

# FinCEN Form 101

Effective May 2004

## Suspicious Activity Report by the Securities and Futures Industries

Please type or print. Always complete entire report. Items marked with an asterisk \* are considered critical. (See instructions.)



OMB No. 1506 - 0019

1 Check the box if this report corrects a prior report (See instructions)

### Part I Subject Information

2 Check box a  if multiple subjects box b  subject information unavailable

*3 Individual's last name or entity's full name			*4 First name			5 Middle initial					
6 Also known as (AKA - individual), doing business as (DBA - entity)						7 Occupation or type of business					
*8 Address						*9 City					
*10 State		*11 ZIP code		*12 Country code (If not U.S.) (See instructions)		13 E-mail address (If available)					
*14 SSN/ITIN (individual), or EIN (entity)			*15 Account number(s) affected, if any. Indicate if closed. Acc't # _____ yes <input type="checkbox"/> Acc't # _____ yes <input type="checkbox"/> Acc't # _____ yes <input type="checkbox"/> Acc't # _____ yes <input type="checkbox"/>			16 Date of birth MM / DD / YYYY					
*17 Government issued identification (If available)											
a <input type="checkbox"/> Driver's license/state ID			b <input type="checkbox"/> Passport			c <input type="checkbox"/> Alien registration			d <input type="checkbox"/> Corporate/Partnership Resolution		
e <input type="checkbox"/> Other _____											
f ID number _____						g Issuing state or country (2 digit code) _____					
18 Phone number - work ( ) - - - - -			19 Phone number - home ( ) - - - - -			20 Is individual/business associated/affiliated with the reporting institution? (See instructions)					
						a <input type="checkbox"/> Yes b <input type="checkbox"/> No					

### Part II Suspicious Activity Information

*21 Date or date range of suspicious activity From MM / DD / YYYY To MM / DD / YYYY			*22 Total dollar amount involved in suspicious activity \$ , , , .00		
23 Instrument type (Check all that apply)					
a <input type="checkbox"/> Bonds/Notes		i <input type="checkbox"/> Commodity options		q <input type="checkbox"/> Commodity type _____ (Please identify)	
b <input type="checkbox"/> Cash or equiv.		j <input type="checkbox"/> Security futures products		r <input type="checkbox"/> Instrument description _____	
c <input type="checkbox"/> Commercial paper		k <input type="checkbox"/> Stocks		s <input type="checkbox"/> Market where traded _____ (Enter appropriate three or four-letter code.)	
d <input type="checkbox"/> Commodity futures contract		l <input type="checkbox"/> Warrants		t <input type="checkbox"/> Other (Explain in Part IV)	
e <input type="checkbox"/> Money Market Mutual Fund		m <input type="checkbox"/> Other securities			
f <input type="checkbox"/> Mutual Fund		n <input type="checkbox"/> Other non-securities			
g <input type="checkbox"/> OTC Derivatives		o <input type="checkbox"/> Foreign currency futures/options			
h <input type="checkbox"/> Other derivatives		p <input type="checkbox"/> Foreign currencies			
24 CUSIP® number		25 CUSIP® number		26 CUSIP® number	
27 CUSIP® number		28 CUSIP® number		29 CUSIP® number	
*30 Type of suspicious activity:					
a <input type="checkbox"/> Bribery/gratuity		h <input type="checkbox"/> Identity theft		o <input type="checkbox"/> Significant wire or other transactions without economic purpose	
b <input type="checkbox"/> Check fraud		i <input type="checkbox"/> Insider trading		p <input type="checkbox"/> Suspicious documents or ID presented	
c <input type="checkbox"/> Computer intrusion		j <input type="checkbox"/> Mail fraud		q <input type="checkbox"/> Terrorist financing	
d <input type="checkbox"/> Credit/debit card fraud		k <input type="checkbox"/> Market manipulation		r <input type="checkbox"/> Wash or other fictitious trading	
e <input type="checkbox"/> Embezzlement/theft		l <input type="checkbox"/> Money laundering/Structuring		s <input type="checkbox"/> Wire fraud	
f <input type="checkbox"/> Commodity futures/options fraud		m <input type="checkbox"/> Prearranged or other non-competitive trading		t <input type="checkbox"/> Other (Describe in Part IV)	
g <input type="checkbox"/> Forgery		n <input type="checkbox"/> Securities fraud			

**Part III****Law Enforcement or Regulatory Contact Information****2**

31 If a law enforcement or regulatory authority has been contacted (excluding submission of a SAR) check the appropriate box.

- |                                                 |                                           |                                                                               |                                                       |
|-------------------------------------------------|-------------------------------------------|-------------------------------------------------------------------------------|-------------------------------------------------------|
| a <input type="checkbox"/> DEA                  | f <input type="checkbox"/> Secret Service | k <input type="checkbox"/> NYSE                                               | p <input type="checkbox"/> State securities regulator |
| b <input type="checkbox"/> U.S. Attorney (**32) | g <input type="checkbox"/> CFTC           | l <input type="checkbox"/> Other RFA                                          | q <input type="checkbox"/> Foreign                    |
| c <input type="checkbox"/> IRS                  | h <input type="checkbox"/> SEC            | m <input type="checkbox"/> Other RE-futures (CME, CBOT, NYMEX, NYBOT)         | r <input type="checkbox"/> Other (Explain in Part VI) |
| d <input type="checkbox"/> FBI                  | i <input type="checkbox"/> NASD           | n <input type="checkbox"/> Other state/local                                  |                                                       |
| e <input type="checkbox"/> ICE                  | j <input type="checkbox"/> NFA            | o <input type="checkbox"/> Other SRO-securities (PHLX, PCX, CBOE, AMEX, etc.) |                                                       |

32 Other authority contacted (for Item 31 l through r) \*\* List U.S. Attorney office here.

33 Name of individual contacted (for all of Item 31)

34 Telephone number of individual contacted (Item 33)

(    ) | | | | | | | | | | | | | | | | | | | | | |

35 Date contacted

\_\_\_\_/\_\_\_\_/\_\_\_\_  
MM    DD    YYYY**Part IV****Reporting Financial Institution Information**

\*36 Name of financial institution or sole proprietorship

\*37 EIN/SSN/ITIN

| | | | | | | | | | | | | | | | | | | | | |

\*38 Address

\*39 City

\*40 State

\*41 ZIP code

| | | | | | | | | | | | | | | | | | | | | |

42 Additional branch address locations handling account, activity or customer.

43  Multiple locations (See instructions)

44 City

45 State

46 ZIP code

| | | | | | | | | | | | | | | | | | | | | |

47 Central Registration Depository number

48 SEC ID number

49 NFA ID number

| | | | | | | | | | | | | | | | | | | | | |

50 Has this reporting individual/entity coordinated this report with another reporting individual/entity? Yes  (Provide details in Part VI) No 

51 Type of institution or individual- Check box(es) for functions that apply to this report

- |                                                               |                                                             |                                                               |
|---------------------------------------------------------------|-------------------------------------------------------------|---------------------------------------------------------------|
| a <input type="checkbox"/> Agricultural trade option merchant | j <input type="checkbox"/> IA                               | s <input type="checkbox"/> Securities dealer                  |
| b <input type="checkbox"/> Affiliate of bank holding company  | k <input type="checkbox"/> Investment company - mutual fund | t <input type="checkbox"/> Securities floor broker            |
| c <input type="checkbox"/> CPO                                | l <input type="checkbox"/> Market maker                     | u <input type="checkbox"/> Securities options broker-dealer   |
| d <input type="checkbox"/> CTA                                | m <input type="checkbox"/> Municipal securities dealer      | v <input type="checkbox"/> SRO-securities                     |
| e <input type="checkbox"/> Direct participation program       | n <input type="checkbox"/> NFA                              | w <input type="checkbox"/> Specialist                         |
| f <input type="checkbox"/> FCM                                | o <input type="checkbox"/> RE-futures                       | x <input type="checkbox"/> Subsidiary of bank                 |
| g <input type="checkbox"/> Futures floor broker               | p <input type="checkbox"/> Other RFA                        | y <input type="checkbox"/> U.S. Government broker-dealer      |
| h <input type="checkbox"/> Futures floor trader               | q <input type="checkbox"/> Securities broker - clearing     | z <input type="checkbox"/> U.S. Government interdealer broker |
| i <input type="checkbox"/> IB-C                               | r <input type="checkbox"/> Securities broker - introducing  | aa <input type="checkbox"/> Other (Describe in Part VI)       |

**Part V****Contact For Assistance**

\*52 Last name of individual to be contacted regarding this report

\*53 First name

\*54 Middle initial

\*55 Title/Position

\*56 Work phone number

\*57 Date report prepared

(    ) | | | | | | | | | | | | | | | | | | | | | |

\_\_\_\_/\_\_\_\_/\_\_\_\_  
MM    DD    YYYY**Send completed reports to:**

**Detroit Computing Center**  
**Attn: SAR-SF**  
**P.O. Box 33980**  
**Detroit, MI 48232**

**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 description (not exceeding this page and the next page) of the activity, including what is unusual, irregular or suspicious about the transaction(s), using the checklist below as a guide, as you prepare your account.

- a. **Describe** conduct that raised suspicion.
- b. **Explain** whether the transaction(s) was completed or only attempted.
- c. **Describe** supporting documentation (e.g. transaction records, new account information, tape recordings, E-mail messages, correspondence, etc.) and retain such documentation in your file for five years.
- d. **Explain** who benefited, financially or otherwise, from the transaction(s), how much, and how (if known).
- e. **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.
- f. **Describe and retain** any evidence of cover-up or evidence of an attempt to deceive federal or state examiners, SRO, or others.
- g. **Indicate** where the possible violation of law(s) took place (e.g., main office, branch, other).
- h. **Indicate** whether the suspicious activity is an isolated incident or relates to another transaction.
- i. **Indicate** whether there is any related litigation. If so, specify the name of the litigation and the court where the action is pending.
- j. **Recommend** any further investigation that might assist law enforcement authorities.
- k. **Indicate** whether any information has been excluded from this report; if so, state reasons.
- l. **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.
- m. **Indicate** "Market where traded" and "Wire transfer identifier" information when appropriate.
- n. **Indicate** whether funds or assets were recovered and, if so, enter the dollar value of the recovery in whole dollars only.
- o. **Indicate** any additional account number(s), and any foreign bank(s) account number(s) which may be involved.
- p. **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.
- q. **Describe** any suspicious activities that involve transfer of funds to or from a foreign country, or transactions in a foreign currency. Identify the country, sources and destinations of funds.
- r. **Describe** subject(s) position if employed by the financial institution.
- s. **Indicate** whether securities, futures, or options were involved. If so, list the type, CUSIP® number or ISID® number, and amount.
- t. **Indicate** the type of institution filing this report, if this is not clear from Part IV. For example, an IA that is managing partner of a limited partnership that is acting as a hedge fund that detects suspicious activity tied in part to its hedge fund activities should note that it is operating as a hedge fund.
- u. **Indicate**, in instances when the subject or entity has a CRD or NFA number, what that number is.
- v. **If correcting a prior report (box in Item 1 checked), complete the form in its entirety and note the corrected items here in Part VI**

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

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

Tips on SAR form preparation and filing are available in the SAR Activity Review at [www.fincen.gov/pub\\_reports.html](http://www.fincen.gov/pub_reports.html)  
Enter explanation/description in the space below. Continue on the next page if necessary.

