

## 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*)
  - a. Initial report (*check if reporting for the first time: if this box is checked, proceed to line 2*)
  - b. 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)*)
  - c. 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)*)
  - d. 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)

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

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

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

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

**Form of identification:**

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

**Jurisdiction of formation or first registration:**

10. \* a. Country/Jurisdiction of formation *(select from list of countries/jurisdictions, including the United States, each U.S. Territory,<sup>1</sup> 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:**

- b. 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)*
- c. Tribal jurisdiction of formation *(select from list of Tribes and “Other Tribe”)*
- d. 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:**

- e. State of first registration *(select from list of U.S. States and U.S. Territories)*
- f. Tribal jurisdiction of first registration *(select from list of Tribes and “Other Tribe”)*
- g. 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):**

11. \* Address (number, street, and apt. or suite no.)
12. \* City
13. \* U.S. or U.S. Territory *(select U.S.; or U.S. Territory from list of U.S. Territories)*
14. \* 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)*
15. \* ZIP Code

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<sup>1</sup> 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.

16. 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:**

17. 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:**

18. \* Individual's last name

19. \* First name

20. Middle name *(required if the Company Applicant has a middle name)*

21. Suffix *(required if the Company Applicant's name has a suffix)*

22. \* Date of birth

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

23. \* Address type *(check the appropriate box for lines 23a or 23b)*

a. Business address

b. Residential address

24. \* Address (number, street, and apt. or suite no.)

25. \* City

26. \* Country/Jurisdiction *(select from list of countries/jurisdictions)*

27. \* 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)*

28. \* ZIP/Foreign postal code

**Form of identification and issuing jurisdiction:**

29. \* Identifying document type *(select one from list of lines 29a-29d)*

a. State-issued driver's license

b. State/local/Tribe-issued ID

c. U.S. passport

d. Foreign passport *(may only be provided if individual does not possess document type listed in line 29a, 29b, or 29c.)*

30. \* Identifying document number

31. \* Identifying document issuing jurisdiction *(select country/jurisdiction in line 31a and complete lines 31b-31d if applicable)*

a. 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)
32. \* 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)

33. 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:**

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

**Exempt entity:**

35. 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:**

36. \* Individual’s last name (or entity’s legal name if line 35 box is checked)
37. \* First name
38. Middle name (required if the Beneficial Owner has a middle name)
39. Suffix (required if the Beneficial Owner’s name has a suffix)
40. \* Date of birth

**Residential address (street address):**

41. \* Address (number, street, and apt. or suite no.)
42. \* City
43. \* Country/Jurisdiction (select from list of countries/jurisdictions)
44. \* 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)
45. \* ZIP/Foreign postal code

**Form of identification and issuing jurisdiction:**

46. \* Identifying document type (*select one from list of lines 46a-46d*)
- State-issued driver's license
  - State/local/Tribe-issued ID
  - U.S. passport
  - Foreign passport (*may only be provided if individual does not possess document type listed in line 46a, 46b, or 46c*)
47. \* Identifying document number
48. \* Identifying document issuing jurisdiction (*select country/jurisdiction in line 48a and complete lines 48b-48d if applicable*)
- Country/Jurisdiction (*select from list of countries/jurisdictions*)
  - 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*)
  - 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*)
  - 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*)
49. \* Identifying document image (*attach image of identifying document referred to in in lines 46-48*) (*instructions on upload process will be provided here*)

### **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*)

33. 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:**

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

#### **Exempt entity:**

35. 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:**

36. \* Individual's last name (or entity's legal name if line 35 box is checked)
- z. (if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values<sup>2</sup>)
37. \* First name
- z. (if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)
38. Middle name (required if the Beneficial Owner has a middle name)
39. Suffix (required if the Beneficial Owner's name has a suffix)
40. \* Date of birth
- z. (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):**

41. \* Address (number, street, and apt. or suite no.)
- z. (if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)
42. \* City
- z. (if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)
43. \* Country/Jurisdiction (select from list of countries/jurisdictions)
- z. (if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)
44. \* 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)
- z. (if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)
45. \* ZIP/Foreign postal code
- z. (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:**

46. \* Identifying document type (select one from list of lines 46a-46d)
- e. State-issued driver's license
- f. State/local/Tribe-issued ID
- g. U.S. passport

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<sup>2</sup> 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."

- h. Foreign passport *(may only be provided if individual does not possess document type listed in line 46a, 46b, or 46c)*
  - z. *(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)*
47. \* Identifying document number
- z. *(if you are not able to obtain this information about the Beneficial Owner, select the appropriate reason from the drop-down list of values)*
48. \* Identifying document issuing jurisdiction *(select country/jurisdiction in line 48a and complete lines 48b-48d if applicable)*
- b. Country/Jurisdiction *(select from list of countries/jurisdictions)*
    - z. *(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. 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)*
    - z. *(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)*
    - z. *(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)*
49. \* 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)*