Board of Governors of the Federal Reserve System



Annual Report of Foreign Banking Organizations—FR Y-7

Report at the close of business as of the end of fiscal year

This report form is authorized by law: Section 5(c)(1) of the Bank Holding Company Act (12 U.S.C. § 1844(c)(1)) and sections 8(a) and 13(a) of the International Banking Act (12 U.S.C. §§ 3106(a) Return to the appropriate Federal Reserve Bank the original and number of copies of the completed report required by the Federal Reserve Bank. The Federal Reserve may not conduct or

and 3108(a)).	sponsor, and an organization (or a person) is not required to respond to, an information collection unless it displays a currently valid OMB control number.		
NOTE: The Annual Report of Foreign Banking Organizations must be signed by an authorized official of the foreign banking	Date of Report (foreign banking organization's fiscal year-end):		
organization.	Month / Day / Year		
I, Name of Foreign Banking Organization Authorized Official	Reporter's Name, Street, a	and Mailing Address	;
Name of Foreign Banking Organization Authorized Official	Legal Name of Foreign Banking Org	anization (Top-tier if filing	as a tiered organization)
Title of Foreign Banking Organization Authorized Official			
attest that the Annual Report of Foreign Banking Organizations	Street Address of the Foreign Ban	king Organization	
(including the supporting attachments) 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	City	Country	
my knowledge and belief.	Mailing Address of the Principal Office (If different from street address)		
With respect to information regarding individuals contained in this	City	Country	
report, the Reporter certifies that it has the authority to provide this information to the Federal Reserve. The Reporter also certifies that it has the authority, on behalf of each individual, to consent or object to public release of information regarding that individual.	Person in the United States to whom questions about this report should be directed:		
The Federal Reserve may assume, in the absence of a request for confidential treatment submitted in accordance with the Board's	Name	Title	
"Rules Regarding Availability of Information," 12 C.F.R. Part 261, that the Reporter <u>and</u> individual consent to public release of all details in the report concerning that individual.	Street		
·	City	State	Zip Code
	Area Code / Phone Number	Area Code / FAX	X Number
Signature of Foreign Banking Organization Authorized Official	E-mail Address		
Date of Signature	Address (URL) for the Foreign Banking Organization's web page		
Indicate status of Annual Report to Shareholders:	Is confidential treatment requesting this report submission?		
is included with the FR Y-7 report will be sent under separate cover	In accordance with the General Instructions for this report (check only one), 1. a letter justifying this request is being provided along with the report.		
☐ is not prepared			
For Federal Reserve Bank Use Only	2. a letter justifying this request has been provided separately		
RSSD ID	NOTE: Information for which confidential treatment is being requested must be provided separately and labeled		

Public reporting burden for the information collection in the FR Y-7 is estimated to average 6 hours per response, including time to gather and maintain data in the required form and to review instructions and complete the information collection. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: 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 (7100-0297), Washington, DC 20503. 12/2022

as "confidential."

Checklist

The checklist below is provided to assist the reporting foreign banking organization in filing all the necessary responses to the various report items. Each report item should be checked and the appropriate blanks filled in. The completed checklist should be returned with the report.

Check the Yes, No, or N/A checkbox below, as appropriate, to indicate if the report item is included with the initial filing.

Report Ite	m 1: Financia	I Information Regarding the Foreign Banking Organization (FBC))		
☐ Yes	□ No	1(a) Response provided in Attachment(s) #			
☐ Yes		1(b) Response provided in Attachment(s) #			
Report Ite	m 2: Organiza	ation Information for the FBO			
Yes		2(a) Response provided in Attachment(s) #			
☐ Yes	□ N/A	2(b) Response provided in Attachment(s) #			
Report Ite	m 3: Shares a	and Shareholders			
☐ Yes		3(a) Response provided on Report Page #	or in Attachment(s) #		
☐ Yes	\square No	3(b) Response provided on Report Page #	or in Attachment(s) #		
☐ Yes	\square No	3(c) Response provided on Report Page #	or in Attachment(s) #		
Report Ite	m 4: Eligibility	as a Qualified Foreign Banking Organization (QFBO)			
☐ Yes	☐ No	Items 4(e) and 4(f) have been completed and provided on Report Page # or in Attachment(s) #			
☐ Yes	□ N/A	Items 4(j) and 4(k) have been completed and provided on Report Page # or in Attachment(s) #			
☐ Yes	□ N/A	Items 4(I) and 4(m) have been completed and provided on Report Page # or in Attachment(s) #			
Report Item 5: Regulation YY Compliance for the FBO					
☐ Yes	☐ No	Items 5(a) through 5(e) have been completed and provided on Report Page #			

For Use by Tiered Foreign Banking Organizations

Tiered foreign banking organizations must list the legal name, mailing address, and physical location of subsidiary foreign banking organizations below. Refer to Who Must Report in the general instructions for filing by tiered foreign banking organizations.

A. For the fiscal year ending on			
	Month / Day / Year		
Legal name of subsidiary foreign bar	nking organization:		
Mailing address of head office.			
Mailing address of head office:	Street		
	City	Country	
Physical location of principal office:			
(not mailing address)	Street		
	0''		
	City	Country	
Name and address of authorized off	icial in the United States: Name		
	Street		
	City	State	ZIP Code
	Area Code / Phone Number	Area Code / FAX No	ımber
	7.100 0000 / 1.110110 1.1011001	7,1100,0000,777,000	
	E-mail Address		
1			
Name	Titl	e	
an authorized official of the company na	amed above, certify that this Ann	ual Report of Foreign Banking O	rganizations has been
prepared in conformance with the repor	t instructions.	dar Koport of Foreign Barming of	garnzatione had been
	Signature of Authorized Official	Da	ate

For Use by Tiered Foreign Banking Organizations—Continued

If the Foreign Banking Organization has more than two tiers, use additional pages as needed.

B. For the fiscal year ending on	Month / Day / Year		
Legal name of subsidiary foreign b			
Legal Harrie of Substituting Totelgh b	alikilig organization.		
Mailing address of head office:			
	Street		
	City	Country	
Dhysical location of principal office		Country	
Physical location of principal office (not mailing address)	Street		
	City	Country	
Name and address of authorized of			
	Name		
	Street		
	City	State	ZIP Code
	Area Code / Phone Number	Area Code / FAX Numbe	r
	E-mail Address		
l,			
Name	Title		
an authorized official of the company	named above, certify that this Annu	al Report of Foreign Banking Organ	izations has been
prepared in conformance with the rep	OIT INSUIUCUONS.		
	Olemantura of Australia 1 Official		
	Signature of Authorized Official	Date	