in section 3(1) of the Federal Deposit Insurance Act, 12 U.S.C. 1813(1), or any "government security" as defined at section 3(a)(42) of the Securities Exchange Act of 1934, 15 U.S.C. 78c(a)(42).

Self-Regulatory Organization ("SRO") - means any national securities and commodities exchange, any national securities association (e.g., the NASD), or any registered clearing agency.

Sponsoring Bank - means a bank that engages in or seeks to engage in "covered transactions."

2. FOR THE PURPOSE OF ITEM 5 AND THE CORRESPONDING DISCLOSURE REPORTING PAGES (DRPs):

**Charged** - Being accused of a crime in a formal complaint, information, or indictment (or equivalent formal charge).

**Enjoined** - Includes being subject to a mandatory injunction, prohibitory injunction, preliminary injunction or a temporary restraining order.

II. FOR THE PURPOSE OF ITEM 5 AND THE CORRESPONDING DISCLOSURE REPORTING PAGES (DRPs): (Cont'd)

**Felony** - For *jurisdictions* that do not differentiate between a *felony* or *misdemeanor*, is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000.

Foreign Financial Regulatory Agency - Includes (1) a foreign securities authority; (2) other governmental body or foreign equivalent of a self-regulatory organization empowered by a foreign government to administer or enforce its laws relating to the regulation of investment-related activities; or (3) a foreign membership organization, a function of which is to regulate the participation of its members in investment-related activities listed above.

**Found** - Includes adverse final actions, including consent decrees in which the respondent has neither admitted nor denied the findings, but does not include agreements, deficiency letters, examination reports, memoranda of understanding, letters of caution, admonishments, and similar informal resolutions of matters.

**Investment or Investment-Related** - Pertaining to securities, commodities, banking, insurance or real estate (including, but not limited to, acting as or being associated with a broker-dealer, issuer, investment company, investment adviser, futures sponsor, bank or savings association).

**Involved** - Doing an act or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act.

**Jurisdiction** - A state, the District of Columbia, any Territory of the United States, the Commonwealth of Puerto Rico, Guam, American Samoa, the Virgin Islands, or any subdivision or regulatory body thereof.

**Minor Rule Violation** - A violation of a *self-regulatory organization* rule which has been designated as "minor" pursuant to a plan approved by the U.S. Securities and Exchange Commission. A rule violation may be designated as "minor" under a plan if the sanction imposed consists of a fine of \$2,500.00 or less, and if the sanctioned person does not contest the fine. Check with the appropriate *self-regulatory organization* to determine if a particular rule violation has been designated as "minor" for these purposes.

**Misdemeanor** - For jurisdictions that do not differentiate between a *felony* or *misdemeanor*, is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000.

*Order* - A written directive issued pursuant to statutory authority and procedures, including orders of denial, suspension, or revocation; does not include special stipulations, undertakings or agreements relating to payments, limitations on activity or other restrictions unless they are included in an order.

**Proceeding** - Includes a formal administrative or civil action initiated by a governmental agency, self-regulatory organization or foreign financial regulatory authority, a felony criminal indictment or information (or equivalent formal charge), or a misdemeanor criminal information (or equivalent formal charge), but does not include an arrest or similar charge effected in the absence of a formal

criminal indictment or information (or equivalent formal charge). NOTE: *Investment-related* civil litigation, other than that specified above, is reportable under Item 5H on Form U-4B. An *investigation* is reportable under Item 5G on Form U-4B.

#### **EXECUTION:**

The undersigned, states that he/she has executed this form on behalf of, and with the authority of, said Sponsoring Bank. The undersigned and the Sponsoring Bank represent that the information and statements contained herein, including exhibits attached hereto, and other information filed herewith, all of which are made a part hereof, are current, true and complete. The undersigned and Sponsoring Bank further represent that to the extent any information previously submitted is not amended such information is currently accurate and complete.

	·	
Date: (MM/DD/YYYY)	Name of Sponsoring Bank	
BY:		
Signature	Print Name and Title	

FORM SB	Applicant Name:	OFFICIAL USE	official use only									
(Revised) X-XX	Date: Bank CRD No.:		,									
NA PAULIC												
	WARNING: Intentional misstatements or omissions of facts may constitute criminal violations											
1. (A) Full name of Spor	nsoring Bank: (B) Sponsoring Bank CRD No.:											
(C) Sponsoring Bank	's main address: (D) Mailing address, if different:		-									
(E) Area Code/Teleph	(E) Area Code/Telephone No.:											
2. Contact employee for	securities activities of Sponsoring Bank.											
Name:	Title:											
Address: Suite:												
City, State: Phone:												
3. Type of Charter												
State	National											
A. Fadaval Danking Age	The Manufaction Number (appure one of the items helev)											
	ency Identification Number (answer one of the items below).		-									
	(national banks)											
	Certificate # (state chartered, non-members banks); or											
C. FRB ID#	(state chartered, member banks)											
<ol> <li>Use the appropriate DRP for providing details to "yes" answers to the questions in Item 5. Refer to the Explanation of Terms section of Form SB Instructions for explanations of italicized terms.</li> </ol>												
	CRIMINAL DISCLOSURE											
A. In the past ten ye	ars has the applicant:											
	cted of or pled guilty or nolo contendere ("no contest")in a domestic or foreign court to any	Yes No										
(2) been charg	ged with any felony?		-									
B. In the past ten ye	ears has the applicant:											
misdemeanor i omissions, wro	icted of or pled guilt or nolo contendere ("no contest")in a domestic or foreign court to a involving: investments or an investment-related business, or any fraud, false statements or ingful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to these offenses?		-									
(2) been charg	ed with a misdemeanor specified in 5B?											

FORM SB	Applicant Name:	OFFICIAL USE	official use only										
(Revised) X-XX	Date: Bank CRD No.:	-											
	REGULATORY ACTION DISCLOSURE												
C. Has the U.S. Securit	C. Has the U.S. Securities and Exchange Commission or the Commodity Futures Trading Commission ever:  Yes No												
(1) found the applicant to have made a false statement or omission? (2) found the applicant to have been involved in a violation of its regulations or statutes? (3) found the applicant to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked, or restricted? (4) entered an order against the applicant in connection with investment-related activity? (5) imposed a civil money penalty on the applicant, or ordered the applicant to cease and desist from any activity?													
D. Has any other federa	al regulatory agency, any state regulatory agency, or foreign financial regulatory authority:												
(2) ever found the ap (3) ever found the ap business denied, (4) in the past ten ye (5) ever denied, sus	pplicant to have made a false statement or omission or been dishonest, unfair, or unethical? pplicant to have been involved in a violation of investment-related regulations or statutes? pplicant to have been a cause of an investment-related business having its authorization to do suspended, revoked, or restricted? ars, entered an order against the applicant in connection with an investment-related activity? beended, or revoked the applicant's registration or license or otherwise, by order, prevented it with an investment-related business or restricted its activities?		<b>-</b> .										
E. Has any self-regulate	ory organization or commodities exchange:		-										
(1) found the applicant to have made a false statement or omission? (2) found the applicant to have been involved in a violation of its rules (other than a violation designated as a "minor rule violation" under a plan approved by the U.S. Securities and Exchange Commission)?  (3) found the applicant to have been the cause of an investment-related business having its authorization to do business denied, suspended, revoked, or restricted?  (4) disciplined the applicant by expelling or suspending it from membership, barring or suspending its association with other members, or otherwise restricting its activities?													
	r a control affiliate's authorization to act as an attorney, accountant, or federal contractor ever pended?												
G. Is the applicant or a to any part of 11C, D		-											
	CIVIL JUDICIAL DISCLOSURE												
H. (1) Has any domesti	c or foreign court:												
(a) in the past ten years, enjoined the applicant or a control affiliate in connection with any investment-related activity?													
(b) ever found that the applicant or a control affiliate was involved in a violation of investment-related statutes or regulations?													
	sed, pursuant to a settlement agreement, and investment-related civil action brought against the control affiliate by a state or foreign financial regulatory authority?												
	r a control affiliate now the subject of any civil proceeding that could result in a "yes" answer												

FORM SB PAGE 3	Applicant Name:	OFFICIAL USE	official use only								
(Revised) X-XX	Date: Bank CRD No.:										
FINANCIAL DISCLOSURE											
In the past ten years affiliate of a securitie	has the applicant or a control affiliate of the applicant ever been a securities firm or a control s firm that:	Yes No									
(1) has been the si	ubject of a bankruptcy petition?		!								
	(2) has had a trustee appointee or a direct payment procedure initiated under the Securities Investor  Protection Act?										
J. Has a bonding company ever denied, paid out on, or revoked a bond for the applicant?											
K. Does the applicant h											
EXECUTION:											
	of the information I am filing is correct, that I am authorized to execute this form for the hat the Sponsoring Bank's books and records will be preserved and available for inspection										
Date:	Name:										
Telephone No.: (	- 										
By: (Signature and Title)											
,			İ								

	JD101712 71	OTTON DIOCE	JOINE III	PORTING	PAGE (SB)	
		General Ins	tructions			
This Disclosure Reporting Page (DRF to Items 5H of Form SB:	SB) is an	initial or amended	response used	I to report deta	ls for affirmative responses	
Check item(s) being responded to: 5H(1) Has any domestic or foreig	, enjoined the ap applicant was inv suant to a settler	volved in a violation of in ment agreement, an inve	vestment-relat	ed statutes or i	egulations?	
5H(2)  Is the applicant now the	subject of any	civil proceeding that cou	ld result in a y	es answer to ar	y part of 5H?	
One event may result in more than or event. Unrelated civil judicial actions			above items. l	Jse only one D	RP to report details related to the sa	ame
		PAR	ΤΙ			
Name of Applicant			,	Applicant CRD	Number	
		PAR	 Г II			
Court Action Initiated by: (Name the regulator,	foreign financial regu	ulatory authority, SRO, commod	ities exchange, Age	ncy, Firm, Private Pl	aintiff, etc.)	
2. Relief Sought: (Temporary Restraining Order,	Mandatory Injunction	, Preliminary Injunction, etc.)		3. Filing	Date of Court Action: MM/DD/YY	
i. Product Type(s):					-	
5. Court formal action was brought in: (Name of	federal, military, state	or foreign court)		-		
Location of Court: (City or County and State o	r Country)	-		7.00	ckel/Case Number:	
s. Eccation of Court. (City of Courty and State o						
Not Applicable						
Describe allegations relating to this court action	n: (use reverse side d	of this sheet for additional comm	ents if necessary.)			
10. Is action currently: (check one)  pending on appeal final	11. If pending, (MM/DD/Y)	date notice was served:	12. If on appe (provide n	al, action appealed arme of court)	o: 13. If on appeal, date fil (MM/DD/YY)	led:
IF FINAL OR ON APPEAL, COMPLE	TE ALL ITEMS	BELOW. FOR PENDIN	G ACTIONS, C	OMPLETE ITE	M 21 ONLY.	
14. How was the matter resolved? (Settled, Consent, Judgment Rendered, etc.)	15. Resolution (MM/DD/Y)		: d, Censured, etc.)			
17. If Suspended, Is suspension/injunction Enjoined duration? (If no, provid or Barred: Yes \(\bigcap\) No	n/bar of a fixed te details in Item 21.)	Suspension/Injunction/E Start Date: (MM/DD/Y)		ration: (Gen	ension/Injunction/Bar capacity affected: eral Securities Principal, scial & Operations Principal, Options Trading, et	tc.)
	on/retraining	If yes, length of time given to (If no, provide details in item :	requalify/retrain: 21.)	Type of exam red for requalification	uired Has condition been satisfied?	
8. If requalification by Is requalification exam/retraining was a condition of the disposition:				L		
exam/retraining was a time-related? condition of the disposition:  9. If disposition resulted in a fine, penalty, restitution, disporgement or	Penalty/Fine:	\$	Date Paid (M			
exam/retraining was a time-related? condition of the disposition:  19. If disposition resulted in a fine,	Restitution:	\$	Date Paid (M	WDD/YY)		
exam/retraining was a time-related? condition of the disposition:  19. If disposition resulted in a fine, penalty, restitution, disgorgement or monetary compensation:				WDDYY) WDDYY)		

				1.2				•		
				Gene	eral Instru	ctions	-			
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Check item(s) being resp 5A In the past ten yea  (1) been coal (2) been cha	ars has the app nvicted or pled	guilty or	nolo conten	dere <i>("n</i>	o contest") i	n a domestic, t	oreign, or mili	itary court to any	felony?	-
5B In the past ten year (1) been con investme	ars has the app nvicted or pled ents or an inves forgery, counter	olicant: guilty or stment-re	elated busine extortion, or	ess, or a a conspi	ny fraud, fai iracy to com	se statements	or omissions,	ary court to a mis wrongful taking o		
lultiple counts of the same parate cases arising ou one event may result in r	it of the same e	event, mi	ust be report	ted on se	eparate DRI					
pplicable court documer rovided to the CRD if no			aint, informat	tion or in	dictment as	well as judgen	nent of convic	tion or sentencing	g docun	nents) must b
					PART I				-	-
lame of Applicant						Appl	icant CRD Nu	ımber		
F	hahi in				PART II					-
Court: (Name of Federal, Milit.  Charge Detail Disclosu	ary, State or Foreign	on additio	Onal Crimina Charge Type (Check one of	nl Disclos	(City or County sure Reporti	Charge is		cket / Case Number:  ee charges arise Appeal Date (MM/DD/YY)	Produ	ct Type arge is
Court: (Name of Federal, Milit.  Charge Detail Disclostormal Charge(s) Description:	ary, State or Foreign  Ire: (Continue of the Charge Date :	on addition	onal Crimina Charge Type	nl Disclos	(City or County sure Reporti	ng Page SB if Charge i (check c	more than three scurrently one only)	ee charges arise	Produ	ct Type
Court: (Name of Federal, Milit.  Charge Detail Disclost  ormal Charge(s) Description:	ary, State or Foreign  Ire: (Continue of the Charge Date :	on addition	Onal Crimina Charge Type (Check one of	nl Disclos	(City or County sure Reporti	Charge is (check of check of c	more than three scurrently one only)  ng peal al Intervention	ee charges arise	Produ	ct Type arge is
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Court: (Name of Federal, Milit.  Charge Detail Disclost ormal Charge(s) Description:  FFINAL, ON APPEAL, COMPLETE ONLY ITEM	ary, State or Foreign  ure: (Continue of Charge Date: (MM/DD/YY)  PRE-TRIAL	On addition No. of counts	onal Crimina Charge Type (Check one of the charge Type) Misdemeanor	al Disclos  only) Felony  OMPLET	(City or County  SURE Reporti Plea (Guilty, Not Guilty, et	Pendi Pre-tri Pre-tri Final	more than threst currently one only)  ng peal al intervention  ng peal al intervention  ng peal al intervention  ng peal al intervention	ee charges arise Appeal Date (MM/DD/YY)	Produ (if ch investi	ct Type arge is
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#### REGULATORY ACTION DISCLOSURE REPORTING PAGE (SB)

#### **General Instructions**

Check items being responded to:  5c Has the US Securities and Exchange C  (1) Found the applicant to have been a  (2) Found the applicant to have been a  (4) Entered an order against the applica  (5) Imposed a civil money penalty on th  5d Has any other federal regulatory agenc  (1) Ever found the applicant to have bee  (3) Ever found the applicant to have bee  (4) In the past ten years, entered an or  (5) Ever denied, suspended or revoked restricted its activities?  5e Has any self-regulatory organization or  (1) Found the applicant to have been in and Exchange Commission)  (3) Found the applicant to have been in and Exchange Commission)  (4) Disciplined the applicant to have been the Gamma of Exchange Commission)  (5) Has the applicant on the subject of any one event may result in more than one affirmat by more than one regulator, provide details to e	false statement or covolved in a violation cause of an investm nt in connection with e applicant, or order a transparent of a reason at the applicant's register against or colored in a violation of cause of an invest or colored in a violation or cause of an invest or such a statement or colored in a violation or cause of an invest or such a statement or colored in a violation or cause of an invest or such a statement or colored in a violation or cause of an invest or such as a statement or colored in a violation or cause of an invest or such as a statement or colored in a violation or cause of an invest or such as a statement or colored in a violation or cause of an invest or cause or cause of an invest or cause or	mission? of its regulations or statutes? ent-related business having its investment-related activity? ed the applicant to cease and y agency or foreign financial it, or omission, or been dishon tion of investment-related reg estment-related business having ant in connection with an inve tration or license or otherwise  ge ever: mission? of its rules (other than a violat ment-related business having membership, barring or su untant or federal contractor ev gs that could result in a yes a ch of the above items. Use or	desist from any ac egulatory authority est, unfair, or uneth ulations or statutes ng its authorization strment-related act by order, prevente ion designated as its authorization to espending its associar been revoked on swer to any part of	tivity? : ideal? ? to do bivity? ed it from do busiation wi suspen if 5C, D,	n associating r rule violation iness denied ith other men inded? , or E?	ed, suspen y with an inv n° under a , suspende nbers, or ot	ded, revoked or restricted?  vestment-related business or  plan approved by the US Securities d, revoked or restricted? herwise restricting its activities?
Name of Applicant		Part I	Appl	icant CR	D Number		
Regulatory action initiated by: (Name the regulation)     Date initiated: (MM/DD/YY)     1 4. Doci	tor, foreign financial re	Part II  agulatory authority, SRO or comi	nodities exchange, e	ntc.)		i I 2. Regula I	atory action type:
6. Product Type(s): 7. Describe the allegations related to this regulator	y action: (Use reverse	side of this sheet for additional	comments if necess	ary.)			
8. Is regulatory action currently: (check one)  pending on appeal final	(SEC, SRO, U.	egulatory action appealed to: S Court of Appeals, etc.)				f on appeal, (MM/DD/YY)	date filed:
IF FINAL OR ON APPEAL, COMPLET	E ALL ITEMS BI	ELOW. FOR PENDING	ACTIONS, COM	IPLET	E ITEM 19	ONLY.	
11. How was the matter resolved? (settled, consent	etc.)	12. Resolution date: (A	MA/DD/YY)	13	3. Sanctions:	suspended,	censured, barred, requalification, etc.)
14. If Suspended, Is suspension/injunction duration? (If no, provide or Barred: ☐ Yes ☐ No		Suspension/Injunction/Bar Start Date: (MM/DD/YY)	Suspension/Bar Injunction/Dura	tion:	(Genera	Securities F	Bar capacity affected: Principal, Principal, Options Trading, etc.)
15. If requalification by sexam/retraining was a condition of the sanction:	on/retraining	If yes, length of time given to (If no, provide details in item			of exam requir qualification:	red	Has condition been satisfied?
16. If disposition resulted in a fine, penalty, restitution, disgorgement or	Penalty/Fine:	\$	Date Paid (MM/D	D/YY)			
monetary compensation: (Fill in amount on appropriate line)	Restitution:	\$	Date Paid (MM/D	(אאס			
	Disgorgement:	\$	Date Paid (MM/D	(אינס			
	Other:	\$	Date Paid (MM/D	(۲۲/ס			
17. Not Applicable.							
18. Was payment of all or any part of a monetary a							for additional analysis of the second
19. Provide summary of details related to the action	status and (or) dispo	SHOTE AND INCIDURE FRIEVANTE (BITTIS	COMMUNICATION CO	<sub>1</sub> U30	.010100 3100	4110 311031	assured comments a recessary.

**FORM SBW** 

OMB APPROVAL

OMB Number: XXXXX Expires: XXXXX Estimated average burden

hours per response .....

# UNIFORM NOTICE FOR SPONSORING BANK WITHDRAWAL

#### **GENERAL INSTRUCTIONS**

#### Filing Requirements

File Form SBW when a Sponsoring Bank ceases to engage in covered sales. Form SBW is to be filed with the appropriate federal banking agency by submitting Form SBW to the NASD's CRD.

#### Written Submissions:

- Each copy of this Form must be manually signed by the contact employee.
- Type all information.
- Use only the Form SBW or a reproduction of it.
- The mailing address for the Federal Banking Agencies for questions and correspondence regarding Form SB is:

Federal Deposit Insurance Corporation
Office of the Comptroller of the Currency, or
Board of Governors for the Federal Reserve System
c/o NASD Central Registration Depository
P.O. Box 9401
Gaithersburg, Maryland 20898-9401

#### **Electronic Submissions:**

Contact the NASD's CRD ((301) 590-6500) for information and software concerning electronic access to the CRD.

Each submission must be certified by Sponsoring Bank's contact employee.

#### **Definitions**

**Contact Employee** - The individual identified by the Sponsoring Bank on its Form SB who is authorized to receive all compliance information, communications, and mailings, and be responsible for disseminating it within the Sponsoring Bank.

Covered Sale - means a retail solicitation, recommendation, purchase, or sale of a covered product by a bank through its employees regardless of the means through which the solicitation, recommendation, purchase or sale occurs. The term shall not include a covered transaction involving a fiduciary account administered by a bank, a transaction involving a municipal security by a municipal securities dealer bank registered under section 15B of the Securities Exchange Act of 1934, 15 U.S.C. 78o-4, or a transaction by a bank of its own securities consistent with the conditions set forth in Securities Exchange Act Rule 3a4-1(a)(4), 17 CFR 240.3a4-1(a)(4).

Covered Transaction - has the same meaning as "security" as defined at section 3(a)(10) of the Securities Exchange Act, 15 U.S.C. 78c(a)(10). The term shall not include any product that is a deposit as defined in section 3(1) of the Federal Deposit Insurance Act, 12 U.S.C. 1813(1), or any "government security" as defined at section 3(a)(42) of the Securities Exchange Act of 1934, 15 U.S.C. 78c(a)(42).

Sponsoring Bank - means a bank that engages in or seeks to engage in "covered transactions."

of Sponsoring Bank:  a address:  Telephone No.:  g Bank ceased covered tra	ey or securities to any customer or broker-dealer? Yes N	No
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Telephone No.: (

)

inspection as required by law.

Name:

Date:

By: (Signature and Title)

Attachment Sheet for Form SBW		
Sponsoring Bank:		
CRD No.:	Date:	
,		

OMB No. xxxx-xxxx (OCC) Expires x/xx/xx xxxx-xxxxx (FDIC) Expires x/xx/xx xxxx-xxxx (FRS) Expires x/xx/xx Average hours per response: x.xx

## Form U-4B

## Uniform Application for Bank Securities Representative Registration or Transfer

Form U-4B Page 1 of ?

#### FORM U-4B

### UNIFORM APPLICATION FOR BANK SECURITIES REPRESENTATIVE REGISTRATION OR TRANSFER

Public reporting burden for this information collection is estimated to vary from X.X to X,XXX hours per response, with an average of XX.XX hours per response, including time to gather and maintain data in the required form and to review instructions and complete the information collection. Comments regarding this burden estimated or any other aspect of this information collection, including suggestions for reducing the burden, amy be sent to:

Secretary
Board of Governors of the Federal Reserve System
20th and C Streets, NW
Washington, DC 20551

and

Office of Management and Budget Paperwork Reduction Project (7100-0XXX) Washington, DC 20503.

#### **GENERAL INSTRUCTIONS**

The Form U-4B is the Uniform Application for Bank Securities Representatives Registration or Transfer. The Form is similar, but not identical to, the Form U-4 used to register representatives of broker-dealers, investment advisers or issuers of securities. The Form U-4B is to be used by employees of state and nationally chartered banks which are not required to register as broker/dealers under the Securities Exchange Act of 1934, but which have filed Form SB, Uniform Notice for Sponsoring Bank. These instructions apply to filing Form U-4B with the Federal Banking Agencies.

As noted below, the term "Federal Banking Agency", as used in the Form U-4B, means the Federal Deposit Insurance Corporation (FDIC), the Board of Governors of the Federal Reserve System (FRS) and the Office of the Comptroller of the Currency (OCC). In addition, the term "Sponsoring Bank" shall

mean those banks which have filed Form SB, Uniform Notice for Sponsoring Bank.

Where applicable, applicants must complete Items 1–22 and all fields requiring a response must be completed before the filing is accepted. Enter "none" or "N/A" (not applicable) where appropriate.

A full, complete Form U-4B is required when filing for the first time.

Use the Disclosure Reporting Pages (DRPs U-4B) to provide details to "Yes" answers to Item 22.

An applicant and the Sponsoring Bank are under a continuing obligation to update information required by Form U-4B as changes occur. Sponsoring Banks are not required to submit a complete Form U-4B when submitting amendments. Rather, the Sponsoring Bank should update only the appropriate sections of Form U-4B and file the applicable pages. Amendments are to be filed promptly and normally no more than 30 days after the occurrence of the event which triggers the requirement to file an amendment.

Filings and amendments must be signed and submitted by the Sponsoring Bank on behalf of the applicant. A paper copy with original manual signatures of the initial Form U-4B and of amendments to the Disclosure Reporting Pages (DRPs U-4B) must be retained by the filing Sponsoring Bank and must be made available for inspection upon regulatory request.

The Federal Banking Agencies mailing address for Filings and correspondence relating to filings is:

Federal Deposit Insurance Corporation,
Federal Reserve System, or
Office of the Comptroller of the Currency (as appropriate)
c/o NASD Central Registration Depository
P.O. Box 9401
Gaithersburg, Maryland 20898-9401

Form U-4B Page 2 of ?

#### **EXPLANATION OF TERMS**

The following terms are italicized throughout this form.

For purposes of filing this Form U-4B:

The term Federal Banking Agency means the Federal Deposit Insurance Corporation, the Board of Governors of the Federal Reserve System, or the Office of the Comptroller of the Currency, Department of the Treasury, as appropriate.

The term Bank Securities Representative means an employee of a state or nationally chartered bank who has, or will be, engaged in the retail solicitation, recommendation, purchase or sale of covered products as defined in the Federal Bank Agency regulations—12 CFR 342, 12 CFR 208, and 12 CFR 12.

The term Sponsoring Bank means a state or nationally chartered bank that engages in the retail solicitation, recommendation, purchase or sale of covered products without registering as a broker/dealer under the Securities and Exchange Act of 1934, and has filed a Form SB Uniform Notice for Sponsoring Bank with the appropriate Federal Banking Agency.

The term Jurisdiction means a state, the District of Columbia, the Commonwealth of Puerto Rico, or any subdivision or regulatory body thereof.

The term Self-Regulatory Organization ("SRO") means any national securities and commodities exchange, any national securities association (e.g., the NASD), or any registered clearing agency.

The term Control means the power to direct or cause the direction of the management or policies of a company, whether through ownership of securities, by contract, or otherwise. Any individual or firm that is a director, partner, or officer exercising executive responsibility (or having similar status or functions) or that directly or indirectly has the right to vote 25 percent or more of the voting securities or is entitled to 25 percent or more of the profits is presumed to control that company.

The term Appropriate Signatory means the individual designated by the Sponsoring Bank who is authorized to execute Form U-4B on its behalf. Such individual must meet the criteria, if any, for acting as the "appropriate signatory" as established by the Federal Banking Agency requiring this form to be filed.

The term Investment-Related pertains to securities, commodities, banking, insurance, or real estate (including, but not limited to, acting as or being associated with a broker-dealer, issuer, investment company, investment adviser, futures sponsor, bank or savings association).

For purposes of Item 22:

The term Charged means being accused of a crime in a formal complaint, information, or indictment (or equivalent formal charge).

The term **Involved** means doing an act or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act.

The term Foreign Financial Regulatory Authority includes a foreign securities authority; other governmental body or foreign equivalent of a *self-regulatory organization* empowered by a foreign government to administer or enforce its laws relating to the regulation of *investment-related* activities; or membership organization, a function of which is to regulate the participation of its members in *investment-related* activities listed above.

The term Order means a written directive issued pursuant to statutory authority and procedures, including orders of denial, suspension, or revocation; does not include special stipulations, undertakings or agreements relating to payments, limitations on activity or other restrictions unless they are included in an order.

For the purposes of Items 22.A and 22.B and the corresponding DRP (U-4B):

The term Felony, for jurisdictions that do not differentiate between a *felony* or *misdemeanor*, is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000. The term also includes a general court martial.

The term **Misdemeanor**, for jurisdictions that do not differentiate between a *felony* or *misdemeanor*, is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000. The term also includes a special court martial.

For the purposes of Item 22.E and the corresponding DRP (U-4B):

A Minor Rule Violation is a violation of a self-regulatory organization rule which has been designated as "minor" pursuant to a plan approved by the U.S. Securities and Exchange Commission. A rule violation may be designated as "minor" under a plan if the sanction imposed consists of a fine of \$2,500.00 or less, and if the sanctioned person does not contest the fine. Check with the appropriate self-regulatory organization to determine if a particular rule violation has been designated as "minor" for these purposes.

For the purposes of Item 22.G and the corresponding DRP (U-4B):

The term Investigation includes grand jury investigations, U.S. Securities and Exchange Commission investigations after the

Form U-4B Page 3 of ?

"Wells" notice has been given, formal investigations by SROs or actions or procedures designated as investigations by jurisdictions, but does not include subpoenas, preliminary or routine regulatory inquiries or requests for information, deficiency letters, "blue sheet" requests or other trading questionnaires, or examinations.

The term **Proceeding** includes a formal administrative or civil action initiated by a *Federal Banking Agency*, governmental agency, *self-regulatory organization* or *foreign financial regulatory authority*, a *felony* criminal indictment or information (or equivalent formal charge), or a *misdemeanor* criminal information (or equivalent formal charge), but does not include an arrest or similar charge effected in the absence of a formal criminal indictment or information (or equivalent formal charge). NOTE: *Investment-related* civil litigation, other than that specified above, is reportable under Item 22.H on Form U-4B. An *investigation* is reportable under Item 22.G on Form U-4B.

For the purposes of Item 22.H and the corresponding DRP (U-4B):

The term **Enjoined** includes being subject to a mandatory injunction, prohibitory injunction, preliminary injunction or a temporary restraining order.

For the purposes of Item 22.J and the corresponding DRP (U-4B):

The terms Resign or Resigned relate to separation from employment with any employer and are not restricted to investment-related employment. Include any termination in which the allegations are a proximate cause of the separation, even if the separation was initiated by you.

#### **SPECIFIC INSTRUCTIONS**

 Last Name. The applicant's last name will include punctuation(s) when and where appropriate. An entry is required for processing initial and amended Form U-4B filings.

First Name. Do not use nicknames, abbreviations, or modifications to the applicant's first name. An entry is required for processing initial and amended Form U-4B fillings.

Middle Name. If the applicant does not have a middle name specify "NONE". Do not leave this field blank. Do not include nicknames, abbreviations, or modifications to the applicant's middle name. This term is required for processing initial and amended Form U-4B filings.

2. Applicant's CRD #. The Applicant's CRD number is assigned to the applicant by the Central Registration Depository (CRD) system. If the applicant's CRD number is not known, leave this item blank. New applicants will receive a

unique CRD number that is permanently assigned and remains with the individual throughout his or her registration history, regardless of employment changes. It is not necessary to include leading zeros. An entry is not required for processing an initial Form U-4B filing but is required for amended U-4B filings.

Applicant's SS #. Enter the applicant's social security number. Completion of the applicant's SSN is voluntary. However, failure to complete the applicant's SSN may result in confusion regarding who the applicant is and may delay or prevent the processing of the Form U-4B. If the form is being filed on behalf of a foreigner who has not been issued a social security number, indicate "FOREIGNER" in this item. Entry is required in this field for processing of the initial and amended Form U-4B filings.

- 3. Sponsoring Bank CRD #. Sponsoring Banks are assigned a unique CRD number. This number is system generated and uniquely identifies the organization. An entry is required in this field for processing initial and amended Form U-4B filings.
- 4. Sponsoring Bank. This is the Sponsoring Bank's complete name as listed on Form SB. Do not abbreviate, shorten, or modify the name. An entry is required in this field for processing initial and amended Form U-4B filings.
- 5. Employment Date. The filing of the U-4B assumes that the individual is employed with your Sponsoring Bank; therefore, this item requires the month, day, and year of hire rather than the application for registration date. The format should be numeric (e.g., 01/01/1995 equals January 1, 1995). This is a required field for processing the initial Form U-4B filing.
- 6. CRD Branch #. Not applicable for Form U-4B filings.
- 7. Billing Code. The Billing Code is an alpha/numeric value consisting of up to eight characters. It is the responsibility of the Sponsoring Bank to establish and maintain its own set of unique billing codes. If your Sponsoring Bank doe not use CRD billing codes, leave this field blank. This is not a required field.
- 8. Office of Employment Address. Not applicable for Form U-4B filings.
- 9. **Dual Registration.** Check the appropriate "Yes" or "No" box regarding whether the applicant will maintain dual registration with another broker-dealer or another investment adviser that is not under common ownership or control with the Sponsoring Bank. If you choose "Yes", consult the rules and statutes of the appropriate Self Regulatory Organization(s) and jurisdiction(s) for prohibitions and liability provisions. Employment with other broker-dealers or investment advisers must be listed in the Employment and Personal History (Item 20.A) on Page 2 of the Form U-4B.
- 10. Affiliated Firms. Not applicable for Form U-4B filings.

Form U-4B Page 4 of ?

- 11. Federal Banking Agency. Check the appropriate Federal Banking Agency box(es) with which the applicant wishes to register. Applicable fees should be submitted with the filing unless the Federal Banking Agency maintains sufficient funds in its CRD account. If an examination is required for registration, the exam will be automatically scheduled and fee(s) charged appropriately. Registration applications will not be processed unless the Sponsoring Bank has filed Form SB or has an application pending.
- 12. Mark Registration Category(ies). Check all appropriate registration categories desired. If the applicant is not qualified for a category of registration requested, the appropriate examination(s) will be scheduled automatically, and the examination fee(s) deducted from the firm's CRD account.
- 13. Complete this section only if you are scheduling or rescheduling an exam or continuing education session. The purpose of this item is to schedule or reschedule examinations or Continuing Education sessions. Checking an exam box will not generate a registration request/approval but will schedule the appropriate examination even if the applicant has previously passed the examination. Check the S101 (Continuing Education session) box will request an unscheduled session even if the applicant has previously satisfied the Continuing Education requirement. An unscheduled session will not fulfill the applicant's Continuing Education requirement.

#### Signatory Area

Date. This date represents the date the form was signed by the appropriate signatory. The correct format for the date entry is "MM/DD/YYYY." This is required field for U-4B Page 1 amended fillings.

Signature of Appropriate Signatory. U-4B Page 1 need not be signed on initial or transfer filings. A signature is required when filing U-4B Page 1 as an amendment. If a U-4B Page 1 is being filed to schedule or reschedule an examination, complete Items 1, 2, 3, 4, and 13 only. (If any other items are completed, a signature is required.) NOTE: "Signature" includes a manual signature or an electronically transmitted equivalent.

Type or Print Name. The signatory's full legal name must be displayed under the signature. The name must be typed or printed as it appears in the signature form.

CRD Use Only. Do not mark inside this box. This area is used for administrative purposes only.

14. Sponsoring Bank CRD #. Sponsoring Banks are assigned a unique CRD number. This number is system generated and uniquely identifies the organization. An entry is required in this field for processing initial and amended Page 2 Form U-4B fillings.

Applicant's Social Security #. Enter the applicant's social security number. Completion of the applicant's SSN is voluntary. However, failure to complete the applicant's SSN may result in confusion regarding who the applicant is and may delay or prevent the processing of the Form U-4B. If the form is being filed on behalf of a foreigner who has not been issued a social security number, indicate "FOREIGNER" in this item. Entry is required in this field for processing of the initial and amended Page 2 Form U-4B filings.

Applicant's CRD #. The Applicant's CRD is assigned to the applicant by the CRD system. If the applicant's CRD number is not known, leave this item blank. New applicants will receive a unique CRD number that is permanently assigned and remains with the individual throughout his or her registration history. It is not necessary to include leading zeros. An entry is required in this field for U-4B Page 2 amended filings.

#### **Personal Data**

The name inserted must be the applicant's full legal name.

15. Last Name. The applicant's last name will include punctuation(s) when and where appropriate. An entry is required for processing initial and Page 2 Form U-4B amended filings.

First Name. Do not use nicknames, abbreviations, or modifications to the applicant's first name. An entry is required for processing initial and amended Page 2 Form U-4B filings.

Middle Name. If the applicant does not have a middle name specify "NONE". Do not leave this field blank. This item is required for processing initial and amended Form U-4B filings. Do not include nicknames, abbreviations, or modifications to the applicant's middle name.

- 16. Maiden/Other Name(s) Known By. This item is used to record names used, currently or in the past, by the applicant other than the legal name. The field should include other names (maiden, married, alias, or nickname) used by the applicant since adulthood. This is not a required field.
- 17. Date of Birth. The date format should be MM/DD/YYYY. An entry must be in this field to process the initial Form U-4B.

State/Country of Birth. This field is used to record the applicant's place of birth. This is a required field for initial Form U-4B fillings.

18. Sex. Indicate the appropriate box for gender. This is a required field for initial Form U-4B fillings.

Height. The applicant's height must be measured in feet (ft) and inches (in). This is a required field for initial Form U-4B filings.

Form U-4B Page 5 of ?

Weight. The applicant's weight must be measured in pounds (lbs). This is a required field for initial Form U-4B fillings.

Hair Color. This is a two character item. This item is required for processing of the initial Form U-4B.

Eye Color. This is a two character item. This item is required for processing of the initial Form U-4B.

#### 19. Residential History

Provide residential addresses for the past file years. The dates "From-To" must be such that there are no gaps greater than three months. Begin with your current residential address. Report changes as they occur. Do ot use Post Office boxes. Use attachment sheet if annitional space is needed.

From Month/Year. The month/year is MM/YYYY. This is a required field for each residence.

To Month/Year. The month/year is MM/YYYY. This is a required field for all residences except the current address.

Street. This item is used to capture the mailing description of the applicant's residence. P.O. Box addresses are not acceptable. Include street name, building #, unit #, apartment #, suite #, slip #, etc.

**City.** This item is used to capture the name of the city in which the applicant currently, or previously resided. This is a required field for all address history.

State/Country. This item identifies the state code where the applicant resides or resided in the past. Enter the two digit state abbreviation where the applicant resided for each address. If this is a foreign address indicate the country.

ZIP. Enter the applicant's residence nine digit ZIP Code or postal code if a foreign address.

#### 20.A. Employment and Personal History

Provide the applicant's employment and personal history for the past ten years. The dates "From-To" must be such that there are no gaps greater than three months. Exclude the firm(s) noted in Items 4 and 10. Include all firm(s) in Item 9. Entries must include the start and end dates, the full name of the company, city and state/country. Account for all time including full and part-time employments, self employment, military service, and homemaking. Also include statuses such as unemployment, full-time education, or travel that lasted for at least one month.

From Month/Year. The month/year format is MM/YYYY. This is a required field for each employment.

To Month/Year. The month/year format is MM/YYYY. This is a required field for all employments.

Name. Enter employment/personal history. Do not abbreviate, shorten, or modify the name. Ten years of employment history is required. Exclude the firms noted in Items 4 and 10 on Page 1 of Form U-4B. This is a required field for each employment and personal history.

**Investment-Related Business.** Indicate "Yes" or "No" as to whether employer is (was) an *investment-related* business, regardless of the position held by applicant.

City. This item is used to capture the name of the city in which the applicant was employed. This is a required field for all employment and personal history.

State/Country. This item identifies the state or country where the applicant was employed. Enter the two digit state abbreviation where the applicant was employed for each address. If this is a foreign address indicate the country.

**Position Held.** Provide the applicant's last title or position held with each employer. Provide both functional and administrative titles when possible (e.g., vice president and director).

20.B. Other Business. The "Yes" or "No" boxes refer to whether an applicant is currently engaged in any other business either as a proprietor, partner, officer, director, employee, trustee, agent, or otherwise. Exclude non-investment-related activity which is exclusively charitable, civic, religious or fraternal and is recognized as tax exempt. If "Yes", complete the Other Business Disclosure Reporting Page included in the Form U-4B.

#### Signatory Area

Date. This date represents the date the U-4B Page 2 was signed by the appropriate signatory. The correct format for the date entry is "MM/DD/YYYY". This is a required field for U-4B Page 2 amended filings.

Signature of Appropriate Signatory. Enter the applicant's signature. Signatures are required on Page 2 when the Form U-4B is an amended filing. U-4B Page 2 need not be signed for initial filings. NOTE: "Signature" includes a manual signature or an electronically transmitted equivalent.

Type or Print Name. The signatory's full legal name must be displayed under the signature. The name must be typed as it appears in signature form.

Form U-4B Page 6 of ?

**CRD Use Only.** Do not mark inside this box. This space is used for administrative purposes only.

21r Sponsoring Bank CRD #. Sponsoring Banks are assigned a unique CRD number. This number is system generated and uniquely identifies the organization. An entry is required in this field for processing amended Page 3 Form U-4B filings.

Applicant's Social Security #. Enter the applicant's social security number. Completion of the applicant's SSN is voluntary. However, failure to complete the applicant's SSN may result in confusion regarding who the applicant is and may delay or prevent the processing of the Form U-4B. If the form is being filed on behalf of a foreigner who has not been issued a social security number, indicate "FOREIGNER" in this item. Entry is required in this field for processing of initial and amended Page 3 Form U-4B filings.

Applicant's CRD #. The Applicant's CRD number is assigned to the applicant by the CRD system. If the applicant's CRD number is not known, leave this item blank. New applicants will receive a unique CRD number that is permanently assigned and remains with the individual throughout his or her registration history. It is not necessary to include leading zeros. An entry is not required for processing an initial Form U-4B filing but is required for amended U-4B Page 3 filings.

22. **Disclosure Information**. Check the appropriate "Yes" or "No" response for each question. Complete details explaining any "Yes" answers must be provided on the appropriate Disclosure Reporting Pages (DRPs).

#### 22.A.-M. Disclosure

#### **Criminal Disclosure**

22.A. - Felony Criminal Disclosure

22.B.-Misdemeanor Criminal Disclosure

#### **Regulatory Action Disclosure**

22.C.-Regulatory Action by SEC or CFTC

22.D.—Regulatory Action by Federal Banking Agency, other federal regulator, state regulatory, or foreign financial regulator

22.E.—Regulatory Action by SRO or commodities exchange

22.F. - Professional Suspension

22.G. - Formal Pending Action/Investigation

#### **Civil Judicial Actions**

22.H.-Civil/Judicial Actions

#### **Customer Complaints**

22.I. - Customer Complaints

#### **Terminations**

22.J. - Terminations for Cause

#### Financial Page 1

22.K.-Bankruptcy and SIPC

#### Financial Page 2

22.L. - Bonding Payouts or Revocations

22.M.—Unsatisfied Judgments and Liens

22.N. Disclosure Certification (Optional). The certification language contained in Item 22.N allows applicant to certify that all disclosable information on the individual's record has been previously reported on Form U-4B or Form U-5B DRPs. Certification should be used for full Form U-4B filings only, not amended filings. Applicants who have not been previously registered with the NASD, or who have not submitted DRPs for all disclosable information, may not take advantage of the certification option. Use of the certification is optional, and, if chosen, "Yes" answers to the appropriate questions in Items 22.A through M must be provided.

#### Signatory Area

"Signature" includes a manual signature or an electronically transmitted equivalent.

Date. This represents the date the form was signed by the appropriate signatory. The correct format for the date entry is "MM/DD/YYYY". Both the applicant and appropriate signatory must date this page only when it is being submitted as an amended filling.

Signature of Applicant. Page 3 need not be signed on initial or transfer filings. A signature is required when filing U-4B Page 3 as an amendment. Enter the applicant's full legal signature as it appears in typed or printed form.

Type or Print Name of Applicant. The applicant's full legal name must be displayed under the signature. The name must be typed or printed as it appears in signature form.

**Signature of** *Appropriate Signatory*. A signatory entry is not required for initial or transfer filings. This is a required field only when submitting as a U-4B Page 3 amendment.

Type or Print Name of Appropriate Signatory. The appropriate signatory's full legal name must be displayed under the signature. The name must be typed or printed as it appears in signature form.

Form U-4B Page 1 of 15

## Uniform Application for Bank Securities Representative Registration or Transfer (Form U-4B)

If amending, complete items 1,2,3,4 and items being amended.

1. Applicant's Name (la	st, first, middle (	specify if none), (Jr., Sr., etc.)	) 2.	Applicant's CRD No.	Applicant's SSN
3. Sponsoring Bank CRI	No.	4. Sponsoring Bank or Issue	er Name (Do not in	clude this employment unde	r Item 20.A, page 2.)
Employment Date (84	M/DD 00000	6. CRD Branch No.	7 Dillian Code (s		O Office of Fundament Addition
i. Employment Date (M	M/UU/YYYY)		7. Billing Code (d	ptional)	8. Office of Employment Addres
		Not Applicable			Not Applicable
. Dual Registration					
_	_	tions with firm(s) not under co	mmon ownership o	r control with the Sponsorir	ng Bank named in Item 4 above?
	_	tion with an investment advise ) in Item 20.A on page 2.	r <b>not under</b> commo	n ownership or control with	the Sponsoring Bank in item 4 above?
0. Affiliated Firms					
Not Applicable					
Federal Banking Age	ency.				
rootal balking Ag					
∐ occ	∐ FRS	FDIC			
2. Registration Catego	ry Requested		· · · · · · · · · · · · · · · · · · ·		
		es) being requested. Qualifying sitem and complete Item 13.	g examinations will	be automatically scheduled	if needed. If you are only scheduling or
	-	any and Variable Contracts Pro	•		•
□ 65-(5/)	ruli Registration/	General Securities Representa	tive		
3. Complete this item	only if you are s	cheduling or rescheduling an ex	xam or continuing	education session.	
☐ S6	☐ S7 [	S101			
<del>.</del>		. 4.40			
pplicant's SSN may res ovide will be for the us	ult in confusion e of the approp	regarding who the Applicant	is and may delay and for other State	. Providing the Applicant's or prevent processing of th and Federal agencies and S	SSN is voluntary. However, failure to provide is application for registration. The information of ROs. Maintenance of the information is authority
e <i>appropriate signatory</i> ing submitted as an am		Thave to be completed UNLES	াড this page is	CRD Use Only	
ate (MM/DD/YYYY)	Signature of a	ppropriate signatory			
	Print or type of	ame of appropriate signatory			
	31 17001				

## Uniform Application for Bank Securities Representative Registration or Transfer (Form U-4B) — continued

Form U-4B Page 2 of 15

f ame	nding pa	age 2,	complet	te Items 1	4, 15 and items	being amer	nded	d.							
14. Sp	onsoring B	ank CRD	nk CRD No. Applicant's SSN					Applicant's CRD No.							
ERSC	NAL DA	ΑТА													
5. Las	st Name (J	r., Sr., e	tc.)	First Name			Mid	idle Na	me (Speci	ify if nor	ne) 16.	Mai	den/Other Na	mes Known E	Ву
7. Da	te of Birth	(MM/DE	)/YYYY)	State/Count	ry of Birth	18. Sex	F	Height	(Ft.,ln.)	Weigh	nt	Ha	ir Color	Eye Co	ior
. Sta		current	address, g	ive all addres ditional space	ses for the past 5 yes is required.	ears. Report ch	ange	s only	when the	y occur.					
F fonth MM)	rom Year (YYYY)	Month (MM)	To Year (YYYY)		Street (Do	not use a P.O.	Box) City				State/ Country	ZIP Code			
		PRE	SENT												
															·····
F	such as u	nemploy nanges o	ed, full-tir	ne education	art-time employmen , or travel that laste se Attachment She Name	d for at least or	Inv	onth.) e is rec estme Related	quired. nt-		memaking	. Als	State/ Country	Positio	n Held
MM)	(YYYY)	(MM)	(YYYY)				Bu	usines					- Country		
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plicar vide secti	Please e. YES  Dicant's S  It's SSN n  Will be for ons 8, 9 and	SN is renay resurthe use	on investor  Quested to  It in confu  of the ap	o differentiate sion regarding propriate Fedal Deposit Institution	pusiness either as a activity which is exc please complete the e among applicants ag who the Applica eral banking agency surance Act (12 U.S.	PRIVACY A with the same of the	CT N nam delay State 9 and	officer civic, r corting NOTIC ne. Pro r or pr e and	Page of the Page o	fraterna his form Applica cessing	al and is re . ant's SSN of this app	is vo	zed as tax ex luntary. How on for registr	rever, failure ration. The in	formation y
ing su	bmitted as	s an ame	endment.	· · · · · · · · · · · · · · · · · · ·	be completed UNL	ESS this page i	s 	_ [	CRD Use	Only					
te (M	M/DD/YYY	(Y)	Signature	of appropria	te signatory										
			Print or t	ype name of	appropriate signator	γ									

## Uniform Application for Bank Securities Representative Registration or Transfer (Form U-4B)—continued

Form U-4B Page 3 of 15

If amending pages 3 and 4, complete Item 21 and items being amended.

21. Sponsoring Bank CRD No.	Applicant's SSN	Applicant's CRD No.

If the answer to any of the following questions is "YES" and you cannot utilize the certification in Item 22N below, Attach complete details of all events or proceedings on appropriate DRP(S).

22. REFER TO THE EXPLANATION OF TERMS SECTION OF FORM U-4B INSTRUCTIONS FOR EXPLANATIONS OF ITALICIZED TERMS.

Crimin	al D	isclosure		ı
Α.	(1)	Have you ever:	YES NO	
		(a) been convicted of or pled guilty or nolo contendere (no contest) in a domestic, foreign, or military court		ĺ
		to any felony?		1
		(b) been charged with any felony?		2
	(2)	Based upon activities that occurred while you exercised control over it, has an organization ever:		
		(a) been convicted of or pled guilty or nolo contendere (no contest) in a domestic or foreign court to any felony?		3
		(b) been charged with any felony?		4
В.	(1)	Have you ever:		
	•	(a) been convicted of or pled guilty or nolo contendere (no contest) in a domestic, foreign or military court		
		to a misdemeanor involving: investments or an investment-related business or any fraud, false statements		
		or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy		
		to commit any of these offenses?		5
		(b) been charged with a misdemeanor specified in 22.B.(1)(a)?		6
	121	Based upon activities that occurred while you exercised <i>control</i> over it, has an organization ever:		
	\	(a) been convicted of or pled guilty or nolo contendere (no contest) in a domestic or foreign court to a <i>misdemeanor</i>		
		specified in 22.B.(1)(a)?		7
		(b) been charged with a misdemeanor specified in 22.B.(1)(a)?		8
		(b) been charged with a misuemeanth specified in 22.5.(1)(a):		ľ
Pogula	*	Disciplinary Actions		
-	-	is the U.S. Securities and Exchange Commission or the Commodity Futures Trading Commission ever:		
C.		found you to have made a false statement or omission?		9
		) found you to have been involved in a violation of its regulations or statutes?		10
		found you to have been a cause of an investment-related business having its authorization to do business denied,		'
	(3)	suspended, revoked, or restricted?	T	11
	(4)	entered an order against you in connection with investment-related activity?		12
				13
_		imposed a civil money penalty on you or ordered you to cease and desist from any activity?		13
D.		is any Federal banking regulator or other Federal regulatory agency or any state regulatory agency or foreign		
		nancial regulatory authority ever:		14
		found you to have made a false statement or omission or been dishonest, unfair or unethical?		15
		) found you to have been involved in a violation of investment-related regulations(s) or statute(s)?		13
	(3)	found you to have been a cause of an investment-related business having its authorization to do business denied,		16
		suspended, revoked or restricted?		17
		entered an order against you in connection with investment-related activity?		۱''
	(5)	denied, suspended, or revoked your registration or license or otherwise, by order, prevented you from associating		10
_		with an investment-related business or restricted you activities?		18
E.		s any self-regulatory organization or commodities exchange ever:		
		found you to have made a false statement or omission?		19
	(2)	found you to have been involved in a violation of its rules (other than a violation designated as a "minor rule violation"		
		under a plan approved by the U.S. Securities and Exchange Commission)?		20
	(3)	found you to have been the cause of an investment-related business having its authorization to do business denied,		
		suspended, revoked or restricted?		21
	(4)	disciplined you by expelling or suspending you from membership, barring or suspending your association with its		
_		members, or restricting your activities?		22
		is your authorization to act as an attorney, accountant or federal contractor ever been revoked or suspended?		23
G.		ive you been notified, in writing, that you are now the subject of any:		
	(1)	regulatory complaint or proceeding that could result in a "yes" answer to any part of 22.C, D, or E? (If yes,		
		complete the Regulatory Action Disclosure Reporting Page.)		24
	(2)	investigation that could result in a "yes" answer to any part of 22.A, B, C, D or E? (If yes, complete the		25
		Investigation Disclosure Reporting Page.)		] 25

#### Uniform Application for Bank Securities Representative Registration or Transfer Form II-4R Page 4 of 15 (Form U-4B) - continued 22. Continued YES NO **Civil Judicial Actions** H. (1) Has any domestic or foreign court ever: (a) enjoined you in connection with any investment-related activity? ...... 26 (b) found that you were involved in a violation of any investment-related statute(s) or regulation(s) ...... 27 (c) dismissed, pursuant to a settlement agreement, an investment-related civil action brought against you by a state or foreign financial regulatory authority? ..... 28 (2) Are you named in any pending investment-related civil action that could result in a "yes" answer to any part of 22.H(1)? ...... 29 **Customer Complaints** Have you ever been the subject of an investment-related, consumer initiated complaint or proceeding that: 30 (1) alleged compensatory damages of \$10,000 or more, fraud, or wrongful taking of property? ..... (2) was settled or decided against you for \$5,000 or more, or found fraud or the wrongful taking of property? ..... 31 **Terminations** J. Have you ever voluntarily resigned, been discharged or permitted to resign after allegations were made that accused you of: (1) violating investment-related statutes, regulations, rules, or industry standards of conduct? ..... 32 (2) fraud or the wrongful taking of property? ...... 33 (3) failure to supervise in connection with investment-related statutes, regulations, rules or industry standards 34 **Financial** K. Within the past 10 years: (1) have you made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary 11 35 bankruptcy petition? (2) based upon events that occurred while you exercised control over it, has an organization made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition? ..... 36 (3) based upon events that occurred while you exercised control over it, has a broker or dealer been the subject of an involuntary bankruptcy petition, or had a trustee appointed, or had a direct payment procedure initiated 37 under the Securities Investor Protection Act? L. Has a bonding company ever denied, paid out on, or revoked a bond for you? ...... 38 M. Do you have any unsatisfied judgments or liens against you? ..... 39 DISCLOSURE CERTIFICATION (OPTIONAL) You may only certify to the accuracy and completeness of the disclosure information in your file if it has been fully provided in DRP format. If DRP(s) are not on file, do not answer these certification boxes. Provide full details of all matters on DRP(s). All appropriate questions in Item 22 must be answered, regardless of whether the certification is being utilized. Refer to the Form U-4B instructions for additional information on the utilization of the certification language. N. I have received a copy of my disclosure file taken from the CRD system, I acknowledge that all information contained therein is fully disclosed, accurate and in DRP format. I further certify the following: 40 (1) I have no new information to add to my disclosure file ..... (2) I have new information to add to my disclosure file which is reported on the appropriate DRP(s) ......... 41 (3) I have updated information, reported on the appropriate DRP(s), which was previously reported ...... 42 PRIVACY ACT NOTICE The Applicant's SSN is requested to differentiate among applicants with the same name. Providing the Applicant's SSN is voluntary. However, failure to provide the Applicant's SSN may result in confusion regarding who the Applicant is and may delay or prevent processing of this application for registration. The information you provide will be for the use of the appropriate Federal banking agency and for other State and Federal agencies and SROs. Maintenance of the information is authorized by sections 8, 9 and 31 of the Federal Deposit Insurance Act (12 U.S.C. 1818, 1819 and 1831). The applicant and appropriate signatory area DOES NOT have to be completed UNLESS CRD Use Only this page is being submitted as an amendment. Date (MM/DD/YYYY) Signature of applicant

Print or type name of applicant

Signature of appropriate signatory

Print or type name of appropriate signatory

Date (MM/DD/YYYY)

## Uniform Application for Bank Securities Representative Registration or Transfer (Form U-4B)—continued

Form U-4B Page 5 of 15

21. Sponsoring Bank CRD No.	Applicant's SSN	Applicant's CRD No.				

PRIVACY ACT NOTICE

The Applicant's SSN is requested to differentiate among applicants with the same name. Providing the Applicant's SSN is voluntary. However, failure to provide the Applicant's SSN may result in confusion regarding who the Applicant is and may delay or prevent processing of this application for registration. The information you provide will be for the use of the appropriate Federal banking agency and for other State and Federal agencies and SROs. Maintenance of the information is authorized by sections 8, 9 and 31 of the Federal Deposit Insurance Act (12 U.S.C. 1818, 1819 and 1831).

#### APPLICANT AFFIRMATION:

(All applicants must execute this page.)

- 1. I swear or affirm that I have read and understand the items and instructions on this form and that my answers (including attachments) are true and complete to the best of my knowledge. I understand that I am subject to administrative, civil and/or criminal penalties if I give false or misleading answers.
- 2. I apply for registration with the Federal Banking Agency indicated in Item 11.
- 3. I authorize all my employers and any other person to furnish to any Federal Banking Agency, jurisdiction, SRO, employer, prospective employer, or any agent acting on its behalf, any information they have, including my creditworthiness, character, ability, business activities, educational background, general reputation, history of my employment and, in the case of former employers, complete reasons for my termination. Moreover, I release each employer, former employer, and each other person from any and all liability, of whatever nature, by reason of furnishing any of the above information, including information reported on the Uniform Termination Notice for Bank Securities Representatives Registration (Form U-5B). I recognize that I may be the subject of any investigative consumer report and waive any requirement of notification with respect to any investigative consumer report ordered by any Federal Banking Agency, jurisdiction, SRO, employer or prospective employer of the nature and scope of the requested investigative consumer report.
- 4. I authorize the Federal Banking Agency to give any information on the Central Registration Depository to any employer or prospective employer, any federal, state or municipal agency, or any other SRO and I release the Federal Banking Agency and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information.
- 5. I authorize the Federal Banking Agency and any person acting on their behalf to give certain information on the Central Registration Depository concerning me to any person, including the general public. I specifically authorize the release of information regarding my name, CRD #, employment and personal history, and registration categories to any person. In addition, I specifically authorize the release of information regarding criminal and civil actions as well as consumer complaints (both resolved and unresolved), terminations and certain financial disclosure information to any person. I understand the Federal Banking Agency will not disclose social security numbers, residential information, date and location of birth, or gender, but will release all other information in the Central Registration Depository to any person. I release the Federal Banking Agency and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information to any person.
- 6. I understand and certify that the representations in this form apply to all employers with whom I seek registration as indicated in Item 4 of the form. I agree to update this form by causing an amendment to be filed within 30 days of the event occurring which causes any information to become incomplete, misleading or inaccurate. Further, I represent that, to the extent any information previously submitted is not amended, the information provided in this form is currently accurate and complete.
- 7. I authorize any employer or prospective employer to file on my behalf any information required in this form or any amendment thereto; I certify that I have reviewed and approved the information to be submitted to any Federal Banking Agency on this Form U-4B application; I agree that I will review and approve all disclosure information that will be filed on my behalf; I further agree to waive any objection to the admissibility of the filed records in any criminal, civil, or administrative proceeding.

Date (MM/DD/YYYY)	Signature of Applicant	-
	Print or type name of Applicant	

## Uniform Application for Bank Securities Representative Registration or Transfer (Form U-4B)—continued

Form U-4B Page 6 of 15

21. Sponsoring Bank CRD No.	Applicant's SSN	Applicant's CRD No.

PRIVACY ACT NOTICE

The Applicant's SSN is requested to differentiate among applicants with the same name. Providing the Applicant's SSN is voluntary. However, failure to provide the Applicant's SSN may result in confusion regarding who the Applicant is and may delay or prevent processing of this application for registration. The information you provide will be for the use of the appropriate Federal banking agency and for other State and Federal agencies and SROs. Maintenance of the information is authorized by sections 8, 9 and 31 of the Federal Deposit Insurance Act (12 U.S.C. 1818, 1819 and 1831).

#### THE SPONSORING BANK MUST COMPLETE THE FOLLOWING:

To the best of my knowledge and belief, the applicant is currently bonded where required, and, at the time of approval, will be familiar with the statutes, rules, regulations, policies and supervisory guidance, and by-laws of the appropriate Federal banking agency with which this application is being filed, and the rules governing bank securities representatives, and will be fully qualified for the position for which application is being made herein. I agree that I will not permit the applicant to act as a bank securities representative without first receiving the approval of the appropriate Federal banking agency.

This Sponsoring Bank has communicated with all of the applicant's previous employers for the past three years and has documentation on file with the names of the persons contacted and the date of contact. In addition, I have taken appropriate steps to verify the accuracy and completeness of the information contained in and with this application.

I have provided the applicant an opportunity to review the information contained herein and the applicant has approved this information and signed the Form U-4B.

The appropriate signatory area must be completed on all initial or amendment filings.							
Date (MANAGE SYNON)							
Date (MM/DD/YYYY)	Signature of appropriate signatory						
	Print or type name of appropriate signatory						

## Uniform Application for Bank Securities Representative Registration or Transfer (Form U-4B) — continued

Form U-4B Page 7 of 15

#### OTHER BUSINESS DISCLOSURE REPORTING PAGE

Thiş Oth	AL INSTRUCTIONS  er Business Disclosure Reporting Page (I ve responses to <i>Item 20.B</i> on Page 2 of		<i>OR</i> AMENDED res	ponse used to	o report details	s in support	t of			
20.B.	O.B. Are you currently engaged in any other business either as a proprietor, partner, officer, director, employee, trustee, agent, or otherwise? (Please exclude non investment-related activity which is exclusively charitable, civic, religious or fraternal and is recognized as tax exempt.)									
Please pi	rovide the following information relevant	to each other business disc	closed.							
Applicant	t's Name (last, first, middle (specify if none), (	(Jr., Sr., etc.))								
Applicant	r's CRD No.		Sponsoring Bank CRD No.							
1. Name	of Other Business			Investment-Rel	ated Business?					
2. Addre	ss of Other Business (Street, City, State/Coun	try, ZIP Code)				Yes	∐No			
3. Nature	of Other Business					<del></del>				
4. Your F	osition, Title or Relationship with Other Busin	ess	5. Start Date (MM/DD/)	YYY)	End Date (MM/	DD/YYYY)				
	Obligation to Other Business		1							
	ximate Number of Hours/Month:  describe your duties relating to other busines	<u> </u>	How many during secu	rities trading ho	urs/month?					
1. Name	of Other Business			Investment-Rel	ated Business?	Yes	□ No			
2. Addres	ss of Other Business (Street, City, State/Coun	try, ZIP Code)		- · ·						
3. Nature	of Other Business									
4. Your P	osition, Title or Relationship with Other Busing	ess	5. Start Date (MM/DD/Y	YYY)	End Date (MM/	DD/YYYY)				
6. Your C	Obligation to Other Business		<u> </u>							
	ximate Number of Hours/Month:		How many during secu	rities trading ho	urs/month?					
7. Briefly	describe your duties relating to other business	s								
				**************************************			19.			
Date (MM)	/DD/YYYY)	_ s	ignature of applicant							

									Form U-4B Page 8 of 15		
	RIMINAL DISCLOSURE REPORTED INSTRUCTIONS	EPORTING	PAG	E							
	nis Disclosure Reporting Page (DRP U- nms 22.A and 22.B on Page 3 of the F		ITIAL <i>OF</i>	R AMEI	NDED	response u	sed to	eport details	for affir	mative respor	nses to
	Check item(s) you are responding to the control of	oled guilty or no y felony? occurred while oled guilty or no y felony? oled guilty or no s or an investme ury, forgery, co- nisdemeanor sp occurred while oled guilty or no	you exe lo conte ent-relate unterfeit ecified ir you exe lo conte	ndere (no continued of the continued of	contes contes contes or an on, or a)? contes	er it, has ar t) in a dome t) in a dome y fraud, fals a conspirac er it, has ar	n organ estic or estic, fo se state cy to co	ization ever: foreign coul preign or mili ments or or ommit any o	t to any tary coun nissions, f these o	felony? rt to a misden wrongful taki ffenses?	<i>neanor</i> ng of
Ap pro	e the DRP to report all charges arising ultiple counts of the same charge arising parate cases arising out of the same e plicable court document (i.e., criminal ovided to the CRD if not previously su oplicant's Name (last, first, middle (specify	ing out of the savent, must be in complaint, informatted.	ame ever reported ormation	nt(s) should on separat	be re	eported on t s.	the sam	e DRP. Unre	lated cri	minal actions,	including
Ļ	anticontro CRD No.	Castal	I Carronian	N1-				C		V-	· · · · · · · · · · · · · · · · · · ·
Ľ	oplicant's CRD No.	Social	I Security	NO.				Sponsoring B	ank CKD	NO.	
	If charge(s) were brought against an o	organization ove	er which	<del>,</del>							
Or	ganization Name			Invest	_	Related Busine	ess? No	Your Position	, Title, or	Relatonship	
2.	Formal charge(s) were brought in:										
Co	ourt (Name of Federal Military, State or Fore	eign Court)	Location	of Court (Ci	ty or C	ounty and St	tate or C	ountry)	Docket/0	Case Number	
3.	Charge Detail Disclosure: (Continue o	n additional Cri	minal Dis	closure Re	portin	g Page U-4	B if mo	re than three	charges	arise out of t	he same event.)
Chg#	Formal Charge(s) Description	Charge Date (MM/DD/YYYY)	Number of Counts	Charge T (check one Misdemeanor	only)	Plea (Guilty, Not etc.)		Charge is C		Appeal Date (MM/DD/YYYY)	Product Type (if charge is investment-related)
1.								Pending On Appeal Pre-Trial Inter	Final		
2.	·							Pending On Appeal Pre-Trial Inter	Final		
3.							ļ	☐ Pending ☐ On Appeal ☐ Pre-Trial Inter	☐ Final vention		
	FINAL, ON APPEAL, OR PRE-TRIAL IN Disposition Detail Disclosure: (Continu										ETE ONLY ITEM
Chg#	Disposition Type: (Convicted, Acquitted, Dismissed, Pre-Trail Intervention, etc.)	Disposition Date (MM/DD/YYYY)	Disp Sen	osition Deta tence/Penalt f applicable)	il	Dura (if sentence, probator	tion suspensio	Start I	Date	Penalty/Fine Amount (if applicable)	DatePaid (MM/DD/YYYY)
1.						-					
2. 3.											
	Provide a brief summary of circumstar was subject of the charge(s) occurre									es when the o	conduct which

Signature of applicant

Date (MM/DD/YYYY)

## Uniform Application for Bank Securities Representative Registration or Transfer (Form U-4B)—continued

Form U-4B Page 9 of 15

REGULATORY REPORTING DISCLOSURE REPORTING PAGE										
GENERAL INSTRUCTIONS  This Disclosure Reporting Page (DRP U-4B) is an INITIAL OR AMENDED response used to report details for affirmative responses to										
Check   Item(s) you are responding to:   Check   Item(s) you to have made a false statement or omission?   Check   Item(s) you to have been involved in a violation of its regulations or statutes?   Check   Item(s) you to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked, or restricted?   Check   Item(s) you to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked, or restricted?   Check   Item(s) you to have penalty on you or ordered you to cease and desist from any activity?   Check   Item(s) you have made a false statement or omission or been dishonest, unfair or unchical?   Check   Item(s) you to have been involved in a violation of investment-related scivity?   Check   Item(s) you to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked or restricted?   Check   Item(s) you to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked or restricted you cartivities?   Check   Item(s) you to have been a cause of an investment-related activity?   Check   Item(s) you to have been a cause of an investment-related activity?   Check   Item(s) you to have been a cause of an investment-related activity?   Check   Item(s) you to have been involved in a violation of its rules (other than a violation designated as a "minor rule violation" under a plan approved by the U.S. Securities and Exchange Commission?   Check   Item(s) you to have been involved in a violation of its rules (other than a violation designated as a "minor rule violation" under a plan approved by the U.S. Securities and Exchange Commission?   Check   Item(s) you you have been involved in a violation of its rules (other than a violation designated as a "minor rule violation" u										
Applicant's Name (last, first, middle (spec		curity No.			١٤	Sponsoring Ba	nk CRD No	),		
Regulatory Action Initiated by (Name the commodities exchange, etc.)	e regulator, foreign financial	regulatory authority, S	SRO or		2. Reg	ulatory Action	Туре	3. Date Ini	tiated <u>(</u>	MM/DD/YYYY)
	oloying Firm when event	s occurred			6. Proc	luct Type(s)	L			
7. Describe the allegations related to this	regulatory action (Use re	verse side of this shee	t for addition	nal comment	s if neces	sary.)				
8. Is regulatory action currenity (check one Pending On Appeal	9. If on a Appeals, e	ppeal, regulatory actc.)	ction appea	led to (SEC	, SRO, U	.S. Court of	10. If on a	ppeal, date	filed (N	MW/DD/AAAA
IF FINAL OR ON APPEAL, COMPLETI		. FOR PENDING	ACTIONS	COMPLE	ETE ITE	M 19 ONLY				
11. How was the matter resolved? (Settled	d, Consent, etc.)	12. Resolution	Date (MM/I	DD/YYYY)	13. S	anctions (Susp	ended, Cens	sured, Barred	, Requali	ification, etc.)
14. If Suspended, Enjoined or Barred:										
		spension/Injunction r Duration		ension/Inju erations Prin		Bar capacity a	iffected (Ge	eneral Securi	ties Princ	cipal, Financial,
15. If requalification by exam/retraini	ng was a condition o	f the sanction:								
Is requalification/retraining time-related? Yes No	If yes, length of time g (If No, provide details in Ite	iven to requalify/ret	train:	Type of e	xam req	uired for requ	alification	Has cond		een satisfied? No
16. If disposition resulted in a fine, p	enalty, restitution, dis				tion: (Fi	ll in amount a		YYYY in a		
Penalty/Fine Date Paid \$	Restitution \$	Date Paid	Disgorger \$	nent	Date	e Paid	Other \$		Dat	te Paid
17. Were you required to pay any par Penalty/Fine Date Paid	rt of the monetary ite Restitution	ms disclosed in Date Paid	16: Ye Disgorger \$			s, fill in amou e Paid	Other	/DD/YYYY		ropriate box) te Paid
18. Was payment of all or any part of 19. Provide summary of details related of this sheet for additional communication.	of a monetary award, and to the action statu	penalty or fine w s and(or) disposit	/aived?	Yes			, provide d			n 19 below. verse side

Date (MM/DD/YYYY)

Signature of applicant

## Uniform Application for Bank Securities Representative Registration or Transfer (Form U-48)—continued

Form U-4B Page 10 of 15

CIVIL JUDICIAL ACTION DISCLOSURE REPORTING PAGE									
GENERAL INSTRUCTIONS	-								
This Disclosure Reporting Page (DRP U-4B) is an <i>Item 22.H</i> on Page 4 of the Form U-4B.	INITIAL OR AMENDI	ED response used to	report detai	ils for affirmat	ive respon	ses to			
Check item(s) you are responding to:  22.H.(1) Has any domestic or foreign court ever:  (a) enjoined you in connection with any investment-related activity?  (b) found that you were involved in a violation of any investment-related statute(s) or regulation(s)  (c) dismissed, pursuant to a settlement agreement, an investment-related civil action brought against you by a state or foreign financial regulatory authority?  (2) Are you named in any pending investment-related civil action that could result in a "yes" answer to any part of 22.H.(1)?									
One event may result in more than one affirmative answer within each of the above items. Use only one DRP to report details related to the same event. If an event gives rise to actions by more than one regulator, provide details to each action on a separate DRP.									
Applicant's Name (last, first, middle (specify if none), (	(Jr., Sr., etc.))		-						
Applicant's CRD No.	Social Security No.		Sponsoring	Bank CRD No.					
1. Court Action Initiated by (Name the regulator, foreign fin	nancial regulatory authority, SRO comm	nodities exchange, Agency	, Firm, Private P	laintiff, etc.)					
2. Relief Sought (Temporary Restraining Order, Mandatory In	junction, Preliminary Injunction, etc.)		[3	3. Filing Date of	Court Actio	n (MM/DD/YYYY)			
4. Product Type(s)			· · · · · · · · · · · · · · · · · · ·	\-		**			
5. Court formal action was brought in (Name of Federal, I	Military, State or Foreign Court)								
6. Location of Court (City or County and State or Country)			7	7. Docket/Case	Number				
8. Employing Firm when events occurred				-					
9. Describe the allegations related to this court action (	(Use reverse side of this sheet for addi	itional comments if necessa	ary.)						
10. Is action currently (check one) 11. Pending On Appeal Final	If pending, date notice was served (MM/DD/YYYY)	If on appeal, action ap of court)	pealed to (prov	vide name	13. If on ap (MM/DD	peal, date filed /YYYY)			
IF FINAL OR ON APPEAL, COMPLETE ALL ITEMS	S BELOW. FOR PENDING AC	TIONS, COMPLETE	ITEM 19 ON	ILY.		-			
14. How was the matter resolved? (Settled, Consent, Jud		Resolution Date (MM/D		. Sanctions (Sus	spended, Cens	ured, etc.)			
17. If Suspended, Enjoined or Barred:  Is suspension/injunction/bar of a Suspension/Injunction	on Bar Suspension/Injunction	Suspension/Injunction	on/Bar capacit	ty affected (Gene	eral Securities	Principal, Financial,			
fixed duration? Yes No Start Date (MM/DD/Y		& Operations Prinicpal,							
18. If requalification by exam is/was a condition  Is requalification time-related?  If yes, length of		wide . Type of evem	required for re	aqualification .	Hae conditio	n been satisfied?			
Yes No details in Item 21)		vide Type of exam	required for re	squamication	Yes	No			
19. If disposition resulted in a fine, penalty, resting					YYY in appr	opriate box) Date Paid			
Penalty/Fine Date Paid Restitution \$	Date Paid D	isgorgement	Date Paid	Other \$		Date Faiu			
20. Were you required to pay any part of the mo					D/YYYY in a	appropriate box)			
Penalty/Fine Date Paid Restitution \$	Date Paid Di	isgorgement [	Date Paid	Other \$		Date Paid			
21. Provide a brief summary of circumstances reside of this sheet for additional comments if		ion(s), disposition(s)	and/or findi	ng(s) disclose	d above. (I	Use reverse			
Date (MM/DD/YYYY)	Si	gnature of applicant	·		±***				

### Uniform Application for Bank Securities Representative Registration or Transfer

Form U-4B

(Form U-4B) - continue	ed	•					Page 11 of 1
CUSTOMER COMP	PLAINT DISCL	osur	E REPORTIN	NG PAG	E		
GENERAL INSTRUCTION					-		
This Disclosure Reporting Pa Item 22.I on Page 4 of the F	ige (DRP U-4B) is an	☐ INITI	AL <i>OR</i> AMEN	NDED respor	nse used to	report details for	affirmative responses to
Check item(s) you are a 22.1. Have you ever bee							t:
(2) was settled or	decided against you	for \$5,0	00 or more, or fa	ound fraud o	r the wrong	ful taking of prop	perty?
One event may result in moccomplaint. Use a separate D				ems; use onl	y one DRP t	o report aal the	details related to one customer
Applicant's Name (last, first, m	iddle (specify if none), (	Jr., Sr., et	tc.))				-
Applicant's CRD No.		Social So	ecurity No.			Sponsoring Bank	CRD No.
1. Customer Name(s)		1	-		-	2. Customer's St	ate(s) of Residence (2-Letter Abbreviation)
3. Employing Firm or Sponsorin	g Bank when events giv	ring rise to	the complaint occu	urred		4. Date complain	t was received (MM/DD/YYYY)
5. Allegation(s)				1	,		
6. Provide a brief summary of e	vents related to the alle	gation(s) i	including dates whe	n activities le	ading to the a	llegation(s) occurre	od
7. Product Type(s)			-		-	8. Alleged Compe	ensatory Damage Amount
9. Is complaint currently pendir	If No, how was co Arbitrated, Litigated,		esolved (No Action, W ration, etc.)	ithdrawn, Denie	ed, Settled,	If No Action, Den (MM/DD/YYYY)	ied, or Withdrawn, give date
IF STATUS IS SETTLED, AN						ER 11 AND 13; I	F LITIGATED, ANSWER 12 AND 1
Settlement Date (MM/DD/YYYY)	n your bondin, withou		ent Amount	- Hoparation		Your Contribution	1
11. If ARBITRATED or CFTC	REPARATION:					-	
Arbitration/Reparation Claim wa	s filed with (NASD, AAA	, NYSE, CB	OE, CFTC, etc.)			Date You Receive	ed Service (MM/DD/YYYY)
Case/Docket Number		Is Arbitra	ation/Reparation cur	rently pending	g? ☐Yes	□No	
If Status if FINAL:	-					·	
Disposition (Settled, Dismissed, A	ward, Withdrawn, etc.)		•			Date of Disposition	n (MM/DD/YYYY)
If disposition resulted in Award Amount	Settlement Amount	tion:	Reparation Amoun	nt	Your Contril	oution	Date Paid (MM/DD/YYYY)
12. If CIVIL LITIGATION:	\$		\$		\$		
Court that case was filed in (Na	me of Federal, State or Fore	eign Court)	Location of Court	(City or County	and State or Co	ountry)	Docket/Case Number
Is Civil Litigationcurrently pendi	ng? Yes		]No			Date You Receive	ad Service (MM/DD/YYYY)
If Status if FINAL:							
Disposition (Settled, Dismissed, Ju	dgment, Withdrawn, etc.)					Date of Disposition	n (MM/DD/YYYY)
If disposition resulted in Judgment Amount	Restitution Amount	tion:	Settlement Amour	nt	Your Contril	oution	Date Paid (MM/DD/YYYY)
Is action currently on appeal?				If on appeal,	date filed (MI	M/DD/YYYY)	-
13. Provide details as to any	other limits or condi	tions to	disposition. (Use	reverse side	of tis sheet	t for additional co	omments if necessary.)

Date (MM/DD/YYYY) Signature of applicant

# Uniform Application for Bank Securities Representative Registration or Transfer (Form U-4B)—continued

Form U-4B Page 12 of 15

INVESTIGATION DISCLOSURI	E REPORTING PA	GE					
GENERAL INSTRUCTIONS		-					
This, Disclosure Reporting Page (DRP U-4B) is tem 22.G on Page 3 of the Form U-4B.	s an INITIAL <i>OR</i> AI	MENDED response used	to report details for affirmative re	esponses to			
22. G. (2) Have you been notified, in writing, that you are now the subject of any investigation that could result in a "yes" answer to any part of 22.A, B, C, D or E?							
Complete this DRP only if you are answering f you have been notified that the <i>investigation</i>	"yes" to Item 22.G.(2). If on has been concluded with	you answered "yes" to hout formal action, con	Item 22.G.(1), complete the Reg	ulatory Action DRP. DRP to update.			
One event may result in more than one inves	stigation. If more than one	authority is investigatin	g you, use a separate DRP to pro-	vide details.			
Applicant's Name (last, first, middle (specify if nor	ne), (Jr., Sr., etc.))						
Applicant's CRD No.	Social Security No.	-	Sponsoring Bank CRD No.				
		-					
Notice received from (Name of Regulator, Agency, S	SRO, etc. initiating the investigation	n)	2. Notice date (MM/DD/YYYY)	~			
3. Describe briefly the nature of the investigation,	if known, or details of the res	olution (Use reverse side of th	is sheet for additional comments if necessary	r.)			
		•	14-				
. *							
		÷					
		-					
٠.							
		-					
		-					
4. Date Resolved (MM/DD/YYYY)				·			
		-					
		-					
Pate (MM/DD/YYYY)		Signature of applicant					

# Uniform Application for Bank Securities Representative Registration or Transfer (Form U-4B)—continued

Form U-4B Page 13 of 15

#### TERMINATION DISCLOSURE REPORTING PAGE

m 22.J on Page 4 of the Form	U-4B.					
heck item(s) you are respon  2. J. Have you ever voluntarii  (1) violating investment  (2) fraud or the wrongfu  (3) failure to supervise ii	y <i>resigned,</i> been dis <i>-related</i> statutes, reg Il taking of property	gulations, rules, or in ?	dustry standards of	conduct?		
e event may result in more thar e a separate DRP for each term	ination reported.		ems. Use only one D	RP to report details rela	ated to the same te	rmination
plicant's Name (last, first, middle (s	specify if none), (Jr., Si	r., etc.))				
plicant's CRD No.	Soci	al Security Ño.		Sponsoring Bank CR	D No.	
Firm Name				-		
Termination Type (Discharged, Permitt	ted to Resign, Voluntary, C	Other)		3. Termination date	(MM/DD/YYYY)	
Allegation Type (Excessive trading acti	ivity, misrepresentation, fa	ilure to supervise, etc.)		,		
Product Type(s)			-	tw.		

#### Form U-4B Uniform Application for Bank Securities Representative Registration or Transfer Page 14 of 15 (Form U-4B) - continued FINANCIAL DISCLOSURE REPORTING PAGE 1 **GENERAL INSTRUCTIONS** This Disclosure Reporting Page (DRP U-4B) is an INITIAL OR AMENDED response used to report details for affirmative responses to *Items 22.K.(1), 22.K.(2), and 22.K.(3)* on Page 4 of the Form U-4B. Check item(s) you are responding to: 22. K. Within the past 10 years: [1] (1) have you made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition? [Please fill out SECTION I below.) (Please fill out SECTION I below.) (2) based upon events that occurred while you exercised control over it, has an organization made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition? (Please fill out SECTION I below.) (3) based upon events that occurred while you exercised control over it, has a broker or dealer been the subject of an involuntary bankruptcy petition, or had a trustee appointed, or had a direct payment procedure initiated under the Securities Investor Protection Act? (Please fill out SECTION II below.) If events result in affirmative answers to both 22.K.(1) and 22.K.(2), details to each must be provided on separate DRPs. You must complete Section I and/or Section II as well as Item 18 to complete this DRP. Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.)) Applicant's CRD No. Social Security No. Sponsoring Bank CRD No. SECTION I If within the past 10 years you have made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition or; if within the past 10 years based on events that occurred while you exercised control over it, an organization made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition 1. Action Type (Compromise, Bankruptcy, Declaration, etc.) 2. Action Date (MM/DD/YYYY) If the financial action relates to an organization over which you exercise(d) control: 3. Organization Name 4. Investment-Related Business? 5. Your Position, Title, Relationship (if applicable) Yes □ No 6. Court (Name of Federal, State, or Foreign Court) 7. Location of Court (City or County and State or Country) 8. Docket/Case Number 9. Chapter Number (If Federal Bankruptcy Filing) 10. Is action currently pending? ☐Yes ☐ No 11. Disposition Type (Discharged, Released, Dismissed, etc.) 12. Disposition Date (MM/DD/YYYY) 13. Provide brief summary of events leading to action. If not dismissed or closed, explain (Use reverse side of this sheet for additional comments if necessary.) If within the past 10 years based upon events that occurred while you exercised control over it, a broker or dealer has been the subject of an involuntary bankruptcy petition, or had a trustee ppointed, or had a direct payment procedure initiated under the Securities Investor Protection Act: 1. Action Type (Compromise, Bankruptcy, Declaration, etc.) 2. Action Date (MM/DD/YYYY) 3. Organization Name 4. Your Position, Title, Relationship (if applicable) 5. Court (Name of Federal, State, or Foreign Court) 6. Location of Court (City or County and State or Country) 7. Docket/Case Number 8. Chapter Number (If Federal Bankruptcy Filing) 9. Is action currently pending? ☐ No ☐Yes 11. Disposition Date (MM/DD/YYYY) 10. Disposition Type (Discharged, Released, Dismissed, etc.) 12. Provide brief summary of events leading to action. If not dismissed or closed, explain (Use reverse side of this sheet for additional comments if necessary.) If a SIPA trustee was appointed, complete Items 13, 16, and 17. If a direct payment procedure was begun, complete Items 13, 14, and 15. 13. Currently Open? 14. The amount paid of agreed to be paid by you 15. Date Initiated or Filed (MM/DD/YYYY) ☐ Yes ☐ No 17. Trustee Appointment Date (MM/DD/YYYY) 16. Trustee Name

18. Please provide details as to any status disposition. Include details as to creditors, terms, conditions, amounts due and settlement schedule (if applicable). (Use reverse side of this sheet for additional comments if necessary.)

Date (MM/DD/YYYY) Signature of applicant

## Uniform Application for Bank Securities Representative Registration or Transfer (Form U-4B)—continued

Form U-4B Page 15 of 15

### (Form U-4B) - continued FINANCIAL DISCLOSURE REPORTING PAGE 2 **GENERAL INSTRUCTIONS** This Disclosure Reporting Page (DRP U-4B) is an INITIAL OR AMENDED response used to report details for affirmative responses to Items 22.L and 22.M on Page 4 of the Form U-4B. Check item(s) you are responding to: 22. L. Has a bonding company ever denied, paid out on, or revoked a bond for you? (Please fill out SECTION I below.) M. Do you have any unsatisfied judgments on liens against you? (Please fill out SECTION II below.) Ilf multiple, unrelated events result in the same affirmative answer, details must be provided on separate DRPs. Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.)) Applicant's CRD No. Social Security No. Sponsoring Bank CRD No. SECTION I If a bonding company ever denied, paid out on, or revoked a bond for you: 1. Firm Name (Policyholder) 2. Bonding Company Name 3. Disposition Type (Denied, Revoked, Payout) 4. Disposition Date (MM/DD/YYYY) 5. If disposition resulted in Payout: Payout Amount Date Paid (MM/DD/YYYY) 6. Summarize details of circumstances leading to the necessity of the bonding company action. If you have an unsatisfied judgment or lien: (Disclose details for only one judgment or lien per DRP.) When you satisfy or otherwise dispose of this judgment or lien, amend the Form U-4B Page 4 and this section to report the outcome. 1. Judgment/Lien Amount 2. Judgment or Lien Holder 3. Judgment/Lien Type (Tax, Civil, Default, Liquidated Damages, etc.) 4. Date Filed MM/DD/YYYY) 5. Is Judgment/Lien Ourstanding? If No, provide status date If No, how was matter resolved? (Released, Discharged, Removed, Satisfied) (MM/DD/YYYY) □No Yes 6. Court (Name of Federal, State or Foreign Court) 7. Location of Court (City or County and State or Country) 8. Docket/Case Number 9. Provide brief summary of events leading to the action and any payment schedule details including current status (if applicable) (Use reverse side of this sheet for

Date (MM/DD/YYYY)

Signature of applicant

OMB No. xxxx-xxxxx (OCC) Expires x/xx/xx xxxx-xxxx (FDIC) Expires x/xx/xx 7100-0281 (FRS) Expires x/xx/xx Average hours per response: x.xx

# Form U-5B

# Uniform Termination Notice for Bank Securities Representative Registration

Form U-5B Page 1 of ?

#### FORM U-5B

## UNIFORM TERMINATION NOTICE FOR BANK SECURITIES REPRESENTATIVE REGISTRATION

Public reporting burden for this information collection is estimated to vary from X.X to X,XXX hours per response, with an average of XX.XX hours per response, including time to gather and maintain data in the required form and to review instructions and complete the information collection. Comments regarding this burden estimated or any other aspect of this information collection, including suggestions for reducing the burden, amy be sent to:

Secretary
Board of Governors of the Federal Reserve System
20th and C Streets, NW
Washington, DC 20551

and '

Office of Management and Budget Paperwork Reduction Project (7100-0XXX) Washington, DC 20503.

#### **GENERAL INSTRUCTIONS**

The Form U-5B is the Uniform Termination Notice for Bank Securities Representative Registration. The form is similar, but not identical, to the Form U-5 used by broker-dealers, investment advisers, and issuers of securities to terminatre registration of an individual in the various self-regulatory organizations and jurisdictions. These instructions apply to filling Form U-5B with the Federal Banking Agencies.

Items 1-18 must be answered and all fields requiring a response must be completed before the filing is accepted. Enter "none" or "N/A" (not applicable) where appropriate.

Use the Disclosure Reporting Page(s) (DRPs U-5B) to provide details to "yes" answers to items 14-18. Although

documents are not required with the DRP (U-5B), you may wish to include them as the appropriate Federal banking agency may request them as part of the review process.

Former Bank Securities Representatives are under the continuing jurisdiction of the Federal banking regulators and mya hve to provide information about their activities while associated with the Sponsoring bank. Individuals are required to forward any residential address changes—item 8—for two years following termination or last Form U-5B filing.

Sponsoring Banks have a continuing obligation to amend and update items 14—18 until final disposition, reportable matters that occur and become known after initial submission of this form. A paper copy, with an original manual signature, of the Form U-5B and amendments to Disclosure Reporting Page (DRPs U-5B) may be required to be retained by the filing Sponsoring Bank and may be required to be made available for inspection upon regulatory request.

Amendments to items other than 5 and 14-18 are probilited.

To amend items 14-18, complete only items 1-4 and the item(s) being amended. If additional information relates to the amendment, submit the details on fully completed DRP(s) (U-5B).

The Federal banking agency's mailing address for questions and correspondence is:

Federal Deposit Insurance Corporation,
The Board of Governors of the Federal Reserve System,
and
Office of the Comptroller of the Currency
c/o NASD Central Registration Depository
P.O. Box 9401
Gaithersburg, Maryland 20898-9401

Form U-5B Page 2 of ?

#### **EXPLANATION OF TERMS**

The following terms are italicized throughout this form.

For purposes of filing this Form U-5B:

The term Federal Banking Agency means the Federal Deposit Insurance Corporation for state nonmember banks, the Board of Governors of the Federal Reserve System for state member banks, and the Office of the Comptroller of the Currency, Department of the Treasury for national banks.

The term Bank Securities Representative means an employee of a Sponsoring Bank who is, or was, engaged in the solicitation recommendation purchase or sale of certain securities to retail bank customers.

The term Sponsoring Bank means a state or nationally chartered bank which is using the bank exemption in the Securities Exchange Act of 1934, as amended, to solicit, recommend, purchase or sell certain securities through Bank Securities Representatives to retail bank customers.

The term Jurisdiction means a state, the District of Columbia, the Commonwealth of Puerto Rico, or any subdivision or regulatory body thereof.

The term Self-Regulatory Organization ("SRO") means any national securities and commodities exchange, any national securities association (e.g., the NASD), or any registered clearing agency.

The term Full Termination means the terminatin of registration with the appropriate Federal banking agency.

For purposes of item 9:

The term Misdemeanor, for jurisdictions that do not differentiate between a felony or misdemeanor, is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000. The term also includes a special court martial.

The term Investment-Related pertains to securities, commodities, banking, insurance, or real estate (including, but not limited to, acting as or being associated with a broker-dealer, investment comapny, investment banker, futures sponsor, bank, or savings association). Such term specifically includes actions taken by the Federal banking agencies pursuant to Sections 8 and 19 of the Federal Deposit Insurance Act. 12 U.S.C. § 1818 and 1829.

The term Appropriate Signatory means the individual designated by the Sponsoring bank who is authorized to execute Form U-5B on its behalf. Such individual must beem the criteria, if any, for acting as the "appropriate signatory" as established by the appropriate Federal banking agency.

For purposes of item 15 and the corresponding DRP (U-5B):

The term **Involved** means doing an act or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act.

The term **Disciplinary Action** includes a formal action such as a denial, revocation or suspension of a registration, or a censure, fine, cease and desist order, order of prohibition, temporary restraining order, injunction, bar or expulsion, but does not include a minor rule violation, deflicency letter, examination report, memorandum of understanding, letter of caution, admonishment, and similar informal resolutions or matters.

The term Foreign Financial Regulatory Authority includes a foreign securities authority; any other governmental body or foreign equivalent or a self-regulatory organization empowered by a foreign government to administer or enforce its laws relating to the regulation of investment or investment-related activities; or a membership organization a fanction of which is to regulate the participation of ites members in the activities listed above.

For purposes of item 12:

The term **Date Terminated** means the effective date of the termiantion of the registration or, in the case where registration has not yet been made effective, the date the withdrawal of the application for registration.

For purposes of item 14 and the corresponding DRP (U-5B):

The term **Charged** means being accused of a crime in a formal complaint, information, or indictment, (or equivalent formal charge).

The term Felony, for jurisdictions that do not differentiate between a felony or misdemeanor, is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000. The term also includes a general court martial.

A Minor Rule Violation is a violation of a self-regulatory organization rule which has been designated as "minor" pursuant to a plan approved by the U.S. Securities and Exchange Commission. A rule violation may be designated as "minor" under a plan if the sanction imposed consists of a fine of \$2,500.00 or less, and if the sanctioned person does not contest the fine. Check with the appropriate self-regulatory organization to determine if a particular rule violation has been designated as "minor" for these purposes.

For the purposes of Item 16 and the corresponding DRP (U-5B):

The term **Investigation** includes grand jury investigations, U.S. Securities and Exchange Commission investigations after the "Wells" notice has been given, formal investigations by SROs

Form U-5B Page 3 of ?

or actions or procedures designated as investigations by jurisdictions, but does not include subpoenas, preliminary or routine regulatory inquiries or requests for information, deficiency letters, "blue sheet" requests or other trading questionnaires, or examinations.

The term **Proceeding** includes a formal administrative or civil action initiated by a Federal Banking Agency, governmental agency, self-regulatory organization or foreign financial regulatory authority, a felony criminal indictment or information (or equivalent formal charge), or a misdemeanor criminal information (or equivalent formal charge), but does not include an arrest or similar charge effected in the absence of a formal criminal indictment or information (or equivalent formal charge).

#### **SPECIFIC INSTRUCTIONS**

1. Last Name. The applicant's last name will include punctuation(s) when and where appropriate. An entry is required for processing initial and amended Form U-5B filings.

First Name. Do not use nicknames, abbreviations, or modifications to the applicant's first name. An entry is required for processing initial and amended Form U-5B filings.

Middle Name. If the applicant does not have a middle name specify "NONE". Do not leave this field blank. Do not include nicknames, abbreviations, or modifications to the applicant's middle name. This term is required for processing initial and amended Form U-5B filings.

2. Applicant's CRD #. The Applicant's CRD number is assigned to the applicant by the Federal banking agencies through the Central Registration Depository (CRD) system. It is not necessary to include leading zeros.

Applicant's SS #. Enter the applicant's social security number. Completion of the applicant's SSN is voluntary. However, failure to complete the applicant's SSN may result in confusion regarding who the applicant is and may delay or prevent the processing of the Form U-5B.

- 3. Sponsoring Bank or Issuer Name. This is the Sponsoring Bank's complete name as listed on Form SB, or the issuer's complete name. Do not abbreviate, shorten, or modify the name. An entry is required in this field for processing the initial and amended Form U-5B fillings.
- 4. Sponsoring Bank CRD #. Sponsoring Banks are assigned a unique CRD number. An entry is required in this field for processing the initial and amended Form U-5B filings.
- 5. Office of Employment Address. Not applicable for Form U-5B filings.

- 6. CRD Branch #. Not applicable for Form U-5B filings.
- 7. Billing Code. The Billing Code is an alpha/numeric value consisting of up to eight characters. It is the responsibility of the Sponsoring Bank to establish and maintain its own set of unique billing codes. If your Sponsoring Bank doe not use CRD billing codes, leave this field blank. This is not a required field.
- 8. Street. This item is used to capture the physical location of the applicant's residence. Post office boxes are not acceptable. Include street name, building #, unit #, apartment #, suite #, slip #, etc. The applicant is required to update the information for two years after leaving the industry.

City. This item is used to capture the name of the city in which the applicant is currently residing. This is a required field for all address history.

State/Country. This item identifies the state code where the applicant resides or resided in the past. Enter the two digit state abbreviation for the street address provided above. If this is a foreign address indicate the country.

ZIP/Postal Code. Enter the applicant's residence nine digit ZIP Code or postal code if a foreign address.

- 9. Affiliated Firms. Not applicable for Form U-5B filings.
- 10. Full Termination. A "Yes" response will terminate the Bank Securities Representative's registration with the appropriate Federal banking agency.
- 11. Federal Banking Agency Termination. Check the appropriate Federal Banking agency box with which the individual is terminating registration categories.
- 12. Date Terminated. Enter the actual date the termination of registration is effective. The month, day and year are required.
- 13. Reason for Termination. Check the appropriate box. If "Permitted to Resign", "Discharged", or "Other" are checked, provide an explanation.
- 14.—18. Disclosure. Check the appropriate "Yes" or "No" response for each question. Refer to the Explanation of Terms at the front of these instructions. Complete details explaining any "Yes" answers must be provided on the appropriate Disclosure Reporting Pages (DRP U-5):
  - 14 Criminal Disclosure
  - 15 Regulatory Action Disclosure
  - 16 Investigation/Internal Review Disclosure
  - 17 Customer Complaint Disclosure
  - 18 Investigation/Internal Review Disclosure

Form U-5B Page 4 of ?

18. Internal Review. Generally, this item is used to report matters of a compliance nature, BUT NOT matters of a competitive nature. Responses should not include situations relating to disputes between the firm and the individual overownership or possession of information or records pertaining to business conducted by the individual.

If answered "Yes," the individual named in item 1 of this form is afforded the opportunity to respond by using Part II of the Investigation/Internal Review Disclosure Reporting Page (U-5B).

19. Disclosure Certification (Optional). This certification language contained in item 19 allows the firm to certify that all disclosable information on the individual's record has been previously reported on DRPs (U-4B) or DRPs (U-5B). Firms that have not filed DRPs (U-4B and DRPs (U-5B) for all disclosable information may not take advantage of the certification option. Use of the certification is optional, and, if chosen, "Yes" answers to the appropriate questions in Items 14—18 must be provided.

#### Signatory Area

"Signature" includes a manual signature or an electronically transmitted equivalent.

Date. This date represents the date the form was signed by the appropriate signatory. The correct format for the date entry is "MM/DD/YYYY."

**Signature of Appropriate Signatory.** A signatory entry is required for all filings. Enter the full signature as it appears in typed or printed form.

Type or Print Name of Appropriate Signatory. The appropriate signatory's full legal name must be displayed under the signature. The name must be typed or printed as it appears in the signature form.

Person to Contact for Further Information. Enter the name of the person to contact for additional information regarding the matters reported on this form. Include the telephone number for the person listed here.

Form U-5B Page 1 of 6

# Uniform Termination Notice for Bank Securities Representative Registration (Form U-5B)

Only Items 14-18 may be amended. To amend, complete only Items 1-4 and the item(s) being amended.

1. Applicant's Name (Last, First,	Middle (specify if none), (Jr., Sr., etc.))	2. Applicant's CRD No.	Applicant's SSN		
3. Sponsoring Bank			4. Sponsoring Bank CRD No.		
5. Office of Employment Not Applicable	6. CRD Branch # Not Applicable	7. Billing Code (optional)			
8. Current Residential Address (S	treet, City, State/Country, ZIP Code)				

#### NOTICE TO THE INDIVIDUAL WHO IS THE SUBJECT OF THIS FILING

As a former Bank Securities Representative of the Sponsoring Bank filing this Form U-5B, you are under the continuing jurisdiction of regulators and may have to provide information about your activities while associated with this Sponsoring Bank. Forward any residential address changes for two years following your termination date or last Form U-5B amendment to:

CRD Address Changes, 9513 Key West Avenue, Rockville, MD 20850-3389.

				<del></del>
9. Affiliated Firms				
Not Applicable				
10. Is this a FULL TERMINATION				
Yes No	-			
Federal Banking Agency Termination     A. Registratoin to be terminated with the formula of the second	bllowing:		N - 1-10	
□occ □fdic □frs				
12. Date Terminated (MM/DD/YYYY) (This date	represent the actual date that the t	termination of registration i	s effective.	
·				
13. Reason for Termination (Check one)				•
☐ Voluntary ☐ Deceased	Permitted to Resign	Discharged	Other	•
Provide an explanation:				
	· ·			

PRIVACY ACT NOTICE

The Applicant's SSN is requested to differentiate among applicants with the same name. Providing the Applicant's SSN is voluntary. However, failure to provide the Applicant's SSN may result in confusion regarding who the Applicant is and may delay or prevent processing of this application for registration. The information you provide will be for the use of the appropriate Federal banking agency and for other State and Federal agencies and SROs. Maintenance of the information is authorized by sections 8, 9 and 31 of the Federal Deposit Insurance Act (12 U.S.C. 1818, 1819 and 1831).

# Uniform Termination Notice for Bank Securities Representative Registration (Form U-5B) — continued

A copy of this form must be provided to the terminated individual.

Form U-5B Page 2 of 6

Applicant's Name (La	st, First, Middle)	Social Security No.	Applicant's CRD No.	Sponsoring Bank CRD No.
of all events or proceed	dings on appropriate DRP U-5(s).	14, 15, 16, 17 or 18 is "YES", and you ted on Form U-4B or Form u-5B, do no		in item 19 below, attach complete details
Refer to the explanatio	n of terms section of Form U-5B is	nstructions for explanations of italicized	terms.	
A. convicted or court to any     B. charged with C. convicted or court to a more or omissions commit any	by or associated with your specifier did the individual plead guest felony?	consoring bank, was the individual iilty or nolo contendere ("no contendere ("no contendere ("no contendere ("no contendere or an investment-related bus, bribery, perjury, forgery, counterd	st") in a domestic, or foreig st") in a domestic, foreign c iness or any fraud, false sta feiting, extortion, or a consp	or military atements piracy to 3
-	·	14.C?		4
Federal banking designated as a	by or associated with your spagency, domestic or foreign gaminor rule violation and under a	ponsoring bank, was the individual governmental body or self regulator plan approved by the U.S. Security susinesses?	ry organization (other than titles and Exchange Commiss	those sion)
agency, domest	at termination was, the individ ic or foreign governmental boo	lual the subject of an investigation dy or self-regulatory organization v	vith jurisdiction over investr	
consumer-initiate employed with y	by or associated with you speed complaint or proceeding (errour firm) that:	onsoring bank was the individual ti ven if such complaint was received 00 or more, fraud, or wrongful taki	d after the individual was no	o longer
18. Internal Review Currently is, or a	Disclosure at termination was, the individ	ual for \$5,000 or more, or found f lual under internal review for fraud ons, rules or industry standards or	or wrongful taking of prope	erty, or
-	FICATION (OPTIONAL)			
fully provided in DRF matters on DRP U-5i whether the certifica of the certification la This is to certify	P format. If DRP(s) are not on B(s). All appropriate questions ation is being utilized. Refer to anguage.  that details relating to the ab	eness of the disclosure information file, do not answer these certificate in Items 14, 15, 16, 17 or 18 and the Form U-5B instructions for additional content of the second content of the form U-5B instructions for additional content of the second content of the se	tion boxes. Provide full deta ove must be answered, rega ditional information on the 17 or 18 have been previou	iils of all ardless of utilization usly reported
if needed, as it b A. There is no a B. There is add	pecomes available to the firm. additional information to be re itional information to disclose	iled on behalf of this individual. Up This is to further certify the follow ported at this timethat is reported on the appropriate the appropriate DRP U-5B(s), relat	ving: DRP U-5B(s)	10
	, , , , , , , , , , , , , , , , , ,	, appropriate = a ca,.,,	д со аносновано ристиван	,
I verify the accuracy with this form.	and completeness of the info	rmation contained in and		
Date (MM/DD/YYYY)	Signature of appropriate signa	itory	•	
	Type or print name of appropri	iate signatory		
Person to contact for fu	rther information Tel	lephone No. of person to contact		

Date (MM/DD/YYYY)

Uniform Termination Notice for Bank Securities Representative Registration

Form U-5B

CRIMINAL DISCLOSURE REPORTING PAGE  GENERAL INSTRUCTIONS  This Disclource Reporting Page (DRP U-SB) is an   INITIAL OR   AMENDED response used to report details for affirmative responses to tetaths 14.4, 14.8, 14.6, and 14.0 on Page 2 of the Form U-SB.  Check   Intentio haing responded to:  16.   White employed by or esculated with your sponsoring bank, was the individual:  17.   A. convicted of or did the individual plead guilty or noto contendere ("no contest") in a domestic, or forsign, or military court to any febrory  18.   White employed by or esculated with your sponsoring bank, was the individual:  19.   A. convicted of or did the individual plead guilty or noto contendere ("no contest") in a domestic, or forsign, or military court to any febrory  19.   Charged with an individual plead guilty or noto contendere ("no contest") in a domestic, or forsign, or military court to a more property or development of the same of th	(Form U-5B) — continued	Dank Securitie	ss nel	presentat	ive r	iegistration	-		Page 3 of 6
This Disclosure Reporting Page (DRP U-SB) is an INITIAL OR AMENDED response used to report details for affirmative responses to tested 14.4, 14.8, 14.0 and 14.0 on Page 2 of the Form U-SB.    Check   Intent   Shafin responsed to	CRIMINAL DISCLOSURE R	EPORTING	PAG	E					
Check   Hemis) being responded to:	GENERAL INSTRUCTIONS								
14.   While employed by or associated with your sponsoring bank, was the individual plead guilty or noic contented or of dict the individual plead guilty or noic contented or of dict the individual plead guilty or noic contented or of dict the individual plead guilty or noic contented or of dicting or property. The property of the same vertices and the property of the statements or on insidence involving: investments or an investment-related business or any fraud, false statements or omissions, wrongful taking of property, bribary, peptry, forgery, counterfelling, extortion, or a conspiracy to commit any of these offenses?    Use the DRP to report all charges arising out of the same event. One event may result in more than one affirmative answer to the above items. Multiple counts of the same have grainsing out of the same event, should be reported on the same DRP. Unrelated criminal actions, including separate cases arising out of the same event, must be reported on separate DRPs.    Applicant's Name (last, first, middle (specify if none), Ur., Sr., etc.])				AMEN	IDED	response used to	report details for	affirmative respor	nses to
Multiple counts of the same charge arising out of the same event, must be reported on separate DRPs.  Applicant's Name (last, first, middle (specify if none), (Jr., Sr., etc.))  Applicant's CRD No. Social Security No. Sponsoring Bank CRD No.  2. Formal charge(s) were brought in:  Court (Wame of Federal Military, State or Foreign Court)  3. Charge Datail Disclosure: (Continue on additional Criminal Disclosure Reporting Page U-5B if more than three charges arise out of the same event.  Charge Data (MMOD/YYYY)  The Charge Data (MMOD/YYYY)  Appeal Date (MMOD/YYYY)  Appeal Date (MMOD/YYYY)  Appeal Date (MMOD/YYYY)  Section of Court (City or Country and State or Country)  Charge Is Currently (check one only) (Guilty, Nor Guilty, Nor G	14. While employed by or associat A. convicted of or did the ind any felony?  B. charged with any felony?  C. convicted of or did the ind misdemeanor involving: invalving of property, bribery.	ividual plead guil ividual plead guil vestments or an <i>i</i> , perjury, forgery,	ty or no ty or no investn , count	olo contend olo contend nent-related	lere (" lere (" l' busir	no contest") in a no contest") in a ness or any fraud,	domestic, foreign false statements	or military court or omissions, wro	to a ongful
Applicant's CRD No.  Sponsoring Bank CRD No.	Multiple counts of the same charge arisi	ng out of the san	ne evel	nt(s) should	be re	ported on the san			
2. Formal charge(s) were brought in:  Court (Name of Federal Military, State or Foreign Court)  3. Charge Datail Disclosure: (Continue on additional Criminal Disclosure Reporting Page U-5B if more than three charges arise out of the same event.  The pading of Formal Charge(s) Description  Charge Date (MM/DD/YYYY)  Counts (Mameanor)  Charge Date (MM/DD/YYYY)  Counts (Mameanor)  Charge Date (MM/DD/YYYY)  Counts (Mameanor)  Counts	Applicant's Name (last, first, middle (specify	if none), (Jr., Sr., e	tc.))						-
Court (Name of Federal Military, State or Foreign Court)  1. Charge Detail Disclosure: (Continue on additional Criminal Disclosure Reporting Page U-5B if more than three charges arise out of the same event.    Plea	Applicant's CRD No.	Social S	ecurity	No.		-	Sponsoring Bank C	CRD No.	
3. Charge Detail Disclosure: (Continue on additional Criminal Disclosure Reporting Page U-5B if more than three charges arise out of the same event.    Section   Charge Date (MM/DD/YYYY)   Counts   Charge Type (check one only)   Plea (Guilty, Not Guilty, Rot	Formal charge(s) were brought in:	<b>I</b>						· · · · · · · · · · · · · · · · · · ·	
Formal Charge(s) Description  Charge Date (MM/DD/YYYY)  Counts  Charge Type (check one only)  Charge is Currently (check one only)  Misdemeanor Felony  Pending   Final	Court (Name of Federal Military, State or Ford	eign Court) L	ocation.	of Court (Cit	ty or C	ounty and State or (	Country) Doc	ket/Case Number	
Formal Charge (s) Description  Charge Date (MM/DD/YYYY)  Counts  Check one only)  Counts  Check one only)  Counts  Charge is Currently (Check one only)  If charge is Currently (Check one only)  Charge is Currently (Check one only)  If charge is Currently (Check one only)  Charge is Currently (Check one only)  If check one only)  Misdemeanor Felony  Charge is Currently (Check one only)  If check one only)  Charge is Currently (Check one only)  If check one only)  Misdemeanor Felony  Charge is Currently (Check one only)  If check one only)  Misdemeanor Felony  Charge is Currently (Check one only)  If check one only)  Misdemeanor Felony  Charge is Currently (Check one only)  If check one only)  Misdemeanor Felony  Check one only  Check one only  Check one only  If charge is currently  Check one only  If check one only  If check one only  If check one only  Check one only  If check on only  If check one only  If check on only	3. Charge Detail Disclosure: (Continue o	n additional Crim	inal Dis	sclosure Re	portin	g Page U-5B if mo	ore than three cha	rges arise out of	the same event.)
1.	Formal Charge(s) Description	Charge Date	of	(check one	only)	(Guilty, Not Guilty,			
2. Pending   Final   On Appeal   Pre-Trial Intervention   3. Pending   Final   On Appeal   Pre-Trial Intervention      Pending   Final   On Appeal   Pre-Trial Intervention	1.	-				_	On Appeal		
3. Pending Final On Appeal Pre-Trial Intervention  IF FINAL, ON APPEAL, OR PRE-TRIAL INTERVENTION, COMPLETE ITEMS 3 AND 4. FOR EACH CHARGE THAT IS PENDING, COMPLETE ONLY ITEM 4.  Disposition Type: Octobroic (Convicted, Acquitted, Dismissed, Pre-Trail Intervention, etc.)  Disposition Date Sentence/Penalty (if applicable)  Disposition Detail Sentence, suspension, probaton, etc.)  Disposition Date (MM/DD/YYYY)  I. Convicted, Acquitted, Dismissed, (MM/DD/YYYY)  I. Convicted, Acquitted, Dismissed, (MM/DD/YYYY)  Penalty/Fine Amount (MM/DD/YYYY)  (if applicable)  DatePaid (MM/DD/YYYY)  Amount (if applicable)  DatePaid (MM/DD/YYYY)  Amount (MM/DD/YYYY)  Amount (MM/DD/YYYY)  Amount (MM/DD/YYYY)  DatePaid (MM/DD/YYYY)  Amount (MM/DD/YYYY)  DatePaid (MM/DD/YYYY)  Amount (MM/DD/YYYY)  Amount (MM/DD/YYYY)  DatePaid (MM/DD/YYYY)  Amount (MM/DD/YYYY)  DatePaid (MM/DD/YYYY)  Amount (MM/DD/YYYY)  DatePaid (MM/DD/YYYY)  Amount (MM/DD/YYYY)  DatePaid (MM/DD/YYYY)  Amount (MM/DD/YYYY)  Amount (MM/DD/YYYY)  DatePaid (MM/DD/YYYY)  DatePaid (MM/DD/YYYY)  DatePaid (MM/DD/YYYY)  Amount (MM/DD/YYYY)  DatePaid (MM/DD/YYYY)	2.						Pending Fin	al	
IF FINAL, ON APPEAL, OR PRE-TRIAL INTERVENTION, COMPLETE ITEMS 3 AND 4. FOR EACH CHARGE THAT IS PENDING, COMPLETE ONLY ITEM 4.  Disposition Type: Convicted, Acquitted, Dismissed, Pre-Trail Intervention, etc.)  Disposition Detail Sentence/Penalty (if applicable)  Convicted, Acquitted, Dismissed, Pre-Trail Intervention, etc.)  Disposition Detail Sentence, suspension, probaton, etc.)  DatePaid (MM/DD/YYYY)  (if applicable)  DatePaid (MM/DD/YYYY)  Amount (if applicable)  Penalty/Fine Amount (if applicable)  Amount (if applicable)  DatePaid  (MM/DD/YYYY)  A. Provide a brief summary of circumstances leading to the charge(s) as well as the disposition. Include the relevant dates when the conduct which	3.						Pending Fin	al	
(Convicted, Acquitted, Dismissed, Pre-Trail Intervention, etc.)  Date (MM/DD/YYYY)  (if applicable)  Sentence/Penalty (if sentence, suspension, probaton, etc.)  (if sentence, suspension, probaton, etc.)  (if applicable)  Start Date (MM/DD/YYYY)  (if applicable)  (if sentence, suspension, probaton, etc.)  4. Provide a brief summary of circumstances leading to the charge(s) as well as the disposition. Include the relevant dates when the conduct which		ITERVENTION, C	OMPLE	ETE ITEMS	3 ANI	) 4. FOR EACH C	<u> </u>	L	LETE ONLY ITEN
2. 3. 4. Provide a brief summary of circumstances leading to the charge(s) as well as the disposition. Include the relevant dates when the conduct which	(Convicted, Acquitted, Dismissed, Pre-Trail Intervention, etc.)	Date	Sen	tence/Penalty		(if sentence, suspensi		Amount	
4. Provide a brief summary of circumstances leading to the charge(s) as well as the disposition. Include the relevant dates when the conduct which		-							
								dates when the	conduct which

Signature of appropriate signatory

# Uniform Termination Notice for Bank Securities Representative Registration (Form U-5B)—continued

Date (MM/DD/YYYY)

Form U-5B Page 4 of 6

REGULATORY ACTION DISCL	OSURE REPORTING	G PAGE			-	
GENERAL INSTRUCTIONS				-		
This Disclosure Reporting Page (DRP U-5B) is <i>Item</i> 15 on Page 2 of the Form U-5B.	an INITIAL OR AME	NDED response use	ed to report details	for affirm	native respon	ses to
15. While employed by or associated with y agency, domestic or foreign government under a plan approved by the U.S. Secu	tal body or <i>self regulatory or</i>	<i>ganization</i> (other th	nan those designate	ed as a "/	minor rule vio	lation"
One event may result in more than one affirm gives rise to actions by more than one regulat				elated to	the same eve	nt. If an event
Applicant's Name (last, first, middle (specify if none	e), (Jr., Sr., etc.))					
Applicant's CRD No.	Social Security No.		Sponsoring Ba	ank CRD N	lo	
Regulatory Action Initiated by (Name the regulator, commodities exchange, etc.)	foreign financial regulatory authority,	SRO or	2. Regulatory Action	n Type	3. Date Initiat	ed (MM/DD/YYŶŶ)
4. Docket/Case Number 5. Employing Fire	m when events occurred		6. Product Type(s)		l	-
7. Describe the allegations related to this regulatory	action (Use reverse side of this she	eet for additional comment	ts if necessary.)		-	
8. Is regulatory action currenity (check one) Pending On Appeal Final	9. If on appeal, regulatory a	action appealed to (SEG	C, SRO, U.S. Court of	10. If on a	appeal, date file	ed (MM/DD/YYYY)
IF FINAL OR ON APPEAL, COMPLETE ALL ITE	MS BELOW. FOR PENDING	ACTIONS, COMPL	ETE ITEM 19 ONL	Υ.		-
11. How was the matter resolved? (Settled, Consent,	etc.) 12. Resolution	Date (MM/DD/YYYY)	13. Sanctions (Sus	pended, Cer	sured, Barred, Re	qualification, etc.)
14. If Suspended, Enjoined or Barred:  Is suspension/injunction/bar of a Suspension/Injunction/	etien Ber Sugnansion/Injunetie	s Suppossion/Ini	unation/Bar canacity	offooted (C	·	District State of
Is suspension/injunction/bar of a fixed duration? Yes No (If No, provide details in Item 19)		& Operations Prin	unction/Bar capacity a nicpal, etc.)	arrected (c	eneral Securities	Principal, Pinancial,
15. If requalification by exam/retraining was a	condition of the sanction:					
	ngth of time given to requalify/re vide details in Item 19)	etrain: Type of e	exam required for requ	ualification	Has conditio	n been satisfied?
16. If disposition resulted in a fine, penalty, re					D/YYYY in app	
Penalty/Fine Date Paid Restitution \$	on Date Paid	Disgorgement \$	Date Paid	Other \$		Date Paid
17. Were you required to pay any part of the			lo (if yes, fill in amo	_	M/DD/YYYY in	
Penalty/Fine Date Paid Restitution \$	Date Paid	Disgorgement \$	Date Paid	Other \$		Date Paid
18. Was payment of all or any part of a mone	tary award, penalty or fine v	vaived?	☐ No If yes, p	rovide deta	ails of Waiver in	n 19 below.
<ol> <li>Provide summary of details related to the of this sheet for additional comments if ne</li> </ol>		ition and include rel	evant terms, condi	itions and	I dates. (Use	reverse side
					-	

Signature of appropriate signatory

#### Uniform Termination Notice for Bank Securities Representative Registration (Form U-5B)—continued

Form U-5B Page 5 of 6

INVESTIGATION/INTER	NAL REVIEW DISCLOSURE	REPORTING PAGE	
GENERAL INSTRUCTIONS			
This Disclosure Reporting Page (DF Items 16 and 18 of the Form U-5B	P U-5B) is an INITIAL <i>OR</i> AMEN	DED response used to report details for affir	mative responses to
or foreign governmental b	ation was, the individual the subject of an ody or <i>self-regulatory organization</i> with	n <i>investigation</i> or <i>proceeding</i> by a Federal ba jurisdiction over i <i>nvestment-related</i> business one authority is investigating the individual	es?
provide details.  18. Currently is, or at termina	tion was, the individual under internal re	oview for fraud or wrongful taking of propert	y, or violating <i>investment-</i>
		been concluded without formal action, comp	olete Items 1, 2, 3, and 4
of this one to update.			
Applicant's Name (last, first, middle (sp	ecify if none), (Jr., Sr., etc.))		-
Applicant's CRD No.	Social Security No.	Sponsoring Bank CRD I	No.
PART I			41
1. Notice received from (Name of Regulato	or, Agency, SRO, etc. initiating the investigation)	2. Notice date (MM/DD/	YYYY)
3. Describe briefly the nature of the inv	estigation/internal review, if known, or details	of the resolution (Use reverse side of this sheet for addi	itional comments if necessary.)
		÷	
		•	
			-
4. Date Resolved (MM/DD/YYYY)	-	4	
(MM/DD/YYYY)	Signature of appropriate signa	Man.	
, www. DD/11111/	Signature of appropriate signa	itory	
PART II			
	space for details to affirmative answers	of Item 18 only.  of this event. The summary must fit within the spa-	an annied below
This summary may be sent to: Appropria Rockville, Maryland 20850-3389.	ite Federal Banking Agency, c/o Central Regist	of this event. The summary must fit within the spatration Depository, Membership Department, 9513	ce provided below. Key West Ave.,
		•	
	÷	•	_
Date (MM/DD/YYYY)	<del></del> .	Signature of Individual Subject	
,		organication of intervious outlieff	1

Signature of Individual Subject

# Uniform Termination Notice for Bank Securities Representative Registration (Form U-5B) — continued

Form U-5B Page 6 of 6

CUSTOMER COMP		.osui	RE REPORT	ING PAC	3E		
This Disclosure Reporting Pa	ige (DRP U-5B) is an	Пиі	FIAL <i>OR</i> AME	ENDED respo	onse used to	report details fo	r affirmative responses to
Check item(s) you are r 17.While employed by or a proceeding that: A. alleged compensat B. was settled or deci	ssociated with your	.000 or	more, fraud, or v	vronaful tak	ing of prope	rtv?	
One event may result in mor complaint. Use a separate D	e than one affirmati RP for each custome	ve answ er compl	er to the above it laint.	tems; use or	nly one DRP	to report aal the	details related to one customer
Applicant's Name (last, first, mi	iddle (specify if none),	(Jr., Sr.,	etc.))				
Applicant's CRD No.	-	Social S	Security No.			Sponsoring Bank	CRD No.
1. Customer Name(s)					-	2. Customer's St	tate(s) of Residence (2-Letter Abbreviation)
3. Employing Firm or Sponsoring	g Bank when events given	ving rise t	to the complaint occ	curred:		4. Date complain	t was received (MM/DD/YYYY)
5. Allegation(s)				<u></u>			
6. Provide a brief summary of e	vents related to the alle	egation(s)	including dates wh	en activities l	eading to the	allegation(s) occurre	ed
7. Product Type(s)	11, 11, 1				-	8. Alleged Compo	ensatory Damage Amount
					ied, or Withdrawn, give date		
IF STATUS IS SETTLED, ANS	SWER 10 AND 13; I	F ARBIT	RATED OR CFTC	REEPARAT	ION, ANSW	ER 11 AND 13; I	F LITIGATED, ANSWER 12 AND 1
Settlement Date (MM/DD/YYYY)	your benan, withou		ent Amount	л перагаціої		Your Contribution	1
11. If ARBITRATED or CFTC Arbitration/Reparation Claim was		******				12	
	s filed with (NASD, AAA)	, NYSE, CE	SOE, CFTC, etc.)			Date You Receive	ed Service (MM/DD/YYYY)
Case/Docket Number		Is Arbiti	ration/Reparation cu	rrently pendin	<sup>ng?</sup> ☐ Yes	□No	
If Status if FINAL: Disposition (Settled, Dismissed, Aw	ard Withdrawn etc.)					Date of Dispositio	D 484/DD00000
	4				-	Date of Dispositio	(I (MIM/DD/TTTT)
If disposition resulted in r Award Amount \$	nonetary compensa Award Amount \$	tion:	Settlement Amou	nt	Individual's	Contribution	Date Paid (MM/DD/YYYY)
12. If CIVIL LITIGATION:			T				
Court that case was filed in (Nam	e of Federal, State or Fore	ign Court)	Location of Court	(City or County	and State or Co	ountry)	Docket/Case Number
Is Civil Litigation currently pendir	ng? ☐ Yes		]No			Date the Individua	I Received Service (MM/DD/YYYY)
If Status if FINAL:						r	
Disposition (Settled, Dismissed, Jud			****			Date of Disposition	n (MM/DD/YYYY)
If disposition resulted in n Judgment Amount \$	nonetary compensat Judgment Amount \$	ion:	Restitution Amour	nt	Individual's	Contribution	Date Paid (MM/DD/YYYY)
Is action currently on appeal?	_YesNo		-	If on appeal,	, date filed (MN	M/DD/YYYY)	~
3. Provide details as to any o	other limits or condi	tions to	disposition. (Use	reverse side	of this shee	et for additional o	comments if necessary.)
Pate (MM/DD/YYYY)	-			Signature of	appropriate si	ignatory	