**Appendix—Beneficial Ownership Information (BOI) Report Summary of Data Fields**

**Note:** Lines that must be filled in for a report to be accepted are identified with the \* symbol next to the line number. *Italicized text* provides a description and/or explanation of lines and response options for purposes of this PRA notice.

**Filing Information**

1. \* Type of filing *(check only one box for lines 1a-1d)*
   1. Initial report *(check if reporting for the first time: if this box is checked, proceed to line 2)*
   2. Correct prior report *(check to amend information that was inaccurate and/or incomplete when reported in a prior report; if this box is checked, then you must fill out lines 1e-1h (Reporting Company information associated with most recent report))*
   3. Update prior report *(check to report a change in beneficial ownership information; if this box is checked, then you must fill out lines 1e-1h (Reporting Company information associated with most recent report))*
   4. Newly exempt entity *(check if company previously filed a report and now qualifies for an exemption to the definition of Reporting Company; if this box is checked, then you must fill out lines 1e-1h (Reporting Company information associated with most recent report) and no other lines in the report)*

Reporting Company information associated with most recent report, if any:   
*(when the type of filing is “Correct prior report” (line 1b), “Update prior report” (line 1c), or “Newly exempt entity” (line 1d), lines 1e-1h must be completed in order to link the new filing to the previous filing)*

* 1. Legal name
  2. Tax identification type *(select one from list of options)*
* EIN (Employer Identification Number)
* SSN/ITIN (Social Security Number / Individual Taxpayer Identification Number)
* Foreign
  1. Tax identification number
  2. Country/Jurisdiction (if foreign tax ID only) *(select from list of countries/jurisdictions)*

1. Date prepared (auto-filled when form is finalized) (*line 2 populates automatically with the date when the filer selects “Finalize” on the form*)

**Part I. Reporting Company Information**

1. Request to receive FinCEN Identifier (FinCEN ID) *(check the box to receive a FinCEN ID)*
2. Foreign pooled investment vehicle *(check the box if Reporting Company is a foreign pooled investment vehicle)*

**Full legal name and alternate name(s):**

1. \* Reporting Company legal name
2. Alternate name (e.g., trade name, DBA) *(multiple alternate names may be reported)*

**Form of identification:**

1. \*Tax identification type *(select one from list of options)*
   * EIN (Employer Identification Number)
   * SSN/ITIN (Social Security Number / Individual Taxpayer Identification Number)
   * Foreign
2. \* Tax identification number
3. Country/Jurisdiction (if foreign tax ID only) *(select from list of countries/jurisdictions)*

**Jurisdiction of formation or first registration:**

1. \* a. Country/Jurisdiction of formation *(select from list of countries/jurisdictions, including the United States, each U.S. Territory,[[1]](#footnote-3) and all foreign countries. If United States is selected, complete lines 10b, 10c, or 10d as applicable; if a U.S. Territory is selected, line 10b populates automatically with the selected U.S. Territory; if a foreign country is selected, complete lines 10e, 10f, or 10g as applicable.)*

**Domestic** **Reporting Company:**

1. State of formation *(select from list of U.S. States; if a U.S. Territory was selected in line 10a, line 10b populates automatically with the selected U.S. Territory)*
2. Tribal jurisdiction of formation *(select from list of Tribes and “Other Tribe”)*
3. Name of the other Tribe *(enter name of the other Tribe not included in list for line 10c, only available if “Other Tribe” selected in line 10c)*

**Foreign Reporting Company:**

1. State of first registration *(select from list of U.S. States and U.S. Territories)*
2. Tribal jurisdiction of first registration *(select from list of Tribes and “Other Tribe”)*
3. Name of the other Tribe *(enter name of the other Tribe not included in list for line 10f, only available if “Other Tribe” selected in line 10f)*

**Current U.S. address** (*street address*):

1. \* Address (number, street, and apt. or suite no.)
2. \* City
3. \* U.S. or U.S. Territory *(select U.S.; or U.S. Territory from list of U.S. Territories)*
4. \* State *(select from list of U.S. States; if a U.S. Territory was selected in line 13, line 14 populates automatically with the selected U.S. Territory)*
5. \* ZIP Code
6. Existing Reporting Company (check if Reporting Company was created or registered before January 1, 2024) *(if this box is checked, then Company Applicant information is not required, proceed to Part III)*

**Part II. Company Applicant Information** *(report up to two Company Applicants, lines 17-32 are repeated for each Company Applicant;* if Existing Reporting Company was checked in line 16, Company Applicant information is not required, proceed to Part III.)

## Company Applicant FinCEN ID:

1. FinCEN ID *(if FinCEN Identifier is not provided, information about the Company Applicant must be provided in the lines below)*

**Full legal name and date of birth:**

1. \* Individual’s last name
2. \* First name
3. Middle name *(required if the Company Applicant has a middle name)*
4. Suffix *(required if the Company Applicant’s name has a suffix)*
5. \* Date of birth

**Current address** (*street address):*

1. \* Address type *(check the appropriate box for lines 23a or 23b)*
   1. Business address
   2. Residential address
2. \*Address (number, street, and apt. or suite no.)
3. \* City
4. \* Country/Jurisdiction *(select from list of countries/jurisdictions)*
5. \* State (*select from list when* *United States, Canada, or Mexico was selected in line 26; if a U.S. Territory was selected in line 26, line 27 populates automatically with the selected U.S. Territory; if a foreign country was selected in line 26, line 27 remains empty*)
6. \* ZIP/Foreign postal code

**Form of identification and issuing jurisdiction:**

1. \* Identifying document type *(select one from list of lines 29a-29d)*
2. State-issued driver’s license
3. State/local/Tribe-issued ID
4. U.S. passport
5. Foreign passport *(may only be provided if individual does not possess document type listed in line 29a, 29b, or 29c.)*
6. \* Identifying document number
7. \* Identifying document issuing jurisdiction *(select country/jurisdiction in line 31a and complete lines 31b-31d if applicable)*
8. Country/Jurisdiction *(select from list of countries/jurisdictions)*

b. State *(select from list when the United States was selected in line 31a and the identifying document is issued by a State; if a U.S. Territory was selected in line 31a, line 31b populates automatically with the selected U.S. Territory; if a foreign country was selected in line 31a, line 31b remains empty)*

c.Local/Tribal *(select from list when the United States was selected in line 31a and the identifying document is issued by a local jurisdiction or Tribe; if local jurisdiction or Tribe is not included in list, select “Other” and go to line 31d; if a U.S. territory or foreign country was selected in line 31a, line 31c remains empty)*

d. Other local/Tribal name *(only available if “Other” selected in line 31c; enter name of local jurisdiction or Tribe that was not included in the list for line 31c)*

1. \* Identifying document image *(attach image of identifying document referred to in lines 30-32) (instructions on upload process will be provided here)*

**Part III. Beneficial Owner Information** *(multiple Beneficial Owners may be reported, lines 33-49 are repeated for each Beneficial Owner)*

1. Parent/Guardian information instead of minor child (check if the Beneficial Owner is a minor child and the parent/guardian information is provided instead)

**Beneficial Owner FinCEN ID:**

1. FinCEN ID *(if FinCEN Identifier is not provided, information about the Beneficial Owner must be provided in the lines below)*

**Exempt entity:**

1. Exempt entity *(check the box when an exempt entity is being reported in lieu of a Beneficial Owner’s information; if checked, provide the legal name of the exempt entity in line 36, and lines 37-39 are grayed out)*

**Full legal name and date of birth:**

1. \* Individual’s last name *(or* entity’s legal name *if line 35 box is checked)*
2. \* First name
3. Middle name *(required if the Beneficial Owner has a middle name)*
4. Suffix *(required if the Beneficial Owner’s name has a suffix)*
5. \* Date of birth

**Residential address** *(street address):*

1. \* Address (number, street, and apt. or suite no.)
2. \* City
3. \* Country/Jurisdiction *(select from list of countries/jurisdictions)*
4. \* State *(select from list when United States, Canada, or Mexico was selected in line 43; if a U.S. Territory was selected in line 43, line 44 populates automatically with the selected U.S. Territory; if a foreign country was selected in line 43, line 44 remains empty)*
5. \* ZIP/Foreign postal code

**Form of identification and issuing jurisdiction:**

1. \* Identifying document type *(select one from list of lines 46a-46d)*
2. State-issued driver’s license
3. State/local/Tribe-issued ID
4. U.S. passport
5. Foreign passport *(may only be provided if individual does not possess document type listed in line 46a, 46b, or 46c)*
6. \* Identifying document number
7. \* Identifying document issuing jurisdiction *(select country/jurisdiction in line 48a and complete lines 48b-48d if applicable)*
8. Country/Jurisdiction *(select from list of countries/jurisdictions)*
9. State *(select from list when the United States was selected in line 48a and the identifying document is issued by a State; if a U.S. Territory was selected in line 48a, line 48b populates automatically with the selected U.S. Territory; if a foreign country was selected in line 48a, line 48b remains empty)*

c. Local/Tribal *(select from list when the United States was selected in line 48a and the identifying document is issued by a local jurisdiction or Tribe (if local jurisdiction or Tribe is not included in the list, select “Other” and go to line 48d); if a U.S. Territory or foreign country was selected in line 48a, line 48c remains empty)*

d. Other local/Tribal name *(only available if “Other” selected in line 48c; enter name of local jurisdiction or Tribe that was not included in list for line 48c)*

1. \* Identifying document image *(attach image of identifying document referred to in in lines 46-48) (instructions on upload process will be provided here)*

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**Summary of Data Fields for the Potential Second Implementation: Part III (Beneficial Owner Information)**

**Part III. Beneficial Owner Information** *(multiple Beneficial Owners may be reported, lines 33-49 are repeated for each Beneficial Owner)*

1. Parent/Guardian information instead of minor child (check if the Beneficial Owner is a minor child and the parent/guardian information is provided instead)

**Beneficial Owner FinCEN ID:**

1. FinCEN ID *(if FinCEN Identifier is not provided, information about the Beneficial Owner must be provided in the lines below)*

**Exempt entity:**

1. Exempt entity *(check the box when an exempt entity is being reported in lieu of a Beneficial Owner’s information; if checked, provide the legal name of the exempt entity in line 36, and lines 37-39 are grayed out)*

**Full legal name and date of birth:**

1. \* Individual’s last name *(or* entity’s legal name *if line 35 box is checked)*
2. *(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values[[2]](#footnote-4))*
3. \* First name
4. *(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)*
5. Middle name *(required if the Beneficial Owner has a middle name)*
6. Suffix *(required if the Beneficial Owner’s name has a suffix)*
7. \* Date of birth
8. *(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)*

**Residential address** *(street address):*

1. \* Address (number, street, and apt. or suite no.)
2. *(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)*
3. \* City
4. *(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)*
5. \* Country/Jurisdiction *(select from list of countries/jurisdictions)*
6. *(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)*
7. \* State *(select from list when United States, Canada, or Mexico was selected in line 43; if a U.S. Territory was selected in line 43, line 44 populates automatically with the selected U.S. Territory; if a foreign country was selected in line 43, line 44 remains empty)*
8. *(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)*
9. \* ZIP/Foreign postal code
10. *(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)*

**Form of identification and issuing jurisdiction:**

1. \* Identifying document type *(select one from list of lines 46a-46d)*
2. State-issued driver’s license
3. State/local/Tribe-issued ID
4. U.S. passport
5. Foreign passport *(may only be provided if individual does not possess document type listed in line 46a, 46b, or 46c)*
6. *(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)*
7. \* Identifying document number
8. *(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)*
9. \* Identifying document issuing jurisdiction *(select country/jurisdiction in line 48a and complete lines 48b-48d if applicable)*
10. Country/Jurisdiction *(select from list of countries/jurisdictions)*
11. *(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)*
12. State *(select from list when the United States was selected in line 48a and the identifying document is issued by a State; if a U.S. Territory was selected in line 48a, line 48b populates automatically with the selected U.S. Territory; if a foreign country was selected in line 48a, line 48b remains empty)*
13. *(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)*

c. Local/Tribal *(select from list when the United States was selected in line 48a and the identifying document is issued by a local jurisdiction or Tribe (if local jurisdiction or Tribe is not included in the list, select “Other” and go to line 48d); if a U.S. Territory or foreign country was selected in line 48a, line 48c remains empty)*

1. *(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)*

d. Other local/Tribal name *(only available if “Other” selected in line 48c; enter name of local jurisdiction or Tribe that was not included in list for line 48c)*

1. \* Identifying document image *(attach image of identifying document referred to in in lines 46-48) (instructions on upload process will be provided here)(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)*

1. U.S. Territories are considered part of the United States for purposes of determining the reporting obligations of domestic and foreign Reporting Companies. However, per ISO standard 3166-1, U.S. Territories are listed as jurisdictions separate from the United States for database management purposes. [↑](#footnote-ref-3)
2. FinCEN is considering several drop-down options, including (but not limited to): “Cannot Contact BO”; “BO Unresponsive”; “BO Refused to Provide”; and “Third Party Refused to Provide.” [↑](#footnote-ref-4)