



## Notice by Financial Institutions of Government Securities Broker or Government Securities Dealer Activities—Form G-FIN

This notice is required by law (15 U.S.C. § 78o-5(a)(1)(B)).

This notice must be filed by all financial institutions that are government securities brokers or government securities dealers that are not exempt from the notice requirement under regulations of the Department of the Treasury. Generally, a financial institution will not be required to file as a government securities broker or dealer if its only government securities activities are to (1) Buy or sell government securities solely for investment for its own account; (2) Buy or sell government securities for fiduciary accounts; (3) Handle savings bond transactions; (4) Submit tenders for the account of

customers for purchase on original issue of U.S. Treasury securities; (5) Enter into repurchase or reverse repurchase agreements; (6) Effect fewer than 500 government securities brokerage transactions per year; (7) Effect brokerage transactions only through another government securities broker or dealer on a fully disclosed basis; or (8) Effect brokerage transactions that do not involve active solicitations.

An agency 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.

**For further information on the requirements to file this notice, please refer to the instructions.**

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503, and to one of the following: Secretary, Board of Governors of the Federal Reserve System, 20th and C Streets, NW, Washington, DC 20551; Assistant Executive Secretary (Administration), Room F-400, Federal Deposit Insurance Corporation, 550 17th Street, NW, Washington, DC 20429; Legislative and Regulatory Activities Division, Office of the Comptroller of the Currency, 400 7th Street, SW, Washington, DC 20219; or to Securities and Exchange Commission, 100 F Street, NE, Washington, DC 20549.

# Notice of Government Securities Broker or Government Securities Dealer Activities to be Filed by a Financial Institution under Section 15C(a)(1)(B) of the Securities Exchange Act of 1934



1. Check appropriate regulatory agency (ARA):

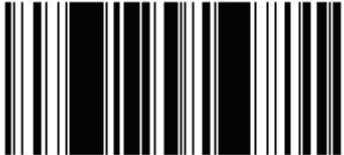
- A.  Comptroller of the Currency
- B.  Board of Governors of the Federal Reserve System
- C.  Federal Deposit Insurance Corporation
- D.  Securities and Exchange Commission

2. Conducts business as:

- A.  Government Securities Broker
- B.  Government Securities Dealer
- C.  Government Securities Broker and Dealer

3. Filing status of notice:

- A.  Notice
- B.  Amendment



4. A. Full name of the financial institution JPMorgan Chase Bank, National Association

B. Address of principal office of financial institution:

24007904

383 Madison Ave  
Address  
New York NY 10179  
City State Zip Code

C. Address of principal office where government securities broker or government securities dealer activities will be conducted (if different from item (B)):

\_\_\_\_\_  
Address  
\_\_\_\_\_  
City State Zip Code

D. Mailing address if different from (B) or (C):

\_\_\_\_\_  
Address  
\_\_\_\_\_  
City State Zip Code

E. Name, title, and telephone number of contact person with respect to this notice:

Wade Hively Employee Conduct Lead 614-422-0174  
Name Title Area Code / Phone Number

5. Does financial institution conduct, or will it conduct, government securities broker or government securities dealer activities at any location other than given in Question 4 above? A.  Yes B.  No

(If yes, provide addresses and describe activities.)

<u>575 Washington Blvd</u> Address	<u>Jersey City</u> City	<u>NJ</u> State	<u>07310</u> Zip Code	<u>Operations</u> Describe Activities
<u>560 Mission Street</u> Address	<u>San Francisco</u> City	<u>CA</u> State	<u>94105</u> Zip Code	<u>Underwriting, Trading or Sales</u> Describe Activities
<u>10 S. Dearborn Street</u> Address	<u>Chicago</u> City	<u>IL</u> State	<u>60603</u> Zip Code	<u>Underwriting, Trading or Sales</u> Describe Activities
SEE SECTION 5 APPENDIX FOR ALL BRANCHES				
_____ Address	_____ City	_____ State	_____ Zip Code	_____ Describe Activities

6. Furnish the name and title of each person who is directly engaged in the management, direction, or supervision of any of the financial institution's government securities broker or government securities dealer activities:

Full Name

Pasierb, Mark

Managing Director

Last / First / Middle

Title

Thiel, Gergana

Managing Director

Last / First / Middle

Title

Childs, Eric

Managing Director

Last / First / Middle

Title

Fitzsimmons, Brian

Managing Director

Last / First / Middle

Title

SEE ATTACHED ROSTER FOR ALL SUPERVISORS AND APs

Last / First / Middle

Title

**NOTE: Attach a separate Form G-FIN-4 (or, if previously filed, a copy of Form MSD-4 or Form U-4) for each person named in item 6.**

7. Has any "associated person" (see definition in paragraph A.7. of the instructions) responded "yes" to any question in Item 16 of Form G-FIN-4, or "yes" to one or more questions in Items 20 through 25 of Form MSD-4 on Page 22 of Form U-4?

A.  Yes B.  No

**NOTE: The financial institution and the person executing this form are responsible for making an inquiry of all other employers of any associated person during the immediately preceding three years for the purpose of verifying the accuracy of the information furnished on Form G-FIN-4. (See 17 C.F.R. § 400.4(c)). Similar requirements are applicable to Form MSD-4 and Form U-4.**

8. *The financial institution submitting this notice and the person executing it represent that all of the information contained herein is true, current, and complete.*

Please print name and title of person executing this notice:

Mark Pasierb

Name (First, Middle, Last)

Managing Director

Title

Signature

Date

11/21/24