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Reporting Person &
Property InformationTransferee
InformationTransferor
InformationPayment
Information

Real Estate Report

OMB No. 1506-0080

Version number: READ-ONLY
Release Date: 12/01/2025

Report Preparation & Submission Instructions:

Instructions

Validate

Finalize

Save

Print

Ready to File

1. Complete the report in its entirety with all required information. Click **Instructions** for help.
2. Click **Validate** to ensure all entered data is properly formatted and that all required fields are completed.
3. Click **Finalize** to sign with your PIN and lock the entries in the report in preparation for submission. Click **Edit Report** to unlock and make edits as needed.
4. Click **Save** to retain a local copy of the report (this can be done at any time during report preparation).
5. (Optional) Click **Print** to print a hard copy of your finalized report.
6. Click **Ready to File** (activated after the report is finalized and saved locally) to [begin the submission process](#).

* Filing name

Filing Information

1. * Type of filing ☐ a. Initial report
☐ b. Correct/Amend prior report
Prior report BSA Identifier (BSA ID)
☐ c. FinCEN directed back-filing

2. Date prepared
(Auto-filled when report is finalized)

3. Note to FinCEN

PAPERWORK REDUCTION ACT NOTICE

Public reporting and recordkeeping burden for this collection of information (which includes the recordkeeping burden associated with a designation agreement, if applicable) is estimated to average 4 hours and 20 minutes per response. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information to the Department of Treasury, Financial Crimes Enforcement Network, PO Box 39, Vienna, VA 22183.

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Part I. Reporting Person Information

4. * Reporting person category



Legal name

5. * Last name or entity legal name

6. If entity

☐

7. First name

8. Middle name

9. Suffix

Address: Principal place of business in the U.S.

10. * Street address

(number, street, and apt. or suite no.)

11. * City

12. * U.S./U.S. Territory



13. * State/U.S. Territory



14. * ZIP code

15. * Date of closing



Part II. Property Information

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Address (U.S./U.S. Territory)

16. * Street address

(number, street, and apt. or suite no.)

No street address

☐

17. * City

18. * U.S./U.S. Territory



19. * State/U.S. Territory



20. * ZIP code

Legal description

21. * Legal description type



Other description

22. * Legal description

(Enter the legal description of the property verbatim from the relevant deed in its entirety or the first 1000 characters)

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Part III. Transferee Information

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23. * Transferee type	<input type="text"/>	24. Date trust instrument executed	<input type="text"/>	25. If revocable trust	<input type="checkbox"/>
26. * Total consideration paid (in U.S. dollars) (Paid or to be paid, by or on behalf of this transferee)	\$ <input type="text"/> .00	No consideration paid	<input type="checkbox"/>		
Legal name Alternate name (if entity)					
27. * Legal name	<input type="text"/>				
28. Alternate name	<input type="text"/>				
Address: Principal place of business (if entity)					
30. Address type	<input type="text"/>	29. Foreign principal place of business with no U.S. location	<input type="checkbox"/>		
31. * Street address (number, street, and apt. or suite no.)	<input type="text"/>	33. * Country/Jurisdiction	<input type="text"/>		
32. * City	<input type="text"/>	34. State/U.S. Territory	<input type="text"/>		
		35. ZIP/Foreign postal code	<input type="text"/>		
Identification					
36. * Identification type	<input type="text"/>	38. Issuing jurisdiction (if foreign)	<input type="text"/>		
37. Identification number	<input type="text"/>				

Person(s) associated with this Transferee:

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39. * Person type	<input type="checkbox"/> Beneficial Owner	<input type="checkbox"/> Signing Individual	<input type="checkbox"/> Trustee Legal Entity
If Beneficial Owner			
40. Check if true	<input type="checkbox"/> Parent/guardian information instead of minor child		
41. Category (check all that apply)			
<input type="checkbox"/> a. Individual trustee	<input type="checkbox"/> c. Sole permissible recipient of trust income or assets	<input type="checkbox"/> f. Beneficial owner of a legal entity or trust with authority to dispose of assets	
<input type="checkbox"/> b. Individual with authority to dispose of assets	<input type="checkbox"/> d. Grantor or settlor with the right to revoke or withdraw assets	<input type="checkbox"/> g. Beneficial owner of a legal entity or trust that is the sole permissible recipient of trust income or assets	
<input type="checkbox"/> e. Beneficial owner of a legal entity or trust that is a trustee	<input type="checkbox"/> h. Beneficial owner of legal entity or trust that is a grantor or settlor with the right to revoke or withdraw assets		
42. Country/Jurisdiction of citizenship	<input type="text"/>		
If Signing Individual			
43. Authorization capacity	<input type="text"/>	Other description	<input type="text"/>
44. Name of employer, principal, or partnership	<input type="text"/>		
Legal name Alternate name (if entity) Date of birth (if beneficial owner/signing individual)			
45. * Last name or entity legal name	<input type="text"/>		
46. Alternate name	<input type="text"/>		
47. First name	<input type="text"/>	49. Suffix	<input type="text"/>
48. Middle name	<input type="text"/>	50. Date of birth	<input type="text"/>
Address: Principal place of business (if entity) Residential (if beneficial owner/signing individual)			
52. Address type	<input type="text"/>	51. Foreign principal place of business with no U.S. location	<input type="checkbox"/>
53. * Street address (number, street, and apt. or suite no.)	<input type="text"/>	55. * Country/Jurisdiction	<input type="text"/>
54. * City	<input type="text"/>	56. State/U.S. Territory	<input type="text"/>
		57. ZIP/Foreign postal code	<input type="text"/>
Identification			
58. * Identification type	<input type="text"/>	60. Issuing jurisdiction (if foreign)	<input type="text"/>
59. Identification number	<input type="text"/>		

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Part IV. Transferor Information

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61. If Transferor is not an individual,
select the appropriate type

62. Date trust instrument executed



Legal name | Alternate name (if entity) | Date of birth (if individual)

63. * Last name or entity legal name

64. Alternate name

65. First name

67. Suffix

66. Middle name

68. Date of birth



Address: Principal place of business (if entity) | Residential (if individual)

☐ 69. Foreign principal place of business with no U.S. location

70. Address type



73. *Country/Jurisdiction



71. * Street address

(number, street, and apt. or suite no.)

74. State/U.S. Territory



72. * City

75. ZIP/Foreign postal code

Identification

☐ No identification (if true for transferor entity or trust only)

76. * Identification type

78. Issuing jurisdiction
(if foreign)

77. Identification number

If the Transferor is a trust, then record the Trustee(s):

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Legal name | Alternate name (if entity) | Date of birth (if individual)

79. * Last name or entity legal name

80. If entity

☐

81. Alternate name

82. First name

83. Middle name

84. Suffix

Address: Principal place of business (if entity) | Residential (if individual)

☐ 85. Foreign principal place of business with no U.S. location

86. Address type



89. *Country/Jurisdiction



87. * Street address

(number, street, and apt. or suite no.)

90. State/U.S. Territory



88. * City

91. ZIP/Foreign postal code

Identification

☐ No identification (if true for entity only)

92. * Identification type

94. Issuing jurisdiction
(if foreign)

93. Identification number

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Part V. Payment Information

95. * Total consideration paid (in U.S. dollars)
(Paid or to be paid for the transfer as a whole) \$.00 No consideration paid ☐
96. Check if true for the reportable transfer ☐ Hard money, private, or other similar loans involved in reportable transfer
97. Type of hard money, private, and other similar loans
- Other description

Payment made by or on behalf of the Transferee entity/trust:

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98. * Payment amount (in U.S. dollars) \$.00
99. * Payment method
- Other description
100. If foreign payment method, select currency code
- Other description
101. Check if true for this payment ☐ Payment is not from a financial institution account
102. Account number
103. Financial institution legal name

Transferee(s) associated with this payment

104. Check if true for this payment ☐ Payment associated with all recorded transferees in Part III
105. Associated transferee legal name
106. Check if true for this payment ☐ All payors are all recorded transferees in Part III or all recorded transferees in item 105

Payor(s) involved with this payment (if item 106 is not checked)

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107. Last name or entity legal name
108. If entity ☐
109. First name
110. Middle name
111. Suffix