**Part I**  
Subject Information

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>*3</td>
<td>Individual’s last name or entity’s legal name</td>
</tr>
<tr>
<td>*4</td>
<td>First name</td>
</tr>
<tr>
<td>*5</td>
<td>Middle initial</td>
</tr>
<tr>
<td>*6</td>
<td>Alternate name, e.g., AKA - individual or DBA - entity</td>
</tr>
<tr>
<td>*7</td>
<td>Occupation or type of business</td>
</tr>
<tr>
<td>*8</td>
<td>Address</td>
</tr>
<tr>
<td>*9</td>
<td>City</td>
</tr>
<tr>
<td>*10</td>
<td>State a. Unk</td>
</tr>
<tr>
<td>*12</td>
<td>Country code</td>
</tr>
<tr>
<td>*13</td>
<td>TIN a. Unk</td>
</tr>
<tr>
<td>*14</td>
<td>TIN type a. EIN</td>
</tr>
<tr>
<td>*15</td>
<td>Form of identification for subject: a. Unk</td>
</tr>
<tr>
<td>*16</td>
<td>Date of birth</td>
</tr>
<tr>
<td>*17</td>
<td>Phone number - Type</td>
</tr>
<tr>
<td>*18</td>
<td>Phone number</td>
</tr>
<tr>
<td>19a</td>
<td>Website (URL) address (If available)</td>
</tr>
<tr>
<td>19</td>
<td>E-mail address (If available)</td>
</tr>
</tbody>
</table>

**Part II**  
Suspicious Activity Information

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>Date or date range of suspicious activity for this report a. From: <em>/__/</em>___ b. To: <strong><strong>/__/</strong></strong></td>
</tr>
</tbody>
</table>

When completing items 29 through 38, check all that apply.

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>29</td>
<td>Structuring a. Alters transaction to avoid BSA recordkeeping requirement</td>
</tr>
<tr>
<td>30.</td>
<td>Terrorist Financing a. Known or suspected terrorist/terrorist organization</td>
</tr>
<tr>
<td>31.</td>
<td>Fraud (Type) a. ACH</td>
</tr>
</tbody>
</table>

Catalog No. 49342F
### Part II  Suspicious Activity Information* (continued)  
(Check all that apply).

#### 32. Casinos
- [ ] Inquiry about end of business day
- [ ] Minimal gaming with large transactions
- [ ] Suspicious intra-casino funds transfers
- [ ] Suspicious use of counter checks or markers
- [ ] Other: ___________________________________________

#### 34. Identification / Documentation
- [ ] Changes spelling or arrangement of name
- [ ] Multiple individuals with same or similar identities
- [ ] Provided questionable or false documentation
- [ ] Refused or avoided request for documentation
- [ ] Single individual with multiple identities
- [ ] Other: ___________________________________________

#### 33. Money laundering
- [ ] Exchanges small bills for large bills or vice versa
- [ ] Suspicion concerning the physical condition of funds
- [ ] Suspicion concerning the source of funds
- [ ] Suspicious designation of beneficiaries, assignees or joint owners
- [ ] Suspicious EFT/wire transfers
- [ ] Suspicious exchange of currencies
- [ ] Suspicious receipt of government payments/benefits
- [ ] Suspicious use of multiple accounts
- [ ] Suspicious use of noncash monetary instruments
- [ ] Suspicious use of third-party transactors (straw-man)
- [ ] Trade Based Money Laundering/Black Market Peso Exchange
- [ ] Transaction out of pattern for customer(s)
- [ ] Other: ___________________________________________

#### 35. Other suspicious activities
- [ ] Account takeover
- [ ] Bribery or gratuity
- [ ] Counterfeit instruments
- [ ] Elder financial exploitation
- [ ] Embezzlement/theft/disappearance of funds
- [ ] Forgeries
- [ ] Identity theft
- [ ] Little or no concern for product performance penalties, fees, or tax consequences
- [ ] Misuse of "free look"/cooling-off/right of rescission
- [ ] Misuse of position or self-dealing
- [ ] Suspected public/private corruption (domestic)
- [ ] Suspected public/private corruption (foreign)
- [ ] Suspicious use of informal value transfer system
- [ ] Transaction with no apparent economic, business, or lawful purpose
- [ ] Two or more individuals working together
- [ ] Unauthorized electronic intrusion
- [ ] Unlicensed or unregistered MSB
- [ ] Other: ___________________________________________

#### 36. Insurance
- [ ] Excessive insurance
- [ ] Excessive or unusual cash borrowing against policy/annuity
- [ ] Proceeds sent to or received from unrelated third party
- [ ] Suspicious life settlement sales insurance (e.g., STOLI’s, Viaticals)
- [ ] Suspicious termination of policy or contract
- [ ] Unclear or no insurable interest
- [ ] Other: ___________________________________________

#### 37. Securities/Futures/Options
- [ ] Insider trading
- [ ] Market manipulation/wash trading
- [ ] Misappropriation
- [ ] Unauthorized pooling
- [ ] Other: ___________________________________________

#### 38. Mortgage Fraud
- [ ] Appraisal fraud
- [ ] Foreclosure fraud
- [ ] Loan Modification fraud
- [ ] Reverse mortgage fraud
- [ ] Other: ___________________________________________

#### 39. Were any of the following product type(s) involved in the suspicious activity? (Check all that apply)
- [ ] Bonds/Notes
- [ ] Commercial mortgage
- [ ] Commercial paper
- [ ] Credit card
- [ ]Debit card
- [ ] Forex transactions
- [ ] Futures/Options on futures
- [ ] Hedge fund
- [ ] Home equity loan
- [ ] Home equity line of credit
- [ ] Insurance/Annuity products
- [ ] Mutual fund
- [ ] Options on securities
- [ ] Penny stocks/Microcap securities
- [ ] Prepaid access
- [ ] Residential mortgage
- [ ] Security futures products
- [ ] Stocks
- [ ] Swap, hybrid, or other derivative
- [ ] Other (List below)

#### 40. Were any of the following instrument type(s)/payment mechanism(s) involved in the suspicious activity? (Check all that apply)
- [ ] Bank/Cashier’s check
- [ ] Foreign currency
- [ ] Funds transfer
- [ ] Gaming instruments
- [ ] Government payment
- [ ] Money orders
- [ ] Personal/Business check
- [ ] Travelers checks
- [ ] U.S. Currency
- [ ] Other (List below)

#### 41 Commodity type (If applicable)

#### 42 Product/Instrument description (If needed)

#### 43 Market where traded (Three to five letter code)

#### 44 IP address (If available)

#### 45 CUSIP® number

#### 46 CUSIP® number
### Part III  Information about Financial Institution Where Activity Occurred (See instructions)

**47 Type of financial Institution**
- [ ] Casino/Card Club
- [ ] Depository institution
- [ ] Insurance company
- [ ] MSB
- [ ] Securities/Futures
- [ ] Other

**48 Primary Federal regulator**

**50 If item 47 is checked, indicate type of Financial institution Where Activity occurred - Check box(es) that apply to this report.**
- [ ] Clearing broker-securities
- [ ] Futures Commission Merchant
- [ ] Holding company
- [ ] Investment Adviser
- [ ] Other

**51 Financial institution identification number (Check one box to indicate type)**
- [ ] CRD number
- [ ] IARD number
- [ ] NFA number
- [ ] RSSD number
- [ ] SEC number

**52 Financial institution’s role in transaction (if applicable)**
- [ ] Selling location
- [ ] Paying location
- [ ] Both a & b

**53 Legal name of financial institution**
- [ ] Unk

**54 Alternate name, e.g., AKA - individual or trade name, DBA - entity**

**55 TIN**
- [ ] EIN
- [ ] SSN/ITIN
- [ ] Foreign

**56 TIN type**
- [ ] (If 55 is known)

**57 Address**
- [ ] Unk

**58 State**

**59 ZIP/Postal Code**

**60 ZIP/Postal Code**

**61 Country**
- [ ] (2-letter code)

**62 Internal control/file number**

**63 Loss to financial institution (If applicable)**

### Part IV  Filing Institution Contact Information

**70 Primary Federal regulator**

**79 Filer name (Holding Co., lead fin. inst., or agency, if applicable).**

**80 TIN**

**81 TIN type**
- [ ] EIN
- [ ] SSN/ITIN
- [ ] Foreign

**82 Type of financial Institution**
- [ ] Casino/Card Club
- [ ] Depository institution
- [ ] Insurance company
- [ ] MSB
- [ ] Securities/Futures
- [ ] Other

**83 Type of Securities and Futures institution or individual filing this report - Check box(es) for functions that apply to this report.**
- [ ] Clearing broker-securities
- [ ] Futures Commission Merchant
- [ ] Holding company
- [ ] Investment Adviser
- [ ] Other

**84 Financial institution identification number (Check one box to indicate type)**
- [ ] CRD number
- [ ] IARD number
- [ ] NFA number
- [ ] RSSD number
- [ ] SEC number

**85 Address**

**86 City**

**87 State**

**88 ZIP/Postal Code**

**89 Country**
- [ ] (2-letter code)

**90 Alternate name, e.g., AKA - individual or trade name, DBA - entity**

**91 Internal control/file number**

**92 LE contact agency**

**93 LE contact name**

**94 LE contact phone number (Include Area Code)**

**94a Ext. (if any)**

**95 LE contact date**

**96 Filing institution contact office**

**97 Filing institution contact office phone number (Include Area Code)**

**97a Ext. (if any)**

**98 Date filed**
- [ ] (See inst.)
**Suspicious Activity Information - Narrative**

**Part V**

**Explanation/description of suspicious activity(ies).** This section of the report is **critical**. The care with which it is completed may determine whether or not the described activity and its possible criminal nature are clearly understood by investigators. Provide a clear, complete, and chronological narrative description of the activity. The narrative should address as much of the information listed below as possible which covers the who/what/when/where of the activity.

- **Describe** the conduct that raised suspicion, why it was suspicious and the date discovered. Did the activity have a material impact on or affect the financial institution's soundness?
- **Explain** whether the transaction(s) was completed or only attempted.
- **Describe** supporting documentation (e.g., transaction records, new account information, tape recordings, e-mail messages, correspondence, etc.). The filer (and joint filer if appropriate) must retain a copy of the SAR and its supporting documentation for five years from the date the SAR was filed.
- **Explain** who benefited, financially or otherwise, from the transaction(s), how much and how (if known).
- **Describe and retain** any admission, or explanation of the transaction(s) provided by the subject(s), or other persons. Indicate to whom and when it was given.
- **Describe and retain** any evidence of cover-up or evidence of an attempt to deceive federal or state examiners, or others.
- **Indicate** where the possible violation of law(s) took place (e.g., main office, branch, other). If the institution or branch has been closed, indicate date.
- **Recommend** any further investigation that might assist law enforcement authorities.
- **Indicate** whether any information has been excluded from this report; if so, state reasons.
- **Describe** subject(s) position(s) if employed by the financial institution.

**Part V - *Suspicious Activity Information - Narrative***

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- **Explain** whether the transaction(s) was completed or only attempted.
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- **Recommend** any further investigation that might assist law enforcement authorities.
- **Indicate** whether any information has been excluded from this report; if so, state reasons.
- **Describe** subject(s) position(s) if employed by the financial institution.

**Indicate** whether the suspicious activity is an isolated incident or relates to another transaction. Note if this is an updated report and if so, provide the date of the original SAR regarding this activity.

**Indicate** whether there is any related litigation. If so, specify the names of the parties involved and the court where the action is pending.

**Indicate** whether U.S. or foreign currency and/or U.S. or foreign negotiable instrument(s) were involved. If foreign, provide the amount, name of currency, and country of origin.

**Describe** any funds transfers, including in or out identifier numbers, parties involved, dates, amounts, and financial institutions involved.

**Indicate** for a foreign national any available information on subject’s passport(s), visa(s), and/or identification card(s). Include date, country, city of issue, issuing authority, and nationality.

**Indicate** the type of institution filing this report, if this is not clear.

**Indicate** if a law enforcement agency has been contacted, list the name of the agency and the name of any person contacted, their title, their telephone number, and when they were contacted.

**If correcting** or amending a prior report, complete the form in its entirety and note the changes here in Part V. See instructions.


Information already provided in earlier parts of this form need not be repeated if the meaning is clear.

Enter the explanation/description narrative in the space below. If necessary, continue the narrative on a duplicate of this page or a blank page. Tips on SAR form preparation and filing are available in the SAR Activity Reviews at www.fincen.gov/pub_reports.html or the “SAR Narrative Guidance Package” at www.fincen.gov/narrativeguidance_webintro.pdf.

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**Paperwork Reduction Act Notice:** The purpose of this form is to provide an effective and consistent means for financial institutions to notify appropriate law enforcement agencies of known or suspected criminal conduct or suspicious activities that take place at or were perpetrated against financial institutions. This report is required by law, pursuant to authority contained in the following statutes. Board of Governors of the Federal Reserve System: 12 U.S.C. 324, 334, 611a, 1844(b) and (c), 3105(c) (2) and 3106(a). Federal Deposit Insurance Corporation: 12 U.S.C. 93a, 1816, 1881-84, 3401-22. Office of the Comptroller of the Currency: 12 U.S.C. 93a, 1818, 1891-84, 3401-22. National Credit Union Administration: 12 U.S.C. 1766(a), 1786(q). Financial Crimes Enforcement Network: 31 U.S.C. 5318(g). Information collected on this report is confidential (5 U.S.C. 552(b)(7) and 552a(k)(2), and 31 U.S.C. 5318(g)). The Federal financial institutions’ regulatory agencies and the U.S. Departments of Justice and Treasury may use and share the information. **Public reporting and recordkeeping burden for this information collection is estimated to average of two (2) hours per response, and includes time to gather and maintain data in the required report, review the instructions, and complete the information collection. Send comments regarding this burden estimate, including suggestions for reducing the burden, to the Office of Management and Budget, Paperwork Reduction Project, Washington, DC 20503 and, depending on your primary Federal regulatory agency, to your primary Federal regulatory agency, to Secretary, Board of Governors of the Federal Reserve System, Washington, DC 20551; or Assistant Executive Secretary, Federal Deposit Insurance Corporation, Washington, DC 20429; or Legislative and Regulatory Analysis Division, Office of the Comptroller of the Currency, Washington, DC 20219; or Office of Thrift Supervision, Enforcement Office, Washington, DC 20552; or National Credit Union Administration, 1775 Duke Street, Alexandria, VA 22314; or Office of the Director, Financial Crimes Enforcement Network, Department of the Treasury, P.O. Box 39, Vienna, VA 22183. The agencies may not conduct or sponsor, and an organization (or a person) is not required to respond to, a collection of information unless it displays a currently valid OMB control number.**

**Supporting documentation should not be filed with this report.** Maintain the information for your files.

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