



Printed Name of Officer

Signature of Officer

BHC RSSD ID BANK RSSD ID

For Federal Reserve Bank Use Only

Title

# The Bank Holding Company Report of Insured Depository Institutions' Section 23A Transactions with Affiliates—FR Y-8

#### Report at the close of business as of the last calendar day of the quarter

This Report is required by law: Section 5(c) of the Bank Holding Company Act (12 U.S.C. § 1844(c)) and Section 225.5(b) of Regulation Y (12 C.F.R. § 225.5(b)). The Federal Reserve System regards the individual bank information provided by each respondent as confidential. If it should be determined subsequently that any information collected on this form must be released, respondents will be notified.

NOTE: The Bank Holding Company Report of Insured Depository Institutions' Section 23A Transactions with Affiliates must be signed by an authorized officer of the bank holding company.

I, the undersigned officer of the bank holding company, attest that the Bank Holding Company Report of Insured Depository Institutions' Section 23A Transactions with Affiliates for this report date have been prepared in conformance with the instructions issued by the Federal Reserve System and are true and correct to the best of my knowledge and belief. The Federal Reserve 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.

The Bank Holding Company Report of Insured Depository Institutions' Section 23A Transactions with Affiliates should be prepared in accordance with the instructions provided by the Federal Reserve System.

iates must be company.	Date of Report:	Month / Day / Yea	ar (BIDI 9999)	
ompany, attest red Depository s for this report he instructions ue and correct				
	Legal Title of the To	p-Tier Bank Holdin	g Company (TEXT 90	010)
	(Mailing Address of	the Bank Holding (	Company) Street / PO	Box (TEXT 9110)
Date of Signature	City (TEXT 9130)		State (TEXT 9200)	Zip Code (TEXT 9220)

Person to whom questions about this report should be directed:

Name / Title (TEXT 8901)

Area Code / Phone Number (TEXT 8902)

Area Code / FAX Number (TEXT 9116)

E-mail Address of Contact (TEXT 4086)

Public reporting burden for this information collection is estimated at an average of 7.8 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 estimate or any other aspect of this information collection, including suggestions for reducing the burden, may be sent to Secretary, Board of Governors of the Federal Reserve System, 20th and C Streets, NW, Washington, DC 20551, and to the Office of Management and Budget, Paperwork Reduction Project (7100-0126), Washington, DC 20503.

Legal Name of Insured Depository Institution (TEXT 9012)

(Mailing Address of Insured Depository Institution) Street / PO Box (TEXT 9013)

City (TEXT 9024)

State (TEXT 9026) Zip Code (TEXT 9027)

# DECLARATION

# The insured depository institution *does not* have to complete Page 3 or Page 4 of this report *if* the insured depository institution meets *all* of the criteria in Part A or B below.

### Part A

- 1. The insured depository institution did not make a loan or other extension of credit to any affiliate during the quarter, and does not have outstanding a loan or other extension of credit to any affiliate as of the end of the quarter.
- 2. The insured depository institution did not purchase any asset from any affiliate during the quarter, and does not own or control any asset that was purchased from an affiliate as of the end of the quarter.
- 3. The insured depository institution did not make a loan or other extension of credit to any nonaffiliate during the quarter that was secured by securities issued by any affiliate, and does not have any outstanding loan or extension of credit to any nonaffiliate that is secured by securities issued by any affiliate as of the end of the quarter.
- 4. The insured depository institution did not purchase or invest in securities issued by an affiliate during the quarter, and does not own or control any securities issued by an affiliate as of the end of the quarter.
- 5. The insured depository institution did not issue a guarantee, acceptance, or letter of credit on behalf of an affiliate during the quarter, and does not have any outstanding guarantees, acceptances, or letters of credit that were issued on behalf of an affiliate as of the end of the quarter.
- 6. The insured depository institution did not engage in any of the above transactions with a nonaffiliate where the proceeds of those transactions were transferred to, or used for the benefit of, an affiliate.
- 7. The insured depository institution does not control any financial subsidiaries as of the end of the quarter (as defined in the glossary of this report).
- 8. The insured depository institution does not have any outstanding derivative transactions with affiliates as of the end of the quarter.

### Part B

- 1. The insured depository institution did engage in the transactions described in Part A above, but those transactions are exempt pursuant to sections 223.41 and 223.42 of Regulation W.
- 2. The insured depository institution does not control any financial subsidiaries as of the end of the quarter (as defined in the glossary of this report).
- 3. The insured depository institution does not have any outstanding derivative transactions with affiliates as of the end of the quarter.

If the insured depository institution meets all of the criteria in Part A or B above, the appropriate officer must sign in the space below and return page 1 of the report and the declaration page to the appropriate Federal Reserve Bank each quarter.

Name of Officer of the Insured Depository Institution Ti

Title

Signature of Officer of the Insured Depository Institution

Legal Name of Insured Depository Institution (TEXT 9012)

(Mailing Address of Insured Depository Institution) Street / PO Box (TEXT 9013)

City (TEXT 9024)

State (TEXT 9026) Zip Code (TEXT 9027)

#### Report at the close of business

Month / Day / Year

This report is to be completed by the bank holding company for each insured depository institution.

## Part I

#### Please check this box if the insured depository institution has covered transactions with financial subsidiaries only. Do not complete items 1 and 2.

All bank holding companies (including financial holding companies) with insured depository institutions that have covered transactions with affiliates other than financial subsidiaries must report items 1 and 2 and Memorandum item 1.

	(Column A) Aggregate Amount at the End of the Calendar Quarter				(Column B) Maximum Aggregate Amount during the Calendar Quarter				
Dollar Amounts in Thousands	BIDI	Bil	Mil	Thou	BIDI	Bil	Mil	Thou	
1. Covered transactions subject to section 23A collateral requirements (Exclude transactions between the insured depository institution and									
financial subsidiaries)	B968				B969				1.
2. Covered transactions <i>not</i> subject to section 23A collateral requirements (Exclude transactions between the insured depository institution and									
financial subsidiaries)	B970				B971				2.

#### Please check this box if the insured depository institution does not control a financial subsidiary. Do not complete items 3 through 7.

All bank holding companies (including financial holding companies) with insured depository institutions that control a financial subsidiary must report items 3 through 7 and Memorandum item 1.

Dollar Amounts in Thousands	BIDI	Bil	Mil	Thou	BIDI	Bil	Mil	Thou	
3. Covered transactions subject to section 23A collateral requirements									
between the insured depository institution and financial subsidiaries									
(Exclude transactions reported in items 5 and 6)	B972				B973				3.
4. Covered transactions not subject to section 23A collateral requirements									
between the insured depository institution and financial subsidiaries				,					
(Exclude transactions reported in items 5 and 6)	B974				B975				4.
5. Purchase of, or investment in, securities issued by financial subsidiaries of									
insured depository institutions by the insured depository institution:									
a. Equity securities (Exclude retained earnings)	B976								5.a
b. Debt securities	B977								5.b
6. Purchase of, or investment in, securities issued by financial subsidiaries of									
insured depository institutions by affiliates of the insured depository									
institution:									
a. Equity securities (Exclude retained earnings)	B978								6.a
b. Debt securities	B979								6.b
7. Loans or other extensions of credit by affiliates of the insured depository									
institution to the financial subsidiaries of the insured depository institution		_		_					
(not subject to section 23A)	B980				B981				7.

#### Memorandum

Dollar Amounts in Thousands	BIDI	Bil	Mil	Thou	
1. Maximum aggregate amount for all covered transactions included in items 1 through 6 for any single					
day during the calendar quarter	C450				M.1.

## Part II

All bank holding companies (including financial holding companies) with insured depository institutions that engage in derivative transactions with affiliates must report items 1 through 3. (Exclude credit derivatives that are included in Part I.)

	Aggregate Amount at the End of the Calendar Quarter				
Dollar Amounts in Thousands	BIDI	Bil	Mil	Thou	
1. Positive fair value of derivative contracts between the insured depository institution and its affiliates	C451				1.
2. Amount of collateral pledged to the insured depository institution to secure derivative contracts					
between the insured depository institution and its affiliates	C452				2.
3. Notional amount of derivative contracts between the insured depository institution and its affiliates	C453				3.