



# 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) of the BHC Act (12 U.S.C. 1844(c)); Section 7 and 13(a) of the International Banking Act of 1978 (12 U.S.C. 3106 and 3108 (a)); Section 25 of the FRA (12 U.S.C. 601–604a); Section 25A of the FRA (12 U.S.C. 611–631); and Regulation Y (12 CFR part 225).

This report is to be filed by foreign banking organizations provided the organization meets the requirements of and is treated as a qualifying foreign banking organization under Section 211.23(a) of Regulation K or meets the requirements for limited exemption under Section 211.23(c) of Regulation K. The Federal Reserve may not conduct or 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 organization.**

Date of Report (foreign banking organization's fiscal year end):

I, \_\_\_\_\_  
Name and Title of Foreign Banking Organization Authorized Official

\_\_\_\_\_  
Month / Day / Year

certify that this *Annual Report of Foreign Banking Organizations* has been prepared in conformance with the report instructions.

\_\_\_\_\_  
Legal Name of Foreign Banking Organization (Top-tier if multi-tier organization)

\_\_\_\_\_  
Signature of Foreign Banking Organization Authorized Official

\_\_\_\_\_  
Street Address of the Foreign Banking Organization

\_\_\_\_\_  
Date of Signature

\_\_\_\_\_  
City / Country

\_\_\_\_\_  
Mailing Address of Principal Office (If different from street address)

\_\_\_\_\_  
City / Country

Return to the appropriate Federal Reserve Bank the original and number of copies of the completed report required by the Federal Reserve Bank.

Person in the United States to whom questions about this report should be directed:

\_\_\_\_\_  
Name / Title

\_\_\_\_\_  
Street

\_\_\_\_\_  
City / State / Zip Code

\_\_\_\_\_  
Area Code / Phone Number

\_\_\_\_\_  
Area Code / Fax Number

\_\_\_\_\_  
E-mail Address

*For Federal Reserve Bank Use Only*

RSSD Number \_\_\_\_\_

C.I. \_\_\_\_\_

# 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 signed by the same authorized official who has signed the cover page of the report and returned with the report.

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**Report Item 1: Financial Information Regarding the Foreign Banking Organization (FBO)**

- 1(a) Response provided in Attachment(s) # \_\_\_\_\_
- 1(b) Response provided in Attachment(s) # \_\_\_\_\_

**Report Item 2: Organization Information for the FBO**

- 2(a) Response provided in Attachment # \_\_\_\_\_
- 2(b) Response provided in Attachment # \_\_\_\_\_

**Report Item 3: Shares and Shareholders**

- 3(a) Response provided on report page or in Attachment # \_\_\_\_\_
- 3(b) Response provided on report page or in Attachment # \_\_\_\_\_
- 3(c) Response provided on report page or in Attachment # \_\_\_\_\_

**Report Item 4: Eligibility as a Qualified Foreign Banking Organization (QFBO)**

- Items 4(e) and 4(f) have been completed and provided in Attachment # \_\_\_\_\_
- Items 4(j) and 4(k) have been completed and provided in Attachment # \_\_\_\_\_
- Items 4(l) and 4(m) have been completed and provided in Attachment # \_\_\_\_\_

**CHECK IF APPLICABLE:**

- The Reporter has submitted a letter requesting confidential treatment for all or any portion of Report Item(s) \_\_\_\_\_. The letter discusses the reasons for the request, and the information has been reported in a separate submission and labeled "Confidential."

I, \_\_\_\_\_  
Name Title

an authorized official of the reporting institution, have reviewed this checklist and verify that all the required information has been provided.

\_\_\_\_\_  
Signature of Authorized Official Date

## 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 banking organization: \_\_\_\_\_

Mailing address of head office: \_\_\_\_\_  
Street

\_\_\_\_\_  
City Country

Physical location of principal office: \_\_\_\_\_  
(not mailing address) Street

\_\_\_\_\_  
City Country

Name and address of authorized official in the United States: \_\_\_\_\_

\_\_\_\_\_  
Street

\_\_\_\_\_  
City State ZIP Code

\_\_\_\_\_  
Area Code / Phone Number Area Code / Fax Number

\_\_\_\_\_  
E-mail Address

I, \_\_\_\_\_  
Name Title

an authorized official of the company named above, certify that this *Annual Report of Foreign Banking Organizations* has been prepared in conformance with the report instructions.

\_\_\_\_\_  
Signature of Authorized Official Date

## 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 banking organization: \_\_\_\_\_

Mailing address of head office: \_\_\_\_\_  
Street

\_\_\_\_\_  
City Country

Physical location of principal office: \_\_\_\_\_  
(not mailing address) Street

\_\_\_\_\_  
City Country

Name and address of authorized official in the United States: \_\_\_\_\_

\_\_\_\_\_  
Street

\_\_\_\_\_  
City State ZIP Code

\_\_\_\_\_  
Area Code / Phone Number Area Code / Fax Number

\_\_\_\_\_  
E-mail Address

I, \_\_\_\_\_  
Name Title

an authorized official of the company named above, certify that this *Annual Report of Foreign Banking Organizations* has been prepared in conformance with the report instructions.

\_\_\_\_\_  
Signature of Authorized Official Date