

EXAMPLE – FOR ILLUSTRATIVE PURPOSES ONLY

Refer to the Form 8300 Instructions at <http://www.irs.gov/pub/irs-pdf/f8300.pdf> or contact your Campus Compliance Officer or the Controller's Office at 865-974-2493 if you have questions on completing the form.

Scenario: On August 15, 2010, Jane Smith pays \$5,000 in cash to the Bursar's Office. The payment is to be applied to the account of her son, Joseph Smith, a UT student. The unpaid charges in Joseph's account prior to the \$5,000 payment included tuition, room, board and fees totaling \$18,000 for the fall semester 2010. On August 31, 2010, Jane pays an additional \$6,000 in cash to be applied to her son's account. The final payment of \$7,000 in cash was paid by Jane on September 25.

August 15, 2010 – payment of \$5,000 cash does not trigger reporting requirement

August 31, 2010 – payment of additional \$6,000 cash must be reported on Form 8300 along with the \$5,000

September 25, 2010 – final payment of \$7,000 cash would not be reported on Form 8300 since it doesn't exceed \$10,000

Completing Form 8300:

Part I

To complete Part I, the person who receives the payment must obtain the payer's name, address, taxpayer identification number (i.e., social security number or individual taxpayer identification number), date of birth and occupation. In addition, the payer's identity must be verified, for example, by a photo driver's license. This identity verification must be documented in Part I of the form.

Part II

In this example, because the payment is made by one person (Jane Smith) on behalf of another person (Joseph Smith), Part II must be completed. The information required by Part II may be in the University's records or may need to be provided by the payer. Please note: If the payer is conducting the transaction on his/her own behalf, Part II need not be completed. In this example, if Jane Smith were a student making a payment on her own student account, Part II would not need to be completed.

Part III

The information required to complete Part III must be determined at the time of the transaction (e.g., form of "cash" payment, amount in \$100 bills or higher) or obtained from the University's records (e.g., total price and type of transaction).

Part V

The address of the actual physical location where the cash was received (not a central University address) is required to be disclosed. Form 8300 must be reviewed, signed and dated by the department supervisor or other person who authorized the transaction.

Note:

Page two (2) of Form 8300 must be completed when there are multiple parties to the transaction. Part I on page two (2) must be completed if the reportable payment is received from more than one person. Part II on page two (2) must be completed if the reportable payment is made on behalf of more than one person.

EXAMPLE - FOR ILLUSTRATION PURPOSES ONLY

IRS Form 8300

(Rev. March 2008)
OMB No. 1545-0092

Department of the Treasury
Internal Revenue Service

**Report of Cash Payments Over \$10,000
Received in a Trade or Business**

▶ See instructions for definition of cash.

▶ Use this form for transactions occurring after March 31, 2008. Do not use prior versions after this date.

For Privacy Act and Paperwork Reduction Act Notice, see page 5.

FinCEN Form 8300

(Rev. March 2008)
OMB No. 1506-0018
Department of the Treasury
Financial Crimes
Enforcement Network

1 Check appropriate box(es) if: a Amends prior report; b Suspicious transaction.

Part I Identity of Individual From Whom the Cash Was Received

2 If more than one individual is involved, check here and see instructions

3 Last name Smith		4 First name Jane		5 M.I. J	6 Taxpayer identification number 0 1 2 3 4 5 6 7 8							
7 Address (number, street, and apt. or suite no.) 1 Main Street						8 Date of birth (see instructions) 1 2 3 1 1 9 4 5						
9 City Anywhere			10 State T N	11 ZIP code 37921	12 Country (if not U.S.)			13 Occupation, profession, or business Teacher				
14 Identifying document (ID)		a Describe ID ▶ Driver's License				b Issued by ▶ Tennessee						
		c Number ▶ 012345678										

Part II Person on Whose Behalf This Transaction Was Conducted

15 If this transaction was conducted on behalf of more than one person, check here and see instructions

16 Individual's last name or Organization's name Smith				17 First name Joseph		18 M.I. J	19 Taxpayer identification number 1 2 3 4 5 6 7 8 9							
20 Doing business as (DBA) name (see instructions)						Employer identification number								
21 Address (number, street, and apt. or suite no.) 1 Main Street						22 Occupation, profession, or business Student								
23 City Anywhere			24 State T N	25 ZIP code 37921	26 Country (if not U.S.)									
27 Alien identification (ID)		a Describe ID ▶				b Issued by ▶								
		c Number ▶												

Part III Description of Transaction and Method of Payment

28 Date cash received 0 8 3 1 2 0 1 0		29 Total cash received \$ 11000 .00		30 If cash was received in more than one payment, check here <input checked="" type="checkbox"/>		31 Total price if different from item 29 \$ 18000 .00	
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32 Amount of cash received (in U.S. dollar equivalent) (must equal item 29) (see instructions):

a U.S. currency	\$ 11000 .00	(Amount in \$100 bills or higher \$ 11000 .00)
b Foreign currency	\$.00	(Country ▶)
c Cashier's check(s)	\$.00	Issuer's name(s) and serial number(s) of the monetary instrument(s) ▶
d Money order(s)	\$.00	
e Bank draft(s)	\$.00	
f Traveler's check(s)	\$.00	

33 Type of transaction				34 Specific description of property or service shown in 33. Give serial or registration number, address, docket number, etc. ▶ Tuition, room, board and fees - fall semester 2010 Educational services			
a <input type="checkbox"/> Personal property purchased	f <input type="checkbox"/> Debt obligations paid						
b <input type="checkbox"/> Real property purchased	g <input type="checkbox"/> Exchange of cash						
c <input type="checkbox"/> Personal services provided	h <input type="checkbox"/> Escrow or trust funds						
d <input type="checkbox"/> Business services provided	i <input type="checkbox"/> Bail received by court clerks						
e <input type="checkbox"/> Intangible property purchased	j <input checked="" type="checkbox"/> Other (specify in item 34) ▶						

Part IV Business That Received Cash

35 Name of business that received cash The University of Tennessee						36 Employer identification number U n i v : i d #					
37 Address (number, street, and apt. or suite no.) 211 Student Services Building						Social security number					
38 City Knoxville			39 State T N	40 ZIP code 37996	41 Nature of your business Education						

42 Under penalties of perjury, I declare that to the best of my knowledge the information I have furnished above is true, correct, and complete.

Signature ▶ _____ Title ▶ **Director**
Authorized official

43 Date of signature 0 8 3 1 2 0 1 0		44 Type or print name of contact person John Jones				45 Contact telephone number (865) 974-xxxx	
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