Board of Governors of the Federal Reserve System

Uniform Application for Municipal Securities Principal or Municipal Securities Representative Associated with a Bank Municipal Securities Dealer—Form MSD-4

The Board of Governors of the Federal Reserve System, the Federal Deposit Insurance Corporation, and the Office of the Comptroller of the Currency are authorized to collect this information pursuant to the authority contained in the following statutes: 15 U.S.C. §§ 78o-4, 78q, and 78w.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The information provided by each respondent is considered to be confidential.

Board of Governors of the Federal Reserve System Privacy Act Notice

The Federal Reserve Board is authorized to request this information from you by Sections 3, 15B(c), 15C, 17 and 23 of the Securities Exchange Act of 1934 (15 U.S.C. §§ 78c, 78o-4, 78o-5, and 78q and 78w); and Section 11 of the Federal Reserve Act (12 U.S.C. § 248). The purpose for collecting the information is to comply with the registration requirements of municipal securities dealers, municipal securities representatives, and U.S. Government securities brokers or dealers and associated persons contained in the Securities Exchange Act of 1934, and to support the Board's regulatory and supervisory functions. Furnishing the requested information is mandatory. Failure to provide the requested information in whole or in part may delay or prohibit the determination of your compliance with applicable registration and professional qualification requirements. The information you provide is protected by the Privacy Act, 5 U.S.C. § 552a. The information may be furnished to third parties as authorized by law and used according to any of the routine uses as described in the System of Records entitled BGFRS-17 "FRB—Municipal or Government Securities Principals or Representatives," available at https://www.federalreserve.gov/files/ BGFRS-17-municipal-or-government-securities-principals-and-representatives.pdf. If you have any questions or concerns about the collection or use of the information, you may contact the Secretary of the Board, Board of Governors of the Federal Reserve System, 20th Street and Constitution Avenue, NW, Washington, DC 20551.

Federal Deposit Insurance Corporation Privacy Act Notice

The Federal Deposit Insurance Corporation is authorized to request this information from you by Sections 3, 15B(c), 15C, 17 and 23 of the Securities Exchange Act of 1934 (15 U.S.C. §§ 78c,78o-4, 78o-5, and 78q and 78w); and Section 9 of the Federal Deposit Insurance Act (12 U.S.C. § 1819). The purpose for collecting the information is to comply with the registration requirements of municipal securities dealers, municipal securities representatives, and U.S. Government securities brokers or dealers and associated persons contained in the Securities Exchange Act of 1934, and to support the FDIC's regulatory and supervisory functions. Furnishing the requested information is mandatory. Failure to provide the requested information in whole or in part may delay or prohibit the determination of your compliance with applicable registration and professional qualification requirements. The information you provide is protected by the Privacy Act, 5 U.S.C. § 552a. The information may be furnished to third parties as authorized by law and in accordance with any of the other routine uses described in FDIC 30-64-0016, Professional Qualification Records for Municipal Securities Dealers, Municipal Securities Representatives, and U.S. Government Securities Brokers/Dealers System of Records available at www.fdic.gov/about/privacy. If you have questions or concerns about the collection or use of the information, you may contact the FDIC's Chief Privacy Officer at Privacy@fdic.gov.

Office of the Comptroller of the Currency Privacy Act Notice

The Office of the Comptroller of the Currency is authorized to request this information from you by 12 U.S.C. §§ 1, 481, 1464, 1818, and 1820; 15 U.S.C. §§ 78o-4, 78o-5, and 78q and 78w. The purpose of collecting the information is for the OCC to carry out its responsibilities under the federal securities laws relating to the professional qualifications and fitness of individuals who engage or propose to engage in securities activities on behalf of national banks, federal savings associations, and District of Columbia savings associations operating under the OCC's regulatory authority. Failure to provide the requested information in whole or in part may delay or prevent the determination of your compliance with applicable registration and professional qualification requirements. The information you provide is protected by the Privacy Act, 5 U.S.C. § 552a. The information may be furnished to third parties as authorized by law and used according to any of the routine uses described in the Bank Securities Dealers System --Treasury/Comptroller system of record notice (Treasury/CC .210) available at https://www.federalregister.gov/documents/2016/01/19/2016-00763/privacy-act-of-1974-as-amended-system-of-records. If you have any questions or concerns about the collection or use of the information, you may contact the Deputy Comptroller, Market Risk Division, Office of the Comptroller of the Currency, 400 Seventh St S.W., Suite 7W-215, Washington D.C. 20219.

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time to gather and maintain data in the required form and to review instructions and to 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 Office of Management and Budget, Washington, DC 20503, and, depending on your primary federal regulator, to Secretary, Board of Governors of the Federal Reserve System, 20th and C Streets, NW, Washington, DC 20551; or to Assistant Executive Secretary, Federal Deposit Insurance Corporation, Washington, DC 20429; or to Legislative and Regulatory Activities Division, Office of the Comptroller of the Currency, Washington, DC 20219.

Uniform Application for Municipal Securities Principal or Municipal Securities Representative Associated with a Bank Municipal Securities Dealer

1. Applicant Name:

Last _____ First _____ Middle (if none, write "N/A") _____

2. Bank Municipal Securities Dealer:

A. Name _____

B. Registration Number _____

C. Main Street Address _____

City _____ State _____ Zip Code _____

3. Office of Employment Applicant:

Name _____

4. Date of Employment with MSD:

Month/Day/Year _____

5. To be filed with the following (check one):

☐ Board of Governors of the Federal Reserve System ☐ Federal Deposit Insurance Corporation ☐ Comptroller of the Currency

6. Types(s) of Qualification Requested (check all that apply):

☐ Municipal Securities Representative
☐ Municipal Securities Sales Limited Representative
☐ Municipal Securities Fund Sales Limited Representative
☐ Municipal Securities Principal
☐ Government Securities Representative
☐ Government Securities Supervisor

7. It is anticipated that the applicant will perform the following functions in the capacity indicated (check all that apply):

	CAPACITY	
	Supervisory	Non-Supervisory
A. Underwriting, trading or sales of municipal securities	☐	☐
B. Financial advisory or consultant services for issuers in connection with issuance of municipal securities	☐	☐
C. Research or investment advice with respect to municipal securities in connection with the activities described in items 7.A and 7.B above	☐	☐
D. Activities other than those specifically mentioned that involve communication directly or indirectly with public investors in municipal securities in connection with the activities described in items 7.A and 7.B above	☐	☐
E. Processing and clearing activities with respect to municipal securities	☐	☐
F. Maintenance of records involving activities described in items 7.A through 7.E above	☐	☐
G. Training of municipal securities principals or municipal securities representatives	☐	☐

8. For the purpose of verifying the information furnished on this application by the applicant named in item 1 above, this institution has made inquiry of all employers of the applicant during the immediately preceding three years, as set forth below, concerning the accuracy and completeness of the information provided, and concerning the record and reputation of the applicant as related to the ability to perform the duties for which employed or to be employed.

Employer	Person Contacted	
	Name	Position

Acceptance of this form for filing shall not constitute any finding that the information submitted herein is true, current, complete, or not misleading. Intentional misstatements or omissions of fact may constitute federal criminal violations. (See 18 U.S.C. §§ 1001 and 1005, and 15 U.S.C.78ff.)

Print Name of Municipal Securities Principal or Representative _____ Signature of Municipal Securities Principal or Representative _____ Date (MM/DD/YYYY) _____

Personal History of Applicant

9. _____
Name (Last, First, Middle)

10. _____
Not applicable.

11. _____
Resident Street Address

13. _____
Not applicable.

12. _____ _____ _____
City State Zip Code

14. _____
Not applicable.

15. Any other name ever used by which known: _____

16. EMPLOYMENT AND EDUCATION HISTORY. The following is a complete, consecutive statement of all my employment for the past ten years starting with my immediately previous employer. (Include full- and part-time work, self employment, military service, unemployment, and full-time education.) For each period of employment, list the position held at the time of leaving employment.

Name of Employer and Complete Address	Type of Business	From (MM/YYYY)	To (MM/YYYY)	Position Held	Full-time or Part-time	Reason for Leaving

17. RESIDENTIAL HISTORY.
The following is a complete, consecutive statement of all my residential addresses for the past five years starting with my current residence:

Address — From (MM/YYYY) — To (MM/YYYY)

_____ _____ _____ _____
Street City/Town

_____ _____ _____
State/Province Zip/Postal Code Country

_____ _____ _____ _____
Street City/Town

_____ _____ _____
State/Province Zip/Postal Code Country

_____ _____ _____ _____
Street City/Town

_____ _____ _____
State/Province Zip/Postal Code Country

_____ _____ _____ _____
Street City/Town

_____ _____ _____
State/Province Zip/Postal Code Country

Personal History of Applicant—Continued

18. A. Have you ever taken a qualification examination for municipal securities principals, municipal securities representatives, or financial and operations principals prescribed by the Municipal Securities Rulemaking Board? ☐ Yes ☐ No

If Yes, state below the type of examination and the approximate date taken.

Type of Examination _____ Approximate Date _____ (MM/YYYY)

Type of Examination _____ Approximate Date _____ (MM/YYYY)

B. Have you ever been exempt from or received a waiver of the requirement to take and pass an examination of the nature specified in Question 18.A? ☐ Yes ☐ No

If Yes, state below the type of examination and the approximate date taken.

Type of Examination _____ Basis for Exemption or Waiver Approximate Date _____ (MM/YYYY)

Type of Examination _____ Basis for Exemption or Waiver Approximate Date _____ (MM/YYYY)

19. Are you currently bonded? ☐ Yes ☐ No

If the answer to any of the following questions is Yes, attach complete details:

20. Have you ever been refused coverage under a fidelity bond or has any surety company paid out any funds on your coverage or cancelled such coverage? ☐ Yes ☐ No

21. Have you ever been denied membership, registration, license, permit, or certification by any federal or state securities or federal or state bank regulatory agency, any national securities exchange, registerd securities association, or registered clearing agency? ☐ Yes ☐ No

22. Has any disciplinary action ever been taken against you, or any sanction imposed upon you, including any finding that you were a cause of any disciplinary action or violated any law, rule or regulation or were an aider, abettor, or co-conspirator in any such violation, by any federal or state securities or federal or state bank regulatory agency, any national securities exchange, registered securities association, or registered clearing agency? ☐ Yes ☐ No

23. While you were associated in any capacity with any broker, dealer or municipal securities dealer:

A. Was your registration denied, suspended or revoked? ☐ Yes ☐ No

B. Was your membership in any national securities exchange, registered securities association, or registered clearing agency denied, suspended, or revoked, or was it expelled from any such organization? ☐ Yes ☐ No

24. Has any permanent or temporary injunction (including a cease and desist order) ever been entered against you enjoining conduct as an investment advisor, underwriter, broker, dealer or municipal securities dealer or as an affiliated person of any investment company, bank dealer, or municipal securities dealer or as an affiliated person of any investment company, bank, insurance company, or enjoining any conduct related to such activities or any transactions in any security? ☐ Yes ☐ No

25. Have you been convicted within the past ten years of any felony or misdemeanor: (i) involving the purchase or sale of any security, the taking of a false oath, the making of a false report, bribery, perjury, burglary, or conspiracy to commit any such offense; (ii) arising out of the conduct of the business of a broker, dealer, municipal securities dealer, investment adviser, bank, insurance company, or fiduciary; (iii) involving larceny, theft, robbery, extortion, forgery, counterfeiting, fraudulent concealment, embezzlement, fraudulent conversion, or misappropriation of funds or securities; (iv) involving crimes of concealment of assets, false oaths or claims, bribery in a bankruptcy proceeding, mail fraud, fraud by wire (including telephone, telegraph, radio, or television), fraud or false statements? ☐ Yes ☐ No

_____ _____

Signature of Municipal Securities Principal or Representative Date (Month/Day/Year

Acknowledgment for: ☐ Form MSD-4 ☐ Form G-FIN-4

26. _____
Applicant Name

27. _____
Bank Municipal Securities Dealer Name

28. _____
Bank Municipal Securities Dealer Address

_____ _____ _____
City State Zip Code

29. _____
Attention

Receipt Stamp

When the Form MSD-4 is received by the appropriate regulatory agency, this acknowledgment will be stamped to show receipt and returned to the person named in item 29. The stamped acknowledgment should be retained to substantiate filing.

MAIL THE FORM TO THE REGULATOR INDICATED IN ITEM 5.

Board of Governors of the Federal Reserve System
Submit completed forms in Portable Document Format (PDF) to the Federal Reserve's secure email address:
MSD-GSD-Registration@frb.gov

Federal Deposit Insurance Corporation
Submit completed forms in Portable Document Format (PDF) to the Federal Deposit Insurance Corporation's secure email address MSD-GSD-Registration@fdic.gov or alternatively, mail the form and any attachments to:

Federal Deposit Insurance Corporation
Policy & Program Development Section
550 17th Street, NW, Room MB-5100
Washington, DC 20429

The Office of the Comptroller of the Currency
Upload completed forms via the OCC's BankNet website www.banknet.gov
For assistance call (202) 649-6438