## WARNING: Printed versions of the BSA E-file forms are NOT for submission and will NOT be processed by FinCEN

	FinCEN 114													
	Do NOT file with your Federal Tax Return													
										dentify	dentifying number			
Part I Filer Informa	tion													
1 This Report is for Calendar Year Amended BSA	Ended 12/31													
2 Type of Filer a Individual b Part	tnership <b>c</b>	Co	orporation	<b>d</b> 0	consolidated e	Fiduc	iary or Other-E	Enter type						
3 U.S. Taxpayer Identification Nun	nber	<b>4</b> Fo <b>a</b> Тур			lete only if item 3 is no oreign TIN	ot applicable. Other	)							
If filer has no U.S. Identification Number complete Item 4.  b Number				er:							5 Individual's Date of I			
6 Last Name or Organization Nam	e					7	First Name							8 M.I.
9 Address (Number, Street, and A	pt. or Suite No.)													
10 City 11				State/Province 12 ZIP/Postal Code				13 Country						
14a Does the filer have a financial int  Yes If "Yes" enter total  No  14b Does the filer have signature aut  Yes If "Yes" enter total  No	number of account	nts o financia		or more fin	ancial accounts?									
Signature  44a Check here if this report is	s completed by a	third part	ty preparer and	1 complete	the third party prepare	er section								
				Title, if not reporting a personal account						46 Date (MM./DD/YYYY)				
47 Preparer's last name									50 Che self-e	ck if 51 PTIN				
52 Contact phone no. 5	i2a Ext	53 Firm	i's name	•					54	Firm's	TIN	54a		EIN Foreign
55 Mailing address (number, street, apartment or suite number)					56 City 57 State 58 ZI					IIP/Postal Code			59 Country	