**FDIC Large-Bank Deposit Insurance Determination Modernization (12 CFR § 360.9)**

**Annual Questionnaire: For Test Year – 2015 (1/1/2015 – 12/31/2015)**

**Due date: March 31, 2016**

|  |  |
| --- | --- |
| Covered Institution (CI) Name, FDIC Certificate #, City, State |  |
| Primary Contact (Name, Title, Phone, e-mail). Fill out additional contact information on page 2. |  |
|  [Yes/No] Explanation for “Yes” answers |
| 1. Does the CI operate in-house deposit systems maintained by bank staff? If “Yes,” name system, application name, and version. |  |  |
| 2. Does the CI use a Technology Service Provider (TSP) system/application for deposit processing? If “Yes,” name the TSP, system, application name, and version. |  |  |
| 3. Did the CI have major changes on deposit systems during the year? |  |  |
| 4. Did the CI acquire/merge with another financial institution during the year? If “Yes,” did the CI convert all accounts onto existing deposit systems? |  |  |
| 5. Did the CI introduce new deposit or sweep investment products that have not been tested for compliance with the Rule? |  |  |
| 6. Did the CI have brokered deposits? If “Yes,” name the system and number of brokers. |  |  |

**Covered Institution Officer Name & Title**

**Signature:** **Date:**

**Institution contacts***. The final rule requires a Covered Institution to notify the FDIC of the person(s) responsible for producing the standard deposit data download and administering provisional holds, both while this functionality is being constructed and on an on-going basis. The Covered Institution is responsible for ensuring such contact information is current.*

| Point of Contact(s) | Name, Title, Phone, e-mail |
| --- | --- |
| Compliance |  |
| Information Technology |  |
| Deposit Operations |  |
| Technology Service Provider |  |
| Financial Reporting |  |