

Prepared By:

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Keizerstraat 3
3512 EA Utrecht

Prepared For:

""

2012 Client Organizer

**Noa Rawlinson, CPA
Expatax BV
Keizerstraat 3
3512 EA Utrecht**

Client name: _____

Dear Client:

This letter is to confirm and specify the terms of our engagement with you and to clarify the nature and extent of the services we will provide. In order to ensure an understanding of our mutual responsibilities, we ask all clients for whom returns are prepared to confirm the following arrangements.

We will prepare your 2012 federal and state income tax returns from information which you will furnish to us. We will not audit or otherwise verify the data you submit, although it may be necessary to ask you for clarification of some of the information. We will furnish you with questionnaires and worksheets to guide you in gathering the necessary information. Your use of such forms will assist in keeping the fee to a minimum.

It is your responsibility to provide all the information required for the preparation of complete and accurate returns. You should retain all the documents, cancelled checks and other data that form the basis of income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the income tax returns and, therefore, you should review them carefully before you sign them.

Our work in connection with the preparation of your income tax returns does not include any procedures designed to discover defalcations and/or irregularities, should any exist. We will render such accounting and bookkeeping assistance as determined to be necessary for preparation of the income tax returns.

The law provides various penalties that may be imposed when taxpayers understate their tax liability. If you would like information on the amount or the circumstances of these penalties, please contact us.

Your returns may be selected for review by the taxing authorities. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such government tax examination, we will be available upon request to represent you and will render additional invoices for the time and expenses incurred.

Our fee for these services can be found on our website and will be billed to you unless you have come to a different arrangement with us. All invoices are due and payable upon presentation and although your tax return will be queued for e-filing, final submission to tax authorities will not be initialized until the payment in full has been received.

If the foregoing fairly sets forth your understanding, please sign the enclosed copy of this letter in the space indicated and return it to our office. However, if there are other tax returns you expect us to prepare, please inform us by noting so at the end of the return copy of this letter.

We want to express our appreciation for this opportunity to work with you.

Very truly yours,
Noa Rawlinson, CPA

Accepted by: _____

Signature: _____

Date: _____

Document Checklist

Please mark one of the following:

	I am including this in my package:	This is not applicable to my situation:
▪ A copy of your US income tax return from last year (2011 Form 1040). If you didn't file a 2011 return, then please provide the most recent one.	<input type="checkbox"/>	<input type="checkbox"/>
▪ A copy of your 2012 Dutch income tax return, if not prepared by this office.	<input type="checkbox"/>	<input type="checkbox"/>
▪ If you have the 30% ruling, please provide a copy of the statement.	<input type="checkbox"/>	<input type="checkbox"/>
▪ Jaaropgaaf: year-end statement for wages and salaries.	<input type="checkbox"/>	<input type="checkbox"/>
▪ Forms W-2 for wages and salaries.	<input type="checkbox"/>	<input type="checkbox"/>
▪ Financieel Jaaroverzicht: forms showing interest, dividends or capital gains income from Dutch financial institutions.	<input type="checkbox"/>	<input type="checkbox"/>
▪ All Forms 1099 for interest, dividends, retirement, miscellaneous income, Social Security, state or local refunds, gambling winnings, etc.	<input type="checkbox"/>	<input type="checkbox"/>
▪ For business owners (eenmanszaak, B.V. or V.o.f.): Income statement and Balance Sheet for 2012 (In Dutch: jaarrekening, winst- en verliesrekening + balans 2012)	<input type="checkbox"/>	<input type="checkbox"/>
▪ Brokerage statements showing investment transactions for stocks, bonds, etc.	<input type="checkbox"/>	<input type="checkbox"/>
▪ For Rental Property: statements from management company and Form 1098 Mortgage Interest.	<input type="checkbox"/>	<input type="checkbox"/>
▪ Schedule K-1 from partnerships, S corporations, estates and trusts.	<input type="checkbox"/>	<input type="checkbox"/>
▪ Copies of closing statements regarding the sale or purchase of real property.	<input type="checkbox"/>	<input type="checkbox"/>
▪ Legal papers for adoption, divorce, or separation involving custody of your dependent children.	<input type="checkbox"/>	<input type="checkbox"/>
▪ Any tax notices sent to you by the IRS or other taxing authority.	<input type="checkbox"/>	<input type="checkbox"/>
▪ If you have kids who have earned or unearned income for 2012, please supply any applicable documentation for them as well.	<input type="checkbox"/>	<input type="checkbox"/>

General: 1040

Personal Information

Filing (Marital) status code (1 = Single, 2 = Married filing joint, 3 = Married filing separate, 4 = Head of household, 5 = Qualifying widow(er)) _____

Mark if you were married but living apart all year _____ Mark if your nonresident alien spouse does not have an ITIN _____

Taxpayer **Spouse**

Social security number _____

First name _____

Last name _____

Occupation _____

Designate \$3.00 to the presidential election campaign fund? (1 = Yes, 2 = No, 3=Blank) _____

Mark if legally blind _____

Mark if dependent of another taxpayer _____

Taxpayer between 19 and 23, full-time student, with income less than 1/2 support? (Y, N) _____

Date of birth _____

Date of death _____

Work/daytime telephone number/ext number _____

Do you authorize us to discuss your return with the IRS (Y, N) _____

General: 1040, Contact

Present Mailing Address

Address _____

Apartment number _____

City/State postal code/Zip code _____

Foreign country name _____

Home/evening telephone number _____

Taxpayer email address _____

Spouse email address _____

General: 1040

Dependent Information

First Name	Last Name	Date of Birth	Social Security No.	Relationship	Months in home	Care expenses paid for dependent
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Credits: 2441

Child and Dependent Care Expenses

Provider information:

Business name _____

First and Last name _____

Street address _____

City, state, and zip code _____

Social security number OR Employer identification number _____

Tax Exempt or Living Abroad Foreign Care Provider (1 = TE, 2 = LAFCP) _____

Amount paid to care provider in 2012 _____

Taxpayer **Spouse**

Employer-provided dependent care benefits that were forfeited _____

General: Info

Direct Deposit/Electronic Funds Withdrawal Information

If you would like to have a refund deposited directly or a balance due debited directly into/from your bank account, please enter the following information:

Financial institution: Routing transit number _____ Name _____

Your account number _____ Type of account (1 = Savings, 2 = Checking, 3 = IRA*) _____

If you would like to use a refund to purchase U.S. Series I Savings bonds (in increments of \$50), enter a maximum amount up to \$5,000.** _____

*Refunds may only be direct deposited to established traditional, Roth or SEP-IRA accounts. Make sure direct deposits will be accepted by the bank or financial institution.

**To purchase U.S. Series I Savings bonds in someone else's name, please contact our office.

Income: W2

Salary and Wages

Please provide all copies of Form W-2 that you receive.

Below is a list of the Form(s) W-2 as reported in last year's tax return. If a particular W-2 no longer applies, mark the not applicable box.

T/S	Description	Prior Year Information	Mark if no longer applicable
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____

Income: 1099R

Pension, IRA, and Annuity Distributions

Please provide all copies of Form 1099-R that you receive.

Below is a list of the Form(s) 1099-R as reported in last year's tax return. If a particular 1099-R no longer applies, mark the not applicable box.

T/S	Description	Prior Year Information	Mark if no longer applicable
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____

Income: K1, K1T

Schedules K-1

Please provide all copies of Schedule K-1 that you receive.

Below is a list of the Schedule(s) K-1 as reported in last year's tax return. If a particular K-1 no longer applies, mark the not applicable box.

T/S/J	Description	Form	Mark if no longer applicable
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____

Income: W2G

Gambling Income

Please provide all copies of Form W-2G that you receive.

Below is a list of the Form(s) W-2G as reported in last year's tax return. If a particular W-2G no longer applies, mark the not applicable box.

T/S	Description	Prior Year Information	Mark if no longer applicable
____	_____	_____	____
____	_____	_____	____
____	_____	_____	____

Educate: 1099Q

Qualified Education Plan Distributions

Please provide all copies of Form 1099-Q that you receive.

Below is a list of the Form(s) 1099-Q as reported in last year's tax return. If a particular 1099-Q no longer applies, mark the not applicable box.

T/S	Description	Prior Year Information	Mark if no longer applicable
____	_____	_____	____
____	_____	_____	____

Income: B1 **Interest Income**

Please provide all copies of Form 1099-INT.

T/S/J	Payer Name	Interest Income	Prior Year Information
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Income: B3 **Seller Financed Mortgage Interest**

T, S, J _____ Payer's name _____ Payer's social security number _____
 Payer's address, city, state, zip code _____
 Amount received in 2012 _____ Amount received in 2011 _____

Income: B2 **Dividend Income**

Please provide copies of all Form 1099-DIV or other statements reporting dividend income.

T/S/J	Payer Name	Ordinary Dividends	Qualified Dividends	Prior Year Information
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Income: D **Sales of Stocks, Securities, and Other Investment Property**

Please provide copies of all Forms 1099-B and 1099-S.

T/S/J	Description of Property	Date Acquired	Date Sold	Gross Sales Price (Less expenses of sale)	Cost or Other Basis
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Income: Income **Other Income**

Please provide copies of all supporting documentation.

	2012 Information		Prior Year Information
	Taxpayer	Spouse	Prior Year Information
State and local income tax refunds	_____	_____	_____
Alimony received	_____	_____	_____
Unemployment compensation	_____	_____	_____
Unemployment compensation repaid	_____	_____	_____
Social security benefits	_____	_____	_____
Medicare premiums to be reported on Schedule A	_____	_____	_____
Railroad retirement benefits	_____	_____	_____

T/S/J	2012 Information	Prior Year Information
Other Income:	_____	_____
_____	_____	_____
_____	_____	_____

1040 Adj: IRA

Adjustments to Income - IRA Contributions

Please provide year end statements for each account and any Form 8606 not prepared by this office.

Taxpayer

Spouse

Traditional IRA Contributions for 2012 -

If you want to contribute the maximum allowable traditional IRA contribution amount,

enter the applicable code: (1 = Deductible only, 2 = Both deductible and nondeductible)

Enter the total traditional IRA contributions made for use in 2012

Roth IRA Contributions for 2012 -

Mark if you want to contribute the maximum Roth IRA contribution

Enter the total Roth IRA contributions made for use in 2012

Educate: Educate

Higher Education Deductions and/or Credits

Complete this section if you paid interest on a qualified student loan in 2012 for qualified higher education expenses for you, your spouse, or a person who was your dependent when you took out the loan.

T/S	Qualified student loan interest paid	2012 Information	Prior Year Information
____	_____	_____	_____
____	_____	_____	_____

Complete this section if you paid qualified education expenses for higher education costs in 2012.

Qualified education expenses include tuition and fees required for enrollment or attendance at an eligible educational institution.

Please provide all copies of Form 1098-T.

T/S	Ed Exp Code*	Student's SSN	Student's First Name	Student's Last Name	Qualified Expenses	Prior Year Information
____	__	_____	_____	_____	_____	_____
____	__	_____	_____	_____	_____	_____
____	__	_____	_____	_____	_____	_____
____	__	_____	_____	_____	_____	_____

*Education Expense Code: 1 = American opportunity credit; 2 = Lifetime learning credit; 3 = Tuition and fees deduction

The student qualifies for the American opportunity credit when enrolled at least half-time in a program leading to a degree, certificate, or recognized credential; has not completed the first 4 years of post-secondary education; has no felony drug convictions on student's record

1040 Adj: 3903

Job Related Moving Expenses

Complete this section if you moved to a new home because of a new principal work place.

Description of move	_____
Taxpayer/Spouse/Joint (T, S, J)	_____
Mark if the move was due to service in the armed forces	_____
Number of miles from old home to new workplace	_____
Number of miles from old home to old workplace	_____
Mark if move is outside United States or its possessions	_____
Transportation and storage expenses	_____
Travel and lodging (not including meals)	_____
Total amount reimbursed for moving expenses	_____

1040 Adj: OtherAdj

Other Adjustments to Income

Alimony Paid:

T/S	Recipient name	Recipient SSN	2012 Information	Prior Year Information
____	_____	_____	_____	_____
Street address		_____	_____	_____
City, State and Zip code		_____	_____	_____

	Taxpayer	Spouse	Prior Year Information
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Educator expenses:

_____	_____	_____	_____
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Other adjustments:

_____	_____	_____	_____
_____	_____	_____	_____

Itemized: A1 **Medical and Dental Expenses**

T/S/J		2012 Information	Prior Year Information
—	Medical and dental expenses	_____	_____
—	Medical insurance premiums you paid***	_____	_____
—	Long-term care premiums you paid***	_____	_____
—	Prescription medicines and drugs	_____	_____
—	Miles driven for medical items	_____	_____

***Do not include pre-tax amounts paid by an employer-sponsored plan or amounts paid for your self-employed business

Itemized: A1 **Tax Expenses**

T/S/J		2012 Information	Prior Year Information
—	State/local income taxes paid	_____	_____
—	2011 state and local income taxes paid in 2012	_____	_____
—	Sales tax paid on actual expenses	_____	_____
—	Real estate taxes paid	_____	_____
—	Personal property taxes	_____	_____
—	Other taxes	_____	_____

Itemized: A2 **Interest Expenses**

T/S/J		2012 Information	Prior Year Information
—	Home mortgage interest: From Form 1098	_____	_____
Other, such as: Home mortgage interest paid to individuals			
T/S/J	Payee's Name	SSN or EIN	2012 Information
—	_____	_____	_____
	Address	City	State Zip Code
—	_____	_____	_____
T/S/J		2012 Information	Prior Year Information
—	Investment interest expense, other than on K-1s:	_____	_____
	Refinance #1	Refinance #2	
Refinancing Information:			
T/S/J	_____	_____	_____
	Recipient/Lender name _____	_____	_____
	Total points paid at time of refinance _____	_____	_____
	Date of refinance _____	_____	_____
	Term of new loan (in months) _____	_____	_____
	Reported on Form 1098 in 2012 _____	_____	_____

Itemized: A3 **Charitable Contributions**

T/S/J		2012 Information	Prior Year Information
—	Contributions made by cash or check	_____	_____
—	Volunteer miles driven	_____	_____
—	Noncash items, such as: Goodwill, Salvation Army	_____	_____

Itemized: A3 **Miscellaneous Deductions**

T/S/J		2012 Information	Prior Year Information
—	Unreimbursed expenses	_____	_____
—	Union dues	_____	_____
—	Tax preparation fees	_____	_____
	Other expenses, subject to 2% AGI limitation:		
—	_____	_____	_____
—	Safe deposit box rental	_____	_____
	Investment expenses, other than on K1s:		
—	Other expenses, not subject to the 2% AGI limitation:	_____	_____
—	_____	_____	_____
—	Gambling losses: (Enter only if you have gambling income)	_____	_____

Foreign Earned Income Exclusion

Taxpayer/Spouse (T, S) [1] State postal code _____ [3]
 Foreign street address _____ [4] City _____
 State/Province _____ Country code _____
 Country _____ Postal code _____
 Employer's name _____ [2]
 U.S. address _____ [5] City _____
 State postal code _____ Zip code _____
 Foreign street address _____ [6] City _____
 State/Province _____ Country code _____
 Country _____ Postal code _____
 Employer type (A = Foreign entity, B = U.S. company, C = Self, D = Foreign affiliate of a U.S. company, E = Other) If other, specify type _____ [8]
 Country of citizenship _____ [11]
 If maintained a separate foreign residence for your family due to adverse living conditions, provide city, country, and days:
 City/Country _____ [12] Days _____
 City/Country _____ Days _____
 List tax home(s) during the tax year and dates established:
 Tax home _____ [13] Date _____
 Tax home _____ Date _____

Foreign Earned Income Allocation Information

***U.S. Business Days and Travel Type Code: 1=Travel to United States; 2=Travel to restricted country; 3=Travel to foreign country**

U.S. business days and travel information: [16]

Type Code*	Name of Country including United States	Date Arrived	Date Left	No. of U.S. business days
—	_____	_____	_____	_____
—	_____	_____	_____	_____
—	_____	_____	_____	_____
—	_____	_____	_____	_____
—	_____	_____	_____	_____
—	_____	_____	_____	_____

Foreign days worked before and after foreign assignment _____ [17] Total days worked before and after foreign assignment _____ [18]
 Total number of days worked during year (defaults to 240) _____ [19]

Bona Fide Residence Test

Date foreign residence began _____ [21] Date foreign residence ended _____ [22]
 Kind of foreign living quarters (A = Purchased house, B = Rented house or apartment, C = Rented room, D = Quarters furnished by employer) _____ [23]
 If any family members lived abroad with you during any part of tax year, list who and for what period:
 Relationship _____ Period abroad _____ [24]
 Relationship _____ Period abroad _____
 Relationship _____ Period abroad _____
 Relationship _____ Period abroad _____
 Mark if you submitted a statement to foreign country authorities that you are not a resident of that country _____ [25]
 Mark if required to pay income tax to that country _____ [26]
 List any contractual terms or other conditions relating to length of employment abroad _____ [27]

 Type of visa used to enter foreign country _____ [28]
 Explanation if visa limited length of stay or employment _____ [29]

 If maintained a home in U.S., enter address, whether it was rented, names of occupants and their relationship to you:
 Address _____ [30] City _____
 State postal code _____ Zip code _____
 Rented Occupant _____ Relationship _____
 Address _____ [30] City _____
 State postal code _____ Zip code _____
 Rented Occupant _____ Relationship _____

Physical Presence Test

Principal country of employment _____ [31]

Employer's name _____
 Taxpayer/Spouse (T, S) _____
 State postal code _____

Foreign Earned Income

***Please use the Foreign Earned Income Allocation Codes located below**

	Allocation Code*	Amount
Noncash income:		
Home (lodging) _____	[10] ___[11]	+ _____ [12]
Meals _____	[13] ___[14]	+ _____ [15]
Car _____	[16] ___[17]	+ _____ [18]
Other properties or facilities (Please enter code here and description and amount below): _____ _____ _____ _____	___[19]	+ _____ [20] + _____ + _____ + _____ + _____
Allowances, reimbursements or expenses paid on behalf:		
Cost of living and overseas differential _____	___[21]	+ _____ [22]
Family _____	___[23]	+ _____ [24]
Education _____	___[25]	+ _____ [26]
Home leave _____	___[27]	+ _____ [28]
Quarters _____	___[29]	+ _____ [30]
Other purposes (Please enter code here and description and amount below): _____ _____ _____ _____	___[31]	+ _____ [32] + _____ + _____ + _____ + _____
Other foreign earned income (Please enter code here and description and amount below): _____ _____ _____ _____	___[33]	+ _____ [34] + _____ + _____ + _____ + _____
Excludable meals and lodging under section 119 _____		+ _____ [35]

***Foreign Earned Income Allocation Codes**

1 = 100% foreign during assignment
 2 = 100% U.S. during assignment
 3 = U.S. and foreign days worked during assignment
 4 = U.S. and foreign days before/after assignment
 5 = Days worked before, during, and after assignment

Deductions Allocable to Foreign Earned Income

	Allocation Code*	Amount
Other allocable deductions _____	___[36]	+ _____ [37]

Housing Exclusion/Deduction

Qualified housing expense _____ + _____ [46]

NOTES/QUESTIONS:

Preparer use only

Description of move	_____	[2]
Taxpayer/Spouse/Joint (T, S, J)	_____	[3]
Mark if the move was due to service in the armed forces	_____	[7]
Number of miles from old home to new workplace	_____	[8]
Number of miles from old home to old workplace	_____	[9]
Mark if move is outside United States or its possessions	_____	[10]
Transportation and storage expenses	+ _____	[11]
Travel and lodging (not including meals)	+ _____	[12]
Miles driven to new home	_____	[13]
Total amount reimbursed for moving expenses	+ _____	[15]

NOTES/QUESTIONS:

This form is used to report financial accounts and assets in foreign countries, as required by the Internal Revenue Service.

Foreign Deposit and Custodial Accounts

	2012 Information	Prior Year Information
Type of Account: (D= Deposit, C = Custodial)	____ [5]	[6]
Account number or other designation	_____ [7]	
Account opened during the tax year	____ [8]	
Account closed during the tax year	____ [10]	
Account jointly owned with spouse	____ [11]	
Maximum value of account	_____ [13]	
Name of financial institution	_____ [18]	
Address of financial institution	_____ [19]	
City, state, zip code	_____ [20] _____ [21] _____ [22]	
Foreign country code/name	____ [23] _____ [24]	
Foreign province/county	_____ [25]	
Foreign postal code	_____ [26]	

Other Foreign Assets

	2012 Information	Prior Year Information
Asset description	_____ [27]	[28]
Asset identifying number or other designation	_____ [28]	
Date asset acquired	_____ [29]	
Date asset disposed	_____ [31]	
Asset jointly owned with spouse	____ [32]	
Maximum value of asset	_____ [34]	

Asset foreign entity information - (enter either foreign entity information or issuer/counterparty information, but not both)

Type of foreign entity: (P = Partnership, C = Corporation, T = Trust, E = Estate) _____ [39]

Foreign entity name _____ [40]

Foreign entity address _____ [41]

City, state, zip code _____ [42] _____ [43] _____ [44]

Foreign country code/name _____ [45] _____ [46]

Foreign province/county _____ [47]

Foreign postal code _____ [48]

Asset issuer or counterparty information - (enter either foreign entity information or issuer/counterparty information, but not both)

Type: (I = Issuer, C = Counterparty) _____ [49]

Entity: (I = Individual, P = Partnership, C = Corporation, T = Trust, E = Estate) _____

If an individual, select either U.S. or foreign (1 = U.S. Person, 2 = Foreign Person) _____

Individual or organization name _____

Address of issuer or counterparty _____

City, state, zip code _____

Foreign country code/name _____

Foreign province/county _____

Foreign postal code _____

Asset issuer or counterparty information - (enter either foreign entity information or issuer/counterparty information, but not both)

Type: (I = Issuer, C = Counterparty) _____

Entity: (I = Individual, P = Partnership, C = Corporation, T = Trust, E = Estate) _____

If an individual, select either U.S. or foreign (1 = U.S. Person, 2 = Foreign Person) _____

Individual or organization name _____

Address of issuer or counterparty _____

City, state, zip code _____

Foreign country code/name _____

Foreign province/county _____

Foreign postal code _____

Treasury Department Report of Foreign Bank Accounts #1

This form is used to report a financial interest in, signature authority or other authority over financial accounts in foreign countries, as required by the Department of the Treasury Regulations.

	2012 Information	Prior Year Information
Taxpayer/Spouse/Joint (T, S, J)	__ [1]	[]
Number of foreign accounts filer has a financial interest in, if 25 or more	__ [2]	
Filer has signature authority over 25 or more foreign accounts	__ [3]	
Information is reported for a financial account which is: (2 = Owned separately, 3 = Owned jointly, 4 = Authority over but no financial interest)	__ [10]	
Type of Account: Bank	__ [11]	
Securities	__ [12]	
Other	__ [13]	
Maximum value of account	__ [14]	
Account number or other designation	__ [16]	
Financial institution	__ [17]	
Address of financial institution	__ [18]	
City, state, zip code	__ [19] __ [20] __ [21]	
Country, foreign postal code	__ [23] __ [25]	
Number of joint owners (Not including taxpayer)	__ [39]	
Parts III and IV -		
Joint owner is spouse	__ [26]	
Taxpayer identification number of account holder/joint owner	__ [27]	
Last name or organization name of account holder/joint owner	__ [28]	
First name and middle initial of account holder/joint owner	__ [29] __ [30]	
Address and apartment	__ [31] __ [32]	
City, state, zip code	__ [33] __ [34] __ [35]	
Country, foreign postal code	__ [37] __ [38]	
Part IV -		
Filer's title with this owner	__ [40]	

Treasury Department Report of Foreign Bank Accounts #2

This form is used to report a financial interest in, signature authority or other authority over financial accounts in foreign countries, as required by the Department of the Treasury Regulations.

	2012 Information	Prior Year Information
Taxpayer/Spouse/Joint (T, S, J)	__ [1]	[]
Number of foreign accounts filer has a financial interest in, if 25 or more	__ [2]	
Filer has signature authority over 25 or more foreign accounts	__ [3]	
Information is reported for a financial account which is: (2 = Owned separately, 3 = Owned jointly, 4 = Authority over but no financial interest)	__ [10]	
Type of Account: Bank	__ [11]	
Securities	__ [12]	
Other	__ [13]	
Maximum value of account	__ [14]	
Account number or other designation	__ [16]	
Financial institution	__ [17]	
Address of financial institution	__ [18]	
City, state, zip code	__ [19] __ [20] __ [21]	
Country, foreign postal code	__ [23] __ [25]	
Number of joint owners (Not including taxpayer)	__ [39]	
Parts III and IV -		
Joint owner is spouse	__ [26]	
Taxpayer identification number of account holder/joint owner	__ [27]	
Last name or organization name of account holder/joint owner	__ [28]	
First name and middle initial of account holder/joint owner	__ [29] __ [30]	
Address and apartment	__ [31] __ [32]	
City, state, zip code	__ [33] __ [34] __ [35]	
Country, foreign postal code	__ [37] __ [38]	
Part IV -		
Filer's title with this owner	__ [40]	