OMB Number 1557-0184

OMB Number 3064-0093 Approval expires March 31, 2025 Approval expires September 30, 2022 OMB Number 3235-0083 Approval expires September 30, 2022 Page 1 of 3

Board of Governors of the Federal Reserve System









Notice by Financial Institutions of Government Securities Broker or Government Securities Dealer Activities—Form G-FIN

This notice is required by law (15 U.S.C. § 780-5(a)(1)(B)).

This notice must be filed by all financial institutions that are government securities brokers or government securities dealers that are not exempt from the notice requirement under regulations of the Department of the Treasury. Generally, a financial institution will not be required to file as a government securities broker or dealer if its only government securities activities are to (1) Buy or sell government securities solely for investment for its own account; (2) Buy or sell government securities for fiduciary accounts; (3) Handle savings bond transactions; (4) Submit tenders for the account of customers for purchase on original issue of U.S. Treasury securities; (5) Enter into repurchase or reverse repurchase agreements; (6) Effect fewer than 500 government securities brokerage transactions per year; (7) Effect brokerage transactions only through another government securities broker or dealer on a fully disclosed basis; or (8) Effect brokerage transactions that do not involve active solicitations.

An agency may not conduct or sponsor, and an organization (or a person) is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

For further information on the requirements to file this notice, please refer to the instructions.

OFFICIAL USE	Form G-FIN Page 2 of 3
	1 age 2 01 0

Notice of Government Securities Broker or Government Securities Dealer Activities to be Filed by a Financial Institution under Section 15C(a)(1)(B) of the Securities Exchange Act of 1934

1.	Che	eck appropriate regulatory ag	ency (ARA):		2.	Conducts business as:				
	Α.	☐ Comptroller of the Currer	ncy			A. Government Securities Broker				
	B. Board of Governors of the Federal Reserve System			System		B. Government Securities Dealer				
	C. Federal Deposit Insurance Corporation					C. Government Securities Broker and Dealer				
	D.		Securities and Exchange Commission							
					3.	Filing status of notice:				
						A. L Notice				
						B. Amendment				
4.	Α.	Full name of the financial ins	titution							
	B.	Address of principal office of financial institution:								
		Address								
		City	State	Zip Co	de					
	C.	Address of principal office wl (if different from item (B)):	nere government se	curities b	roker or g	overnment securities dealer activities will be conducted				
		Address								
		City	State	Zip Cod	de					
	D.	Mailing address if different from (B) or (C):								
		Address								
		City	State	Zip Cod	de					
	E.	Name, title, and telephone number of contact person with respect to this notice:								
		Name		Title		Area Code / Phone Number				
	loca	es financial institution conduc ation other than given in Que: yes, provide addresses and d	stion 4 above?	governme A. 🗌 Y		ies broker or government securities dealer activities at any No				
•	Add	ress	City	State	Zip Code	Describe Activities				
	Add	ddress City		State	Zip Code	Describe Activities				
	Add	ress	City	State	Zip Code	Describe Activities				
	 Add	ress	City	State	Zip Code	Describe Activities				

6. Furnish the name and title of each person who is directly engaged in the management, direction, or supervision of any financial institution's government securities broker or government securities dealer activities:								
	Full Name							
	Last / First / Middle			Title				
	Last / First / Middle			Title				
	Last / First / Middle			Title				
	Last / First / Middle			Title				
	Last / First / Middle			Title				
	NOTE: Attach a separate Form G-FIN-4 (or, if prenamed in item 6.	eviously filed,	a copy of Form N	/ISD-4 or Form U-4) f	for each person			
7. Has any "associated person" (see definition in paragraph A.7. of the instructions) responded "yes" to any question in Item Form G-FIN-4, or "yes" to one or more questions in Items 20 through 25 of Form MSD-4 on Page 22 of Form U-4?								
	A. \square Yes B. \square No							
	NOTE: The financial institution and the person executing this form are responsible for making an inquiry of all other employers of any associated person during the immediately preceding three years for the purpose of verifying the accuracy of the information furnished on Form G-FIN-4. (See 17 C.F.R. § 400.4(c)). Similar requirements are applicable to Form MSD-4 and Form U-4.							
8. The financial institution submitting this notice and the person executing it represent that all of the information herein is true, current, and complete.								
Please print name and title of person executing this notice:								
	Name (First, Middle, Last)							
	Title							
	Signature	Date						