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| MALTA FINANCIAL SERVICES AUTHORITY |
| **Supervisory Forms – Notification** |
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| **Notification SA26: MiFIR Transaction Reporting Issue/Error Notification Form** |
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| **High Level Guidelines** |
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| This form, **Notification SA26: MiFIR Transaction Reporting Issue/Error Notification Form** (‘Form’), shall be duly filled in by entity within MiFIR scope to notify the MFSA of issues and/or errors arising from MiFIR transaction reporting.  Article 15(2) of the Commission Delegated Regulation (EU) 2017/590 (RTS 22) of 28 July 2016 states that where the trading venue or investment firm becomes aware of any error or omission within a transaction report submitted to a competent authority, including any failure to resubmit a rejected transaction report for transactions that are reportable, or of the reporting of a transaction for which there is no obligation to report, it shall promptly notify the relevant competent authority of this fact.  Investment firms and trading venues may use this form to comply with their duty to notify MFSA of any errors or omissions in their transaction reports. Notifications should be submitted to Capital Market Supervision function at the following address: TransactionReporting@MFSA.mt, as soon as possible.  Use of this form should help ensure the MFSA is provided with necessary information for the purposes of handling errors or omissions in transaction reporting.  This form should not be tampered with or modified in any manner. Should it transpire that the documents were tampered with, or modified in any manner, the Authority shall consider the submission to be invalid. Any potential improvements should be communicated to the MFSA for consideration.  The Authority may at its sole discretion request from the Legal Person further information/ documentation.   1. **Instructions**   In order for this Form to be considered complete, the Applicant is required to complete the respective section, as applicable, under this Form:   * ***Section 1*** – Entity Details; * ***Section 2*** – Issues, Errors, or Omission Details; * ***Section 3*** – Remediation Plan; * ***Section 4*** – Other Details.  1. **Privacy Notice**   The MFSA ensures that any processing of personal data is conducted in accordance with Regulation (EU) 2016/679 (General Data Protection Regulation), the Data Protection Act (Chapter 586 of the Laws of Malta) and any other relevant European Union and national law. For further details, you may refer to the MFSA Privacy Notice available on the MFSA webpage <https://www.mfsa.mt/privacy-notice/>. |

| 1. Entity Details | | |
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|  | Date | Enter date | |
|  | Executing Entity’s LEI | Enter text | |
|  | Executing Entity’s Legal Name | Enter text | |
|  | Executing entity type (Investment Firm, Bank, RM, MTF, OTF, …) | Enter text | |
|  | Submitting Entity’s LEI | Enter text | |
|  | Submitting Entity’s Legal Name | Enter text | |
|  | Submitting Entity’s type (ARM, TV, entity itself) | Enter text | |
|  | Submitting Entity’s Contact details (name, business department) | Enter text | |
|  | Submitting Entity’s Contact coordinates (email, phone) | Enter text | |

| 1. Issues, Errors, or Omission Details | | |
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|  | RTS 22 Field number(s) | Enter text | |
|  | Details of issue, error or omission  (Including impacted reporting period) | Enter text | |
|  | Cause of issue, error or omission and cause of detection | Enter text | |
|  | How issue was discovered | Enter text | |
|  | Period for which the issue occurred | Enter text | |
|  | Amount of impacted transaction reports (if known- if not known please report an estimate of full and final volumes; and also, the date by which you expect to be able to provide this information). | Enter text | |

| 1. Remediation Plan | | |
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|  | Who within the firm/trading venue has oversight responsibility for transaction reporting? | Enter text | |
|  | Remediation actions taken so far | Enter text | |
|  | Actions that remain outstanding | Enter text | |
|  | Escalation actions taken so far | Enter text | |
|  | Remediation plan including system change implementation date(s) (if applicable) | Enter text | |
|  | Total number of transaction reports to be cancelled and resubmitted (If known- if not known please report an estimate of full and final volumes; and also the date by which you expect to be able to provide this information) | Enter text | |
|  | Date when back-reporting completed (If known- if not known please report an estimated date by which you expect to be able to provide this information) | Enter text | |

| 1. Other Details | | |
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|  | Please fill in any further details deemed important to the resolution of the identified issue | Enter text | |
|  | Please detail any weaknesses in the firm’s / trading venues systems and controls in relation to the transaction reporting issue detailed in this notification | Enter text | |