

# FBAR Info FinCEN 114

**TO BE COMPLETED BY OWNERS OR CO-OWNERS OF FOREIGN FINANCIAL ACCOUNTS**

## Part I

TAXPAYER'S NAME	SPOUSE'S NAME
SOCIAL SECURITY NO.	SOCIAL SECURITY NO.
DATE OF BIRTH	DATE OF BIRTH
ARE YOU A U.S. CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO	ARE YOU A U.S. CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO
FOREIGN ID NO:	FOREIGN ID NO:
TYPE OF FOREIGN ID: <input type="checkbox"/> PASSPORT <input type="checkbox"/> FOREIGN TIN	TYPE OF FOREIGN ID: <input type="checkbox"/> PASSPORT <input type="checkbox"/> FOREIGN TIN
<input type="checkbox"/> OTHER FOREIGN ID:	<input type="checkbox"/> OTHER FOREIGN ID:
COUNTRY OF ISSUE OF FOREIGN ID:	COUNTRY OF ISSUE OF FOREIGN ID:
EMAIL	EMAIL
CELL PHONE	CELL PHONE
HOME ADDRESS:	CITY STATE ZIP

Do you have a financial interest in 25 or more financial accounts?  YES  NO

Do you have signature authority over but no financial interest in 25 or more accounts?  YES  NO **IF YES, GO TO PART IV**

Are accounts jointly owned?  YES  NO **IF YES, PLEASE FILL OUT PART III - IF NO, OWNER IS:**  TAX PAYER  SPOUSE

Did you have any earnings from foreign accounts?  YES  NO

Did you report the earnings on your US Tax Returns?  YES  NO

Were foreign taxes withheld?  YES  NO

## Part II

**15** Maximum Account Value: **US \$** \_\_\_\_\_ **Foreign Currency** \_\_\_\_\_ **15a** Max Acct Value Unknown

**16** Type of Account:  BANK  SECURITIES  OTHER \_\_\_\_\_

**17** Financial Institutions Name: \_\_\_\_\_

**18** Account Number or Other Designation: \_\_\_\_\_

**19** Mailing Address: \_\_\_\_\_

**20** City: \_\_\_\_\_

**21** State: \_\_\_\_\_

**22** Foreign Postal Code: \_\_\_\_\_

**23** Country: \_\_\_\_\_

**Part III – Jointly Owned Accts**

**15** Maximum Account Value

**15a** Maximum Account Value Unknown

**16** Type of Account

**17** Financial Institution Name

**18** Account Number or Other Designation

**19** Address

**20** City

**21** State

**22** Foreign Postal Code

**23** Country

**24** Number of Joint Owners

**Joint Owner Information**

**26** Last Name

**27** First Name

**28** Middle Name

**29** Address

**30** City

**31** State

**32** Zip/Postal Code

**33** Country

**Part IV- Signatory Authority/No Interest**

**Account Information**

**15** Maximum Account Value

**15a** Maximum Account Value Unknown

**16** Type of Account

**17** Financial Institution Name

**18** Account Number or Other Designation

**19** Mailing Address

**20** City

**21** State

**22** Foreign Postal Code

**23** Country

**Owner Information**

**34** Last Name

**35** Social Security No.

**36** First Name

**37** Middle Name

**38** Address

**39** City

**40** State/Territory/Province

**41** Zip/Postal Code

**42** Country

**43** Filer's Title with this Owner