OMB Number 1557-0184

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







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.

Office

See Insert A

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 Actof 1934 (15 U.S.C. 78c, 78c 4, 78c 5, and 78g 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. 552(a). The information may be furnished to third parties as authorized by lawand used according to any of the routine uses described in the Municipal or Government Securities Principals and Representatives System of Records (BGFRS 17), available at https://www.gpo.gov/fdsys/pkg/PAI 2013 BGFRS/xml/PAI 2013 BGFRS.xml#bgfrs17. 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.

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, Off ce of the Comptroller of the Currency, Washington, DC 20219.

Insert A [All Privacy Act Notices should be in separate boxes] (space)

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. (space)

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.

(space)

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, 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.

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

Last First	Middle (if none, write	"N/A")	
2. Bank Municipal Securities Dealer:	3. Office of Employment Applicant:		
A.			
Name	Name		
B	_ 4. Date of Employment with MSD:		
Registration Number			
C. Main Street Address	 Month/Day/Year		
Maill Street Address	MOHUI/Day/Teal		
City State Zip Code	_		
5. To be filed with the following (check one):			
☐ Board of Governors of the Federal Reserve System ☐ Federal	al Deposit Insurance Corporation $\; \Box$ Comp	troller of the Currenc	
6. Types(s) of Qualification Requested (check all that apply):			
☐ Municipal Securities Representative	☐ Municipal Securities Principal		
☐ Municipal Securities Sales Limited Representative	☐ Government Securities Representative	e	
\square Municipal Securities Fund Sales Limited Representative	☐ Government Securities Supervisor		
7. It is anticipated that the applicant will perform the following function	ns in the capacity indicated (check all that a	oply):	
		CAPACITY	
cifically		Non- Supervisory Superviso	
A. Underwriting trading or sales of municipal securities			
B. Financial advisory or consultant services for issuers in connecti			
C. Research or investment advice with respect to municipal securi described in items 7.A and 7.B above	ities in connection with the activities		
D. Activities other than those specifically mentioned that involve con	nmunication directly or indirectly with public		
investors in municipal securities in connection with the activities of			
E. Processing and clearing activities with respect to municipal securitiesF. Maintenance of records involving activities described in items 7.A through 7.E above			
G. Training of municipal securities principals or municipal securitie	_		
3. For the purpose of verifying the information furnished on this applicant made inquiry of all employers of the applicant during the immediate accuracy and completeness of the information provided, and concapility to perform the duties for which employed or to be employed.	ely preceding three years, as set forth below erning the record and reputation of the appli	, concerning the	
England —	Person Contacted	D#-	
Employer	Name	Position	
Acceptance of this form for filing shall not constitute any finding that the info			

or Representative

Personal History of Applicant

9.					10. 1	Not applicable.				
	Name (Last, First, Middle)									
11.					13.					
• • •	Resident Street Address				_	Date of Birth (Mon	th/Day/Year)	t opr	licoblo	7
							INC	л арр	olicable.	
12.		-			14.		0/ / ///	```		
	City	State	Zip Code		F	Place of Birth (City	, State (if applicable	e), Count	Not	applicable.
15.	Any other name ever used	l 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	Fro (MM/Y		To (MM/YYYY)	Position Held		-time or rt-time	Reason for Leaving
17.	RESIDENTIAL HISTORY.					·				
	The following is a complete, Address	consecutive stater	nent of all n	ny residenti	ial add	Iresses for the	five five	starting	From (MM/YYYY)	То
	Street			City/Town						
	State/Province	Zip/Postal Co	de		Cour	itry				
	Street			City/Town						
	State/Province	Zip/Postal Co	de		Cour	ntry				
	Street			City/Town						
	State/Province	Zip/Postal Co	de		Cour	ntry				
	Street			City/Town						
	State/Province	Zip/Postal Co	de		Cour	itry				

Personal History of Applicant—Continued

qualification

18.	A. Have you ever taken and passed 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	<u>'</u>)
	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 specifed in Question 18.A? 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	<u>'</u>
	Type of Examination Basis for Exemption or Waiver Approximate Date	(MM/YYYY	
19.	Are you currently bonded?	Yes	□No
If th	e answer to any of the following questions is Yes, attach complete details:		
	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
	Have you ever been denied membership, registration, license, permit, or certif cation 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
	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	\square 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
	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 aff liated person of any investment company, bank dealer, or municipal securities dealer or as an aff liated person of any investment company, bank, insurance company, or enjoining any conduct related to such activities or any transactions in any security?	□Yes	□No
/	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 fduciary; (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
iliat	fiduciary fiduciary		

26. Applicant Name 27. Bank Municipal Securities Dealer Name **Receipt Stamp** 28. Bank Municipal Securities Dealer Address City State Zip Code 29

☐ Form MSD-4 ☐ Form G-FIN-4

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 e-mail address: MSD-GSD-Registration@frb.gov

Federal Deposit Insurance Corporation

Acknowledgment for:

Attention

Submit completed forms in Portable Document Format (PDF) to the Federal Deposit Insurance Corporation's secure e-mail 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, D.C. 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) 649-6360-