

Board of Governors of the Federal Reserve System



Annual Report of Merchant Banking Investments Held for an Extended Period— FR Y-12A

Cover Page

Report Date _____
(MM/DD/YYYY) (FHMB 9999)

Reporter's Name, Street, and Mailing Address

Legal Name (RSSD 9010)

Street Address (RSSD 9028)

City/County (RSSD 9130)

State/Province, Country (RSSD 9200)

Zip/Postal Code (RSSD 9220)

Reporter's Mailing Address (if different from street address) (FHMB 9110)

Mailing City (FHMB F206)

Mailing State/Province, Country (FHMB F207)

Zip/Postal Code (FHMB F208)

Contact's Name and Mailing Address for this Report

Name and Title (FHMB 8901)

Phone Number (Include area code and if applicable, the extension) (FHMB 8902)

Fax Number (Include area code) (FHMB 9116)

E-mail Address (FHMB 4086)

Contact's Mailing Address (if different from above) (FHMB 9185)

Mailing City (FHMB 9187)

Mailing State/Province, Country (FHMB F209)

Zip/Postal Code (FHMB 9189)

Executive Officer

I, _____,
Printed Name (FHMB C490)

Title (FHMB C491)

am an authorized officer of the company named above, and hereby declare that this report is true and complete to the best of my knowledge and belief.

Signature of Executive Officer

Date of Signature

For Federal Reserve Bank Use Only

BHC RSSD ID _____

SUB RSSD ID _____

Public reporting burden for this information collection is estimated to average 7 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, Washington, D.C. 20551, and to the Office of Management and Budget, Paperwork Reduction Project (7100-0300), Washington, D.C. 20503.

This report is required by law: Sections 4(k)(4)(H) and 5(c) of the Bank Holding Company Act (BHCA) (12 U.S.C. 1843(k)(4)(H) and 1844 (c)) and subpart J of the Board's Regulation Y (12 CFR 225.170 et seq.).

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BHC RSSD ID _____
SUB RSSD ID _____

Direct Holder's Name and Location

Legal Name (FHMB F189)

City/County (FHMB F190)

State/Province, Country (FHMB F191)

Zip/Postal Code (FHMB F192)

Covered Investment Section

1. Acquisition Date of Covered Investment:

(MM/DD/YYYY) (FHMB F193)

2. Name and Location of Company Held:

Legal Name (FHMB F194)

City/County (FHMB F195)

State/Province, Country (FHMB F196)

Zip/Postal Code (FHMB F197)

3. Primary Activity of Company Held:

NAICS

Activity Code

Description of Activity (if no Activity Code applicable)

(FHMB F198)

(FHMB F199)

4. Type of Interest held by Financial Holding Company:

(FHMB F200) Common Stock

(FHM1 F200) Preferred Stock

(FHM2 F200) General Partner

(FHM3 F200) Limited Partner

(FHM4 F200) Warrants

(FHM5 F200) Options

(FHM6 F200) Convertible Debt

(FHM7 F200) Other

If other, please describe:

(FHM8 F200)

5. Percentage of Ownership held by Financial Holding Company:

(FHMB F201) % Voting Equity

(FHMB F202) % Nonvoting Equity

6. Acquisition Cost of the Covered Investment: \$ _____ (in millions of U.S. dollars)
(FHMB F203)

7. Carrying Value of the Covered Investment: \$ _____ (in millions of U.S. dollars)
(FHMB F204)

8. Plan and Schedule for disposition of the Covered Investment: _____

(FHMB F205)

(FHM1 F205)

(FHM2 F205)

(FHM3 F205)

(FHM4 F205)

(FHM5 F205)

(FHM6 F205)

(FHM7 F205)

(FHM8 F205)