

ALTA FinCEN Information Collection Form



Page 1 of 4

Under 31 U.S.C. § 5326(a), the Treasury Department’s Financial Crimes Enforcement Network (FinCEN) issued a Geographic Targeting Order to title insurance companies requiring the collection of beneficial ownership information for certain real estate transactions.

Please complete the below questionnaire. This Company will rely on the answers provided to meet its reporting obligations.

Who is completing this form?

Name	Position/Title		Company/Law Firm	
Postal Address (Headquarters)	City	State	Zip	EIN Number
Phone	E-Mail		Fax	License #

Transactional Information

Property Address <i>(If multiple properties see NOTE below):</i>				
City		State	Zip	County
Date of Settlement	Total purchase price <i>(If multiple properties see NOTE below)</i> \$			
Type of Transaction: <input type="checkbox"/> Residential (1-4 family) <input type="checkbox"/> Commercial			Bank Financing: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Purchaser type: <input type="checkbox"/> Natural Person <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Trust <input type="checkbox"/> Other				

NOTE: *If more than one property is purchased, list each address and purchase price on an addendum.*

Purchase Funds Information

Total Amount paid by below instruments: \$	
Which type of Monetary Instruments were used <i>(Use check boxes below)</i>	
<input type="checkbox"/> U.S. Currency (Paper money & coin)	
<input type="checkbox"/> Foreign Currency	Country:
<input type="checkbox"/> Cashier’s check (s)	<input type="checkbox"/> Money orders(s)
<input type="checkbox"/> Certified checks(s)	<input type="checkbox"/> Personal or Business check(s)
<input type="checkbox"/> Wire or other funds transfer(s)	<input type="checkbox"/> Virtual Currency

ALTA FinCEN Information Collection Form



Page 2 of 4

Individual Primarily Representing Purchaser

(Defined as the individual authorized by the entity to enter into legally binding contracts).

Attach Legible copy of government issued identification (i.e. passport, driver's license, etc.)				
TRUSTS ONLY – Indicate who conducted the transaction: <input type="checkbox"/> Trustee <input type="checkbox"/> Settlor <input type="checkbox"/> Other				
Type of ID		Issuing State or Country		% of ownership interest
Last Name		First Name		M.I.
Date of Birth	Occupation		Taxpayer ID Number or EIN <i>(if none* enter reason code from below)</i>	
Address		City		State Zip

Purchasing Entity's Name & Address

Name of Purchasing Entity				
Taxpayer ID Number or EIN <i>(if none* enter reason code from below)</i>		Doing Business Name (DBA) <i>(if none write N/A)</i>		
Address		City		State Zip

Complete the following pages if the real estate purchase is being made by a corporation, LLC, partnership, other legal entity or trust.

For Corporations, LLCs, Partnerships and Other Entities provide the information for:

- Each **BENEFICIAL OWNER** who, directly or indirectly, owns 25% or more of the equity interests of the Purchaser. If a or a series of legal entities is the beneficial owner of the Purchaser, provide information for the ultimate beneficial owner of all the legal entities.

For Trusts provide the information for:

- **Trustee, settlor and EACH beneficiary** of the trust. If the trustee, settlor or a beneficiary is a legal entity, provide information for the entity and the ultimate beneficial owner that directly or indirectly owns 25% or more of that entity.

(Note: It is NOT necessary to complete the address fields if the information is on a legible copy of the government issued ID submitted to the title underwriter.)

***REASON CODES FOR NO TIN OR EIN - Enter one reason no. in Taxpay ID Number or EIN box:**

1. Does not have income effectively connected with the conduct of a U.S. trade or business;
2. Does not have an office or place of business, or a fiscal or paying agent in the U.S.;
3. Does not furnish a withholding certificate described in §1.1441-1(e)(2) or (3) or §1.1441-5(c)(2)(iv) or (3)(iii) to the extent required under §1.1441-1(e)(4)(vii); or
4. Does not have to furnish a TIN on any return, statement, or other document as required by the income tax regulations under section 897 or 1445.

ALTA FinCEN Information Collection Form



Page 3 of 4

Type of ID		Issuing State or Country	% of ownership interest	
Last Name		First Name		M.I.
Date of Birth	Occupation	Taxpayer ID Number or EIN (if none* enter reason code from page 2)		
Address		City	State	Zip

Attach Legible copy of government issued identification (i.e. passport, driver's license, etc.)

Type of ID		Issuing State or Country	% of ownership interest	
Last Name		First Name		M.I.
Date of Birth	Occupation	Taxpayer ID Number or EIN (if none* enter reason code from page 2)		
Address		City	State	Zip

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ALTA FinCEN Information Collection Form



Page 4 of 4

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Last Name		First Name	M.I.
Date of Birth	Occupation	Taxpayer ID Number or EIN (if none* enter reason code from page 2)	
Address		City	State Zip

I declare that to the best of my knowledge, the information I have furnished is true, correct and complete. I understand that this Title Company will rely on this information for the purposes of completing any reports made pursuant to an obligation under 31 U.S.C. § 5326(a),

Signature:	Date:
Type or Print Name:	Title: