



Report of Property Presumed Unclaimed Inventory Listing Sheet to Report Contents of Safe Deposit Boxes

Name of Holder _____ Name of Contact _____
 Address _____ Address _____
 Address _____ Address _____
 City, ST, Zip _____ City, ST, Zip _____
 Phone _____ E-Mail _____ Phone _____ E-Mail _____

For Dept. Use Only

1. FEIN: _____ Ext #: _____	2. Account ID: _____
3. Report Year: _____	4. Report #: _____ Your original report is considered report #1, please see instructions. If this is an amended return, check here. <input type="checkbox"/>
5. If you are no longer in business and want your account cancelled, check here. <input type="checkbox"/> Enter final date. _____	6. If your address has changed, check here. <input type="checkbox"/>

Section I:			
7.	Safe Deposit Box or Safekeeping Number		
8.	Social Security Number of Owner		
9.	Name (last, first, middle initial) of Owner		
10.	Address of Owner	Address	
		Address	
		City	State
11.	Date Rental Expired		
12.	Rental Charges	\$	
13.	Drilling or Opening Fees	\$	
14.	Total Bank Charges	\$	

I, the undersigned, declare under penalty of perjury, that to the best of my knowledge and belief, the following is a true and complete report of unclaimed property now in possession or under control of the holder, which is presumed unclaimed in accordance with Montana law, 70-9-801 through 70-9-829, MCA. Written notice has been sent to the apparent owner as prescribed under Montana law, 70-9-808(5), MCA.

Name of Officer or Holder Authorized to Sign Report (please print) _____
 Signature _____ Date _____
 Title _____ Phone _____ Fax _____

Mail this report and remittance to:
 Unclaimed Property, Montana Department of Revenue, PO Box 5805, Helena MT 59604-5805
 Questions? Call (406) 444-6900

Inventory Listing Sheet

Section II:	
Item Number	Description of Unclaimed Property Being Reported
1.	
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Report of Property Presumed Unclaimed

Instructions for Reporting Property

If you have questions, please call us at (406) 444-6900.

General Information

What is Unclaimed Property? Any financial asset for which an owner has not generated activity during a period of time (see reporting requirements below). These assets may include uncashed checks, savings, checking, payroll (wages, bonuses, commissions), credit balances, money orders, customer deposits, travelers checks, stocks and bonds (uncashed dividends, interest checks, underlying shares principle), insurance proceeds, certificates of deposit, and other intangible interests or benefits.

What is the Holder's Responsibility? The holder of unclaimed property must send written notice to the apparent owner of property with a value exceeding \$50, not more than 120 days or less than 60 days before filing the report.

Reporting Requirements (70-9-803, MCA)

1 Year

Company dissolution
Class action court judgment
Court or government agency
Wages and bonuses
Utility deposits from customers

3 Years

Credit memo or refund
Gift certificate
Life insurance
IRA/earliest date of distribution

4 Years

State state warrants

5 Years

Stock or equity interest
Debt/interest payment
Demand, savings of time deposit
*Contents of safe deposit boxes
Cashier's checks
Commissions

7 Years

Money orders

15 Years

Traveler's checks

**Contents of Safe Deposit Boxes:* All contents of the safety deposit box must be reported and delivered to us. Nothing may be destroyed. Contents could include, for example, money, jewels, stock certificates, bonds, life insurance policies, promissory notes, deeds, leases, mortgages, contracts, wills or, automobile ownership certificates.

Filing Options

Electronic Filing: A holder report can be filed electronically through a secure file transfer process. To learn more, please go to mt.gov/revenue/, click on "For Businesses", and select "Unclaimed Property Holders" from the drop down list.

Please follow these instructions when submitting your report electronically:

- The report must be in a text file. Do not provide your report in an executable file format, as a statewide policy for Montana will not allow us to accept this format from an external source.
- The text file must be in the current NAUPAll format, which may be obtained at <http://www.wagers.net/hrs>.
- Do not encrypt the file.
- Do not password-protect the file.

Paper Filing: Please follow the instructions below.

Instructions for Page 1

- Line 1 Enter your federal employer identification number (FEIN) on line 1. If you are filing for more than one location, please include your extension number for the specific location that is reporting.
- Line 2 If you know your Account ID, please provide on line 2.
- Line 3 Enter the report year that applies to this report.
Life insurance companies' report year for unclaimed property is the period of January 1 through December 31. The report is due on May 1st of the following year.
All other holders' report year for unclaimed property is the period of July 1 through June 30; the report is due on November 1 of that year.
- Line 4 You may report more than once a year. In order to correctly process the additional reports as such, please indicate the report number on line 4. Your original report is always considered report #1. If you are amending a prior-period report check the box on line 4. Amended is defined as notification that the original report was invalid and the amended report replaces that report in its entirety.
- Line 5 If you are no longer in business and are filing a final report, check the box on line 5 and enter the date that your business ceased operations.
- Line 6 If your address has changed from the last report filed; check the box on line 6.

Section I:

- Line 7 Enter the safe deposit box or safekeeping number.
- Line 8 Enter the social security number or federal identification number of the owner.
- Line 9 Enter the owner's by last name, first name, middle initial.
- Line 10 Enter the owner's last known mailing address including street, city, state, and zip code.
- Line 11 Enter the date the rental expired.
- Line 12 Enter, if applicable, any rental charges.
- Line 13 Enter, if applicable, any drilling or opening fees.
- Line 14 Enter the total bank charges.

Instructions for Page 2

You may photo copy page 2 of this report if additional space is needed. A computer printout is acceptable in place of section II of this report. The printout must contain the same information in the same format as this report. If a printout is used, the print size must be at least a 10-point font. Attach a copy of the printout to page 1 of this report.

Section II:

Please provide a detailed description of each item being reported.

NAUPA Adopted Standard Property Type Codes

The following codes have been endorsed by NAUPA for use by each state in the development of standard reporting; however, some states do not currently accept these codes. The State of Montana's agreement to utilize these codes is a step toward standardization in unclaimed property reporting.

Safe Deposit Boxes and Safekeeping	
Code	Description
SD01	Safe Deposit Box Contents
SD02	Other Safekeeping
SD03	Other Tangible property
SD04	Unclaimed Loan Collateral
SD05	Liquidated Asset