INSTRUCTIONS
WHERE A WIRE TRANSFER HAS BEEN BLOCKED AT A U.S. FINANCIAL INSTITUTION DUE TO U.S. GOVERNMENT SANCTIONS, A PARTY TO THE TRANSFER MAY APPLY FOR RELEASE OF THE FUNDS.

- COMPLETE ALL APPLICABLE SECTIONS. FAILURE TO PROVIDE ADEQUATE INFORMATION MAY RESULT IN YOUR APPLICATION BEING RETURNED WITHOUT ACTION.
- ATTACH COPIES OF ANY DOCUMENTS RELATED TO THE UNDERLYING TRANSACTION (E.G. INVOICES, BILLS OF LADING, PHOTOCOPY OF THE ORIGINAL PAYMENT OR TRANSFER INSTRUCTIONS, COPIES OF GOVERNMENT-ISSUED IDENTIFICATION SUCH AS PASSPORT, TEMPORARY/PERMANENT RESIDENT CARD, BIRTH CERTIFICATE, OR OTHER IDENTIFYING DOCUMENTATION).
- ALL DOCUMENTS MUST BE IN ENGLISH OR INCLUDE AN ENGLISH TRANSLATION.
- APPLICATIONS SHOULD BE SUBMITTED USING THE MOST RECENT VERSION OF FORM TD F 90-22.54, APPLICATION FOR RELEASE OF BLOCKED FUNDS, BY EMAIL, U.S. MAIL, OR ANY OTHER OFFICIAL REPORTING OPTION, INCLUDING ELECTRONIC, AS SPECIFIED BY OFAC ON ITS WEBSITE (HTTP://WWW.TREASURY.GOV/OFAC).
- OFAC STRONGLY PREFERS TO RECEIVE APPLICATIONS BY EMAIL OR ANY OTHER OFFICIAL ELECTRONIC REPORTING OPTION, AS SPECIFIED BY OFAC ON ITS WEBSITE.
- IF APPLICATIONS ARE MADE ELECTRONICALLY, THEN IT IS NOT NECESSARY TO SEND COPIES OF THE SAME APPLICATION VIA U.S. MAIL.
- A COPY OF THIS APPLICATION AND ALL RELATED DOCUMENTATION MUST BE RETAINED BY THE APPLICANT FOR AT LEAST FIVE YEARS AFTER THE DATE OF THE UNDERLYING TRANSACTION.
- UNLESS AUTHORIZED BY OFAC, APPLICATIONS MADE BY ANY OTHER METHOD WILL NOT BE CONSIDERED.

LICENSEES GRANTED PURSUANT TO THIS APPLICATION ARE SUBJECT TO THE CONDITIONS BELOW

- LICENSEES SHALL FURNISH AND MAKE AVAILABLE FOR INSPECTION ANY RELEVANT INFORMATION, RECORDS OR REPORTS REQUESTED BY THE SECRETARY OF THE TREASURY OR ANY DULY AUTHORIZED OFFICER OR AGENCY OF THE SECRETARY.
- A SPECIFIC LICENSE 1) DOES NOT EXCUSE COMPLIANCE WITH ANY LAW OR REGULATION ADMINISTERED BY THE OFFICE OF FOREIGN ASSETS CONTROL OR ANOTHER AGENCY (INCLUDING REPORTING REQUIREMENTS APPLICABLE TO THE TRANSACTIONS AND ACTIVITIES THEREIN LICENSED), 2) DOES NOT RELEASE THE LICENSEES OR THIRD PARTIES FROM CIVIL OR CRIMINAL LIABILITY FOR VIOLATION OF ANY LAW OR REGULATION, AND 3) DOES NOT CONSTITUTE A FINDING OF FACT OR CONCLUSION OF LAW WITH RESPECT TO THE APPLICABILITY OF ANY LAW OR REGULATION.


FOR YOUR INFORMATION

- Remitter – The person or organization that is sending the funds.
- Remitting Financial Institution – Name of the financial institution initiating the transfer on behalf of the remitter.
- Intermediary Financial Institution – A bank other than the remitter’s bank or beneficiary’s bank through which the transfer passes.
- Beneficiary Financial Institution – The financial institution receiving the funds on behalf of the beneficiary.
- Beneficiary – The ultimate party to be credited or paid as a result of a wire transfer.

WARNING!
MAKING FALSE OR MISLEADING STATEMENTS ON OR IN CONNECTION WITH THIS APPLICATION MAY CONSTITUTE SERIOUS CRIMINAL AND/OR CIVIL VIOLATIONS OF FEDERAL LAW AND MAY RESULT IN SUBSTANTIAL FINES.

PAPERWORK REDUCTION/PRIVACY ACT STATEMENT: The paperwork requirement has been cleared under the Paperwork Reduction Act of 1985. The Office of Foreign Assets Control (OFAC) of the Department of the Treasury requires this information to be furnished pursuant to 31 CFR Part 501. Transactions prohibited pursuant to the Trading With the Enemy Act, 50 U.S.C. §§ 4301-4341, the International Emergency Economic Powers Act, 50 U.S.C. 1701 et seq., and other authorities may be authorized by means of licenses issued by OFAC. The information collected will be used for the U.S. Government to evaluate and process license applications submitted by applicants whose money has been blocked pursuant to OFAC sanctions. It is the policy of OFAC to protect the confidentiality of information in appropriate cases pursuant to the exemptions from disclosure provided under the Freedom of Information Act and the Privacy Act. The information may be shared with other Federal agencies that assist OFAC in reviewing and verifying license applications. If this mandatory information is not provided, then it may take longer to process the applications and may make it more difficult for OFAC to come to a decision on the application request. The estimated burden associated with this collection of information is 30 minutes per respondent. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to the Compliance Programs Division, OFAC, Department of the Treasury, 1500 Pennsylvania Ave., N.W., Washington, D.C. 20220 and the Office of Management and Budget, Paperwork Reduction Project OMB No. 1505-0170, Washington, D.C. 20503. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid control number assigned by OMB.

Mail this application to: Licensing Division Office of Foreign Assets Control U.S. Department of the Treasury 1500 Pennsylvania Avenue, N.W. Washington, D.C. 20220

Form Approved OMB No.: 1505-0170 Expiration Date: 09/30/2025
APPLICATION FOR THE RELEASE OF BLOCKED FUNDS

TYPE OF APPLICATION  
New Application  
Previous Case Number (if applicable): ____________________

1. Blocked Amount: ____________________  
2. Currency Type: ____________________  
3. Date Blocked (mm/dd/yyyy): ____________________

APPLICANT/CONTACT INFORMATION

4. Business Name (if applicable): ____________________
5. Last Name: ____________________  
6. First Name: ____________________
7. Middle Name: ____________________  
8a. Street Address 1: ____________________  
8b. Street Address 2: ____________________  
9. City: ____________________

10. Country ____________________  
11. State ____________________  
12. Postal Code: ____________________

13. Int'l Phone: ____________________  
14. Area Exchange Number Extension: ____________________
15. Int'l Fax: ____________________

16. E-mail Address: ____________________
17. Principal Place of Business: ____________________

18. State or Country Where Business is Incorporated: ____________________

20. Transfer Blocked Due to the Following OFAC Sanctions Program: ____________________

IF BLOCKING OCCURRED BECAUSE THE NAME OF ANY PARTY TO THE TRANSACTION APPEARS TO MATCH A NAME ON THE SPECIALLY DESIGNATED NATIONALS (SDN) LIST, PLEASE PROVIDE INFORMATION RELATED TO THE NAME MATCH (e.g. copy of: original payment or transfer instructions, invoices, bills of lading, passport, temporary/permanent resident card, birth certificate, Employer Identification Number, passport, national ID card, incorporation document or other government-issued identifying documentation).

FINANCIAL INSTITUTION THAT BLOCKED FUNDS

21. Institution Name: ____________________
22. Street Address: ____________________
23. City: ____________________

24. Country ____________________  
25. State ____________________  
26. Postal Code: ____________________

REMITTER'S INFORMATION

27. Business Name (if applicable): ____________________
28. Last Name: ____________________  
29. First Name: ____________________
30. Middle Name: ____________________
31. Street Address: ____________________
32. City: ____________________

33. Country ____________________  
34. State ____________________  
35. Postal Code: ____________________

REMITTING FINANCIAL INSTITUTION

36. Institution Name: ____________________
37. Street Address: ____________________
38. City: ____________________

39. Country ____________________  
40. State ____________________  
41. Postal Code: ____________________
# APPLICATION FOR THE RELEASE OF BLOCKED FUNDS (cont'd)

## INTERMEDIARY FINANCIAL INSTITUTION

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## BENEFICIARY FINANCIAL INSTITUTION

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### 63. DETAILED EXPLANATION OF THE TRANSACTION, INCLUDING THE PURPOSE OF THE PAYMENT (Additional space provided on next page.)
64. **DETAILED EXPLANATION OF THE TRANSACTION** (cont'd)

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65. **APPLICANT CERTIFICATION**: I, THE UNDERSIGNED, HEREBY DECLARE THAT, TO THE BEST OF MY KNOWLEDGE, THE INFORMATION PROVIDED ON THIS APPLICATION AND ANY ACCOMPANYING DOCUMENTATION IS TRUTHFUL AND COMPLETE.

66. **SIGNATURE**: (please provide handwritten signature on printed application)

67. **DATE**: (please provide handwritten date)

68. **SIGNATORY NAME**: ________________________________

69. **SIGNATORY TITLE**: ________________________________

70. **SIGNATORY E-MAIL**: ________________________________