

International Boycott Report

For taxable year beginning 19.....
 and ending 19.....
 ► **Controlled groups, see specific instructions.**

**To be Filed
 in Duplicate**
 (See Instruction B)

Name _____ Taxpayer identifying number _____

Number and Street _____

City or town, State and ZIP code _____

Address of Service Center where your tax return is filed _____

Type of person filing this form (check one):
 Individual Partnership Corporation Trust Estate Other

1 If an individual, enter adjusted gross income from your tax return (see instructions)

2 Partnerships and corporations:
(a) If a partnership.—Enter the name and taxpayer identifying number of each partner.
(b) If a corporation.—Enter the name and employer identification number of all members of the controlled group (as defined in section 993(a)(3)). If a consolidated return was filed, do not list members included in the consolidated return; instead, attach a copy of Form 851. List all other members of the controlled group not included in the consolidated return.

Name	Taxpayer identifying number

If necessary, attach additional sheets and check box

Code	Description
(c) Enter principal business activity code and description (see instructions)	
(d) DISCs.—Enter principal product or service code and description (see instructions)	

3 Partnerships.—The following information must be submitted by each partnership filing Form 5713:

(a) Enter total assets of the partnership (Form 1065, page 1, item C)

(b) Enter ordinary income of the partnership (Form 1065, line 26)

4 Corporations.—The following information must be submitted by every corporation filing Form 5713:

(a) Type of form filed (Form 1120, 1120F, 1120L, 1120M, etc.)

(b) Common parent election (see instructions)—

(1) Name of common parent ►

(2) Employer identification number of common parent

(3) Taxable year of common parent beginning 19..... and ending 19.....

(c) Corporations filing this form enter—

(1) Total assets (see instructions)

(2) Taxable income before net operating loss and special deductions (see instructions)

5 Estate or trust.—Enter total income (Form 1041, line 9)

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which the preparer has any knowledge.

Date	Signature	Date	Signature of individual or firm preparing the report
Title		Preparer's address	

6 The following information must be submitted by every person filing Form 5713 (see specific instructions):

	Yes	No
(a) Are you a United States shareholder (as defined in section 951(b)) of any foreign corporation that had reportable operations under section 999(a)?	<input type="checkbox"/>	<input type="checkbox"/>
(b) If the answer to (a) is "Yes," is any foreign corporation a controlled foreign corporation (as defined in section 957(a))?	<input type="checkbox"/>	<input type="checkbox"/>
(c) Do you own any stock of a DISC?	<input type="checkbox"/>	<input type="checkbox"/>
(d) Do you claim any foreign tax credit?	<input type="checkbox"/>	<input type="checkbox"/>
(e) Do you control (within the meaning of section 304(c)) any corporation (other than a corporation included in this report) that has reportable operations under section 999(a)? If "Yes," did the corporation controlled by you participate in or cooperate with an international boycott at any time during its taxable year that ends with or within your taxable year?	<input type="checkbox"/>	<input type="checkbox"/>
(f) Are you controlled (within the meaning of section 304(c)) by any person (other than a person included in this report) that has reportable operations under section 999(a)? If "Yes," did the person controlling you participate in or cooperate with an international boycott at any time during its taxable year that ends with or within your taxable year?	<input type="checkbox"/>	<input type="checkbox"/>
(g) Are you treated under section 671 as the owner of a trust that has reportable operations under section 999(a)?	<input type="checkbox"/>	<input type="checkbox"/>
(h) Are you a partner in a partnership that has reportable operations under section 999(a)?	<input type="checkbox"/>	<input type="checkbox"/>

Part I Operations in or Related to a Boycotting Country (See Instructions)

7 Boycott of Israel.—Did you have any operations in or related to any country (or with the government, a company or a national of such country) associated in carrying out the boycott of Israel which is on the list maintained by the Secretary of the Treasury under section 999(a)(3) (see Instruction C)?

	Yes	No
<p>If "Yes," enter name of the country(ies), taxpayer identifying number of person(s) having operations, principal business activity code, and a description of the principal business activity. If necessary, attach additional sheets using the exact format and check box ▶ <input type="checkbox"/></p>	<input type="checkbox"/>	<input type="checkbox"/>

Name of country (1)	Taxpayer identifying number of person(s) having operations (2)	Principal business activity	
		Code (3)	Description (4)
(a)			
(b)			
(c)			
(d)			
(e)			
(f)			
(g)			
(h)			
(i)			
(j)			
(k)			
(l)			
(m)			
(n)			
(o)			

8 Non-listed countries boycotting Israel.—Did you have operations in any non-listed country which you know or have reason to know requires participation in or cooperation with an international boycott directed against Israel?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

If "Yes," enter the country(ies), taxpayer identifying number of person(s) having operations, the principal business activity code, and a description of the principal business activity. If necessary, attach additional sheets using the exact format and check box

Name of country (1)	Taxpayer identifying number of person(s) having operations (2)	Principal business activity	
		Code (3)	Description (4)
(a)			
(b)			
(c)			
(d)			
(e)			
(f)			
(g)			
(h)			
(i)			
(j)			
(k)			
(l)			
(m)			
(n)			
(o)			

9 Boycotts other than the boycott of Israel.—Did you have operations in any other country which you know or have reason to know requires participation in or cooperation with an international boycott other than the boycott of Israel?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

If "Yes," enter the country(ies), taxpayer identifying number of person(s) having operations, the principal business activity code, and a description of the principal business activity. If necessary, attach additional sheets using the exact format and check box

Name of country (1)	Taxpayer identifying number of person(s) having operations (2)	Principal business activity	
		Code (3)	Description (4)
(a)			
(b)			
(c)			
(d)			
(e)			
(f)			
(g)			
(h)			
(i)			
(j)			
(k)			
(l)			
(m)			
(n)			
(o)			

10 Were you requested to participate in or cooperate with an international boycott?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

If "Yes," attach a copy (in English) of any and all such requests received during your taxable year. If the request was in a form other than a written request, attach a separate sheet explaining the nature and form of any and all such requests. (See Instructions.)

11 Did you, in fact, participate in or cooperate with an international boycott?

If "Yes," attach a copy (in English) of any and all boycott clauses agreed to, and attach a general statement of the agreement. If the agreement was in a form other than a written agreement, attach a separate sheet explaining the nature and form of any and all such agreements. (See Instructions.)

Note: If the answers to questions 10 and 11 are "No," you must file this form, but you do not have to complete Part II; nor must you file Schedules A, B, or C (Form 5713).

Part II Requests for and Acts of Participation in or Cooperation with an International Boycott

12 (a) Did you receive requests to enter into, or, in fact, enter into any agreement:

Type of participation or cooperation	Requests		Agreements	
	Yes	No	Yes	No
(1) As a condition of doing business directly or indirectly within a country or with the government, a company, or a national of a country to—				
(i) Refrain from doing business with or in a country which is the object of an international boycott or with the government, companies or nationals of that country?				
(ii) Refrain from doing business with any United States person engaged in trade in a country which is the object of an international boycott or with the government, companies, or nationals of that country?				
(iii) Refrain from doing business with any company whose ownership or management is made up, all or in part, of individuals of a particular nationality, race, or religion, or to remove (or refrain from selecting) corporate directors who are individuals of a particular nationality, race, or religion?				
(iv) Refrain from employing individuals of a particular nationality, race, or religion?				
(2) As a condition of the sale of a product to the government, a company, or a national of a country, to refrain from shipping or insuring products on a carrier owned, leased or operated by a person who does not participate in or cooperate with an international boycott?				

12 (b) Requests and agreements.—If the answer to any part of 12(a) is "Yes," indicate below: the country, the taxpayer identifying number, principal business activity code, description of the principal business activity, and the number and the number code indicating the type of participation or cooperation requested or agreed to. (See Instructions.) If necessary, attach additional sheets using the exact format and check box

Name of country (1)	Taxpayer identifying number of person receiving the request or entering into the agreement (2)	Principal business activity		Type of cooperation or participation			
		Code (3)	Description (4)	Requested		Agreed	
				Number (5)	Code (6)	Number (7)	Code (8)
(a)							
(b)							
(c)							
(d)							
(e)							
(f)							
(g)							
(h)							
(i)							
(j)							
(k)							
(l)							
(m)							
(n)							
(o)							
(p)							