Uniform Residential Loan Application

This application is designed to be completed by the applicant(s) with the Lender's assistance. Applicants should complete this form as "Borrower" or "Co-Borrower", as applicable. Co-Borrower information must also be provided (and the appropriate box checked) when The income or assets of a person other than the "Borrower" (including the Borrower's spouse) will be used as a basis for loan qualification or The income or assets of the Borrower's spouse or other person who has community property rights pursuant to state law will not be used as a basis for loan qualification, but his or her liabilities must be considered because the spouse or other person has community property rights pursuant to applicable law and Borrower resides in a community property state, the security property is located in a community property state, or the Borrower is relying on other property located in a community property state as a basis for repayment of the loan. If this is an application for joint credit, Borrower and Co-Borrower each agree that we intend to apply for joint credit (sign below): Borrower Co-Borrower I. TYPE OF MORTGAGE AND TERMS OF LOAN Lender Case Number Agency Case Number Mortgage $\exists \, \mathsf{VA}$ Conventional Other (explain): Applied for: ∃FHA USDA/Rural Housing Service Amount Interest Rate No. of Months **Amortization Type:** Fixed Rate Other (explain): \$ 0/ ARM (type): \square GPM II. PROPERTY INFORMATION AND PURPOSE OF LOAN Subject Property Address (street, city, state, & ZIP) No. of Units Legal Description of Subject Property (attach description if necessary) Year Built Purpose of Loan Purchase Construction Property will be-Other (explain): Primary Residence Secondary Residence Investment Refinance Construction-Permanent Complete this line if construction or construction-permanent loan. Total (a+b) Year Lot **Original Cost Amount Existing Liens** (a) Present Value of Lot (b) Cost of Improvements Acquired \$ Complete this line if this is a refinance loan. Purpose of Refinance **Amount Existing Liens** Describe Improvements Year **Original Cost** made to be made Acquired Cost: \$ Title will be held in what Name(s) Manner in which Title will be held Estate will be held in: Fee Simple Leasehold(show expiration date) Source of Down Payment, Settlement Charges and/or Subordinate Financing (explain) **III. BORROWER INFORMATION Borrower** Co-Borrower Borrower's Name (include Jr. or Sr. if applicable) Co-Borrower's Name (include Jr. or Sr. if applicable) Social Security Number Home Phone (incl. area code) DOB (mm/dd/yyyy) Yrs. School Social Security Number | Home Phone (incl. area code) DOB (mm/dd/yyyy) Yrs. School Dependents (not listed by Dependents (not listed by Married (includes registered domestic partners) Married (includes registered domestic partners) Co-Borrowér) Borrower) Unmarried (includes single, divorced, widowed) No Unmarried (includes single, divorced, widowed) No Separated Separated Ages Ages Present Address (street, city, state, ZIP/ country) Own Present Address (street, city, state, ZIP/ country) Mailing Address, if different from Present Address Mailing Address, if different from Present Address If residing at present address for less than two years, complete the following: Former Address (street, city, state, ZIP) Own Rent No. Yrs. Former Address (street, city, state, ZIP) Own Rent No. Yrs. Own Rent Former Address (street, city, state, ZIP) Own Rent No. Yrs. Former Address (street, city, state, ZIP) No. Yrs. Borrowei Co-Borrower

Borrower			IV. EMPL	OYMENT IN	NFORMATI	ON	ower			
Name & Address of En	me & Address of Employer Self Employed				Name & A	Name & Address of Employer			Yrs. on this job	
			Yrs. emplo	yed in this					Yrs. employed in this	
			line of work	d/profession					line of work/profession	
Position/Title/Type of B	Business	Business	 Phone (incl.	area code)	Position/T	itle/Type of Business		Business	 Phone (incl. area code)	
If employed in curren	t position for less th	l nan two yea	rs or if curr	rently empl	oyed in mo	re than one position, c	omplete	the followi	ng:	
Name & Address of En	nployer Self E	Employed	Dates (fron	n-to)	Name & A	Address of Employer	Self	Employed	Dates (from-to)	
			Monthly Inc	come					Monthly Income	
			\$						\$	
Position/Title/Type of B	Business	Business	Phone (incl.	area code)	Position/T	itle/Type of Business		Business	Phone (incl. area code)	
Name & Address of En	nnlover Self F	L Employed	Dates (fron	n-to)	Name & A	Address of Employer	Self	Employed	Dates (from-to)	
ramo a radioco oi En		Imployed	Batos (IIIon	10)				Lilipioyed	Bates (ii siii to)	
			Monthly Inc	come					Monthly Income	
			\$	-51115					\$	
Position/Title/Type of B	Business	Business	Phone (incl.	area code)	Position/T	itle/Type of Business		Business	Phone (incl. area code)	
Name & Address of En	nnlover		Datas (fram	- 4-1	Name & A	Address of Employer			Datas (fram ta)	
Name & Address of Life	∏ Self E	Employed	Dates (fron	n-to)	INAILIE & F	duress of Employer	∐ Seiī	Employed	Dates (from-to)	
			Monthly Inc	come					Monthly Income	
D - 141 - 1714 - 171 - 1		D	\$		D :4: /T	"H - /T f D i		D:	\$ Db(in-al	
Position/Title/Type of B	susiness	Business	Phone (incl.	area code)	Position/ I	itle/Type of Business		Business	Phone (incl. area code)	
Name & Address of En	nployer Self E	I Employed	Dates (fron	n-to)	Name & A	Address of Employer	Self	Employed	Dates (from-to)	
	. ,			,				,,		
			Monthly Inc	come					Monthly Income	
			\$						\$	
Position/Title/Type of B	Business	Business	Phone (incl.	area code)	Position/T	itle/Type of Business		Business	Phone (incl. area code)	
	V MON	THI Y INCO	ME AND CO	MRINED H	OUSING F	XPENSE INFORMATIO	N			
Gross						Combined Monthly				
Monthly Income	Borrower		orrower		tal	Housing Expense		esent	Proposed	
Base Empl. Income*	\$	\$		\$		Rent	\$			
Overtime						First Mortgage (P&I)			\$	
Bonuses						Other Financing (P&I)				
Commissions Dividends/Interest						Hazard Insurance Real Estate Taxes				
Net Rental Income						Mortgage Insurance				
Other (before completing,						Homeowner Assn. Dues				
see the notice in "describe other income," below)						Other:				
Total	\$	\$		\$		Total	\$		\$	
* Self Employed B	Borrower(s) may be re	quired to pr	ovide additio	nal docume	entation suc	h as tax returns and finar	ncial state	ments.	<u> </u>	
Describe Other Income						ome need not be revealed have it considered for re		s Ioan.		
B/C									Monthly Amount	
5,5									\$	
									+	
1									•	
						Borrower	_			

VI. ASSETS AND	LIABILITIES

This Statement and any applicable supporting schedules may be completed jointly by both married and unmarried Co-borrowers if their assets and liabilities are sufficiently joined
so that the Statement can be meaningfully and fairly presented on a combined basis; otherwise, separate Statements and Schedules are required. If the Co-Borrower section
was completed about a non-applicant spouse or other person, this Statement and supporting schedules must be completed by that spouse or other person also.

Description ASSETS	N	Cash /larket	or Value	debts, included	ding automobil	e loans,	ist the creditor's na revolving charge a	accounts, real e	state loans	s, alimo	ny, child suppor
Cash deposit toward purchase held by:	\$			stock pledge	es, etc. Use co	ntinuatio	on sheet, if necess wned or upon refir	ary. Indicate by	(*) those I	iabilities	which will be
				LIABIL		Monthly Pa			paid Balance		
List checking and savings account				Name and	address of C	ompany	у	\$ Payment		\$	
Name and address of Bank, S&L, or	Credit	Union									
				Acct. no.							
Acct. no.	\$			Name and	address of C	ompany	У	\$ Payment	/Months	\$	
Name and address of Bank, S&L, or	Credit	Union		Acct. no.				_			
Acct. no.	\$				address of C	ompany	У	\$ Payment	/Months	\$	
Name and address of Bank, S&L, or		Union		\dashv							
Traine and address of Bank, Oct., or	orcuit	Official									
				Acct. no.	address of C	omnanı	и.	\$ Payment	Months	\$	
Acct. no.	\$			- Ivallie allu	address or O	Jiiipaii	y	ψ Fayineiii	rivioritris	Ψ	
Stocks & Bonds (Company name/number description)	\$										
				Acct. no.					/ * • · · ·		
				Name and	address of C	ompany	У	\$ Payment	Months	\$	
Life insurance net cash value	\$										
Face amount: \$ Subtotal Liquid Assets	\$										
Real estate owned (enter market value				Acct. no. Name and	Acct. no. Name and address of Company				/Months	\$	
from schedule of real estate owned)	·						,			ľ	
Vested interest in retirement fund	\$				_						
Net worth of business(es) owned (attach financial statement)	\$			Acct. no.			+				
Automobiles owned (make and year)	\$			Alimony/Ch Maintenand	nild Support/S ce Payments	eparate Owed t	e o:	\$			
Other Assets (itemize) \$		Job-Related	d Expense (ch	e, union dues, etc.	.) \$						
				Total Mont	thly Paymon		 		1		
			Net Worth	Total Monthly Payments Net Worth => \$		 	Total Liabilities b.		S		
Total Assets a. Schedule of Real Estate Owned (if add	\$ litional	l pro==	ortios see	(a minus b)				TOTAL FIAD		<u>L'</u>	
Property Address (enter S if sold, PS sale or R if rental being held for incor	if pen		Type of Property	Present	Amount	of	Gross Rental Income	Mortgage Payments	Insura Mainter Taxes &	nance,	Net Rental Incom
·			, ,						•		r.
				\$	\$		\$	\$	\$		\$
		+	Totals	\$	\$		\$	\$	\$		\$
List any additional names under which Alternate Name	credit	t has p	l		nd indicate ap	propria	1	s) and account	<u> </u>		Ф

VII. D	ETAILS OF TRANSAC	TION			VIII. DECLARATION	<u>S</u>				
a. Purchase pri	ce	\$	If you answer "	Yes" to any questic	ons a through i,	ı	Borrow	er Co-	-Borr	ower
b. Alterations, in	mprovements, repairs		please use con	tinuation sheet for	explanation.		Yes N	o Y	es N	No
c. Land (if acqu	ired separately)		a. Are there any	outstanding judgme	outstanding judgments against you?					
	ncl. debts to be paid off)		b. Have you bee	en declared bankrup	t within the past 7 years?] [] [
e. Estimated pr	. ,				d upon or given title or deed in	lieu thereof] [] [
f. Estimated cle	•		in the last 7 y					۔ ا	- r	_
			d. Are you a par	•	18 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	16 12		<u> </u>	_	_
g. PMI, MIP, Fu					en obligated on any loan which of foreclosure, or judgment?	resulted in	шь	┚┃┖		
	Borrower will pay)				mortgage loans, SBA loans, home	e improvement				
Total costs (a Subordinate	add items a through h)		obligation, bond, o	r loan guarantee. If "\	(mobile) home loans, any morty	te, name, and				
	losing costs paid by Seller				er, if any, and reasons for the acti			- -	- r	_
I. Other Credits			loan, mortgaç	ge, financial obligatio	default on any Federal debt on, bond, or loan guarantee? he preceding question.	or any other] _		
			g. Are you oblig	ated to pay alimony,	child support, or separate ma	intenance?	ПГ	٦١г	٦г	\neg
				the down payment b			$\overline{\Box}$	ᆡᅣ	īī	ラー
			i. Are you a co-	maker or endorser o	on a note?		\Box	ᆡᅣ	īī	=
			i Arayou all	C oitizon?				- -		_
			j. Are you a U.		nn?		H	 	⊦	╡
				manent resident alie		lanas?		: <u> </u> -	_	╣
m. Loan amoun	t (exclude PMI, MIP,			ete question m below.	operty as your primary resic	ierice r		-		
Funding Fee	financed)			·	est in a property in the last thr	•] [] [
o. Loan amoun	unding Fee financed			e of property did you ome (SH), or investr	own-principal residence (PR), nent property (IP)?					
	Borrower (subtract j, k, I &				ome-solely by yourself (S), or jointly with another person (0)2				
o from i)		IV. 401/1				<u> </u>				_
	signed specifically represents to	•	NOWLEDGEME							
I am obligated to a Loan; (8) in the event have relating to suc account may be tration or warranty, ex my "electronic sign containing a facsim Acknowledgement contained in this a or a consumer rep Right to Receive Creditor a written on this application If you would like a	Copy of Appraisal I/We have request at the mailing address, or I/we withdraw this applicate copy of the appraisal report, or	information provided in particular to the common provided in the com	in this application if a part, the Lender, its se tition to one or more or; (10) neither Lender condition or value of deral and/or state lave and valid as if a part as that any owner of ing to the Loan, for a of the appraisal repled. Creditor must her	ny of the material factricers, successors, insumer credit reportinor its agents, broker the property; and (11) ws (excluding audio aper version of this approper the Loan, its serviciany legitimate purporort used in connectical from us no later the control of th	its that I have represented here or assigns may, in addition to a rog agencies; (9) ownership of the strength	ein should chai ny other rights te Loan and/or rs or assigns h tition as an "ele- ccsimile transm ng my original" may verify or ing a source r dit. To obtain notifies me/us	nge prio and rer adminis as mad ctronic r ilssion c written s reverify amed i a copy, about t	r to clo nedies tration of e any re ecord" of this a signatur / any ir n this a l/we m he action	osing of that if of the epression conta applicate. Information applicate ap	of the it may be Loan senta- aining cation cation cation
Borrower's Sign	ature		Date	Co-Borrower's S	ignature		Dat	е		
X	V INI	EODMATION EC	OR GOVERNME		C DUDDOSES					
The following info	rmation is requested by the F					lender's com	nliance	with a	aual	credit
opportunity, fair ho not discriminate ei may check more to observation and so material to assure	busing and home mortgage distribution the basis of this information one designation. If you dourname if you have made this that the disclosures satisfy all	sclosure laws. You nation, or on whethe o not furnish ethnicit application in perso requirements to wh	are not required to fur you choose to furni y, race, or sex, unde n. If you do not wish	rnish this informatio sh it. If you furnish t r Federal regulations to furnish the inforn ject under applicable	n, but are encouraged to do so he information, please provides, this lender is required to not nation, please check the box be e state law for the particular ty	b. The law probe both ethnicity e the information below. (Lende pe of loan app	ovides to and radion on to must r	hat a Lece. For he basiness	ender r race is of v	er may e, you visual
BORROWER	I do not wish to furnish thi	_			I do not wish to furnish thi					
Ethnicity:	Hispanic or Latino	Not Hispanic or L	_	Ethnicity:	Hispanic or Latino	Not Hispar				
Race:	American Indian or Alaska Native Native Hawaiian or Other	Asian	」Black or African American ☑White	Race:		Asian		Black o African White		rican
0	_		_ vvilite	0		_	ei 🗀 '	VIIILE		
Sex:	Female	Male		Sex:	Female	Male				
This information w In a face-to-fa In a telephone Loan Originator's	ace interview [e interview [and submitted by fax and submitted via e-		Date					
X	ga.a									
	Name (print or type)		Loan Originator	Identifier	Loan Originator's Phone	Number (incl	uding a	rea coo	de)	
<u>. </u>	State Bank 00 (F) 316-721-7800		Loan Origination	Company Identifier	Loan Origination Compa P.O. Box 75009 Wichita, KS 67275-	0009				
Uniform Posidontis	al Loan Application					Eannio Mao E	orm 100	2 7/05	i (row	6/001

Demographic Information Addendum. This section asks about your ethnicity, sex, and race. **Demographic Information of Borrower** The purpose of collecting this information is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, federal law requires that we ask applicants for their demographic information (ethnicity, sex, and race) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more designations for "Ethnicity" and one or more designations for "Race." The law provides that we may not discriminate on the basis of this information, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, sex, and race on the basis of visual observation or surname. The law also provides that we may not discriminate on the basis of age or marital status information you provide in this application. If you do not wish to provide some or all of this information, please check below. Ethnicity: Check one or more Race: Check one or more American Indian or Alaska Native - Print name of enrolled or ☐ Hispanic or Latino Mexican ☐ Puerto Rican ☐ Cuban principal tribe: Other Hispanic or Latino - Print origin: Asian Asian Indian Chinese Filipino

For example: Argentinean, Colombian, Dominican,	☐ Japanese ☐ Korean ☐ Vietnamese
Nicaraguan, Salvadoran, Spaniard, and so on.	Other Asian - Print Race:
☐ Not Hispanic or Latino	For example: Hmong, Laotian, Thai, Pakistani, Cambodian,
☐ I do not wish to provide this information	and so on.
	Black or African American
Sex	Native Hawaiian or Other Pacific Islander
Female	☐ Native Hawaiian ☐ Guamanian or Chamorro ☐ Samoan
Male	Other Pacific Islander - <i>Print Race:</i>
☐ I do not wish to provide this information	For example: Fijian, Tongan, and so on.
	White
	I do not wish to provide this information
To Be Completed by Financial Institution (for application taken i	n person):
Was the ethnicity of the Borrower collected on the basis of visual obs	ervation or surname? O NO O YES
Was the sex of the Borrower collected on the basis of visual observa-	
Was the race of the Borrower collected on the basis of visual observa	ation or surname? O NO O YES
	per
The Demographic Information was provided through:	
O Face-to-Face Interview (includes Electronic Media w/ Video Comp	onent) O Telephone Interview O Fax or Mail O Email or Internet

Demographic Information Addendum. This section asks about your ethnicity, sex, and race. **Demographic Information of Borrower** The purpose of collecting this information is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, federal law requires that we ask applicants for their demographic information (ethnicity, sex, and race) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more designations for "Ethnicity" and one or more designations for "Race." The law provides that we may not discriminate on the basis of this information, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, sex, and race on the basis of visual observation or surname. The law also provides that we may not discriminate on the basis of age or marital status information you provide in this application. If you do not wish to provide some or all of this information, please check below. Ethnicity: Check one or more Race: Check one or more American Indian or Alaska Native - Print name of enrolled or ☐ Hispanic or Latino Mexican ☐ Puerto Rican ☐ Cuban principal tribe: Other Hispanic or Latino - Print origin: Asian Asian Indian Chinese Filipino

For example: Argentinean, Colombian, Dominican,	☐ Japanese ☐ Korean ☐ Vietnamese
Nicaraguan, Salvadoran, Spaniard, and so on.	Other Asian - Print Race:
☐ Not Hispanic or Latino	For example: Hmong, Laotian, Thai, Pakistani, Cambodian,
☐ I do not wish to provide this information	and so on.
	Black or African American
Sex	Native Hawaiian or Other Pacific Islander
Female	☐ Native Hawaiian ☐ Guamanian or Chamorro ☐ Samoan
Male	Other Pacific Islander - <i>Print Race:</i>
☐ I do not wish to provide this information	For example: Fijian, Tongan, and so on.
	White
	I do not wish to provide this information
To Be Completed by Financial Institution (for application taken i	n person):
Was the ethnicity of the Borrower collected on the basis of visual obs	ervation or surname? O NO O YES
Was the sex of the Borrower collected on the basis of visual observa-	
Was the race of the Borrower collected on the basis of visual observa	ation or surname? O NO O YES
	per
The Demographic Information was provided through:	
O Face-to-Face Interview (includes Electronic Media w/ Video Comp	onent) O Telephone Interview O Fax or Mail O Email or Internet

Form **4506-T**

(July 2017) Department of the Treasury Internal Revenue Service

Request for Transcript of Tax Return

▶ Do not sign this form unless applicable lines have been completed.
 ▶ Request may be rejected if the form is incomplete or illegible.

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using

▶ For more information about Form 4506-T. visit www.irs.gov/form4506t.

OMB No. 1545-1872

Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return, individual taxpayer identificatio number, or employer identification number (see instructions)
la If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return
Current name, address (including apt., room, or suite no.), city, state, and ZIP	code (See instructions)
Previous address shown on the last return filed if different from line 3 (See	instructions)
If the transcript or tax information is to be mailed to a third party (such as and telephone number.	a mortgage company), enter the third party's name, address,
Caution: If the tax transcript is being mailed to a third party, ensure that you have filled in these lines. Completing these steps helps to protect your privace on line 5, the IRS has no control over what the third party does with the information ranscript information, you can specify this limitation in your written agreement with	y. Once the IRS discloses your tax transcript to the third party listed on. If you would like to limit the third party's authority to disclose your
Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) a number per request. ►	nd check the appropriate box below. Enter only one tax form
a Return Transcript, which includes most of the line items of a tax return a changes made to the account after the return is processed. Transcripts are Form 1065, Form 1120, Form 1120-A, Form 1120-H, Form 1120-L, and Forn and returns processed during the prior 3 processing years. Most requests will	e only available for the following returns: Form 1040 series, m 1120S. Return transcripts are available for the current year
b Account Transcript, which contains information on the financial status of the assessments, and adjustments made by you or the IRS after the return was found and estimated tax payments. Account transcripts are available for most returns	, , ,
c Record of Account, which provides the most detailed information as it is a Transcript. Available for current year and 3 prior tax years. Most requests will be	•
Verification of Nonfiling, which is proof from the IRS that you did not file a June 15th. There are no availability restrictions on prior year requests. Most red	return for the year. Current year requests are only available after quests will be processed within 10 business days
Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. these information returns. State or local information is not included with the transcript information for up to 10 years. Information for the current year is gene example, W-2 information for 2011, filed in 2012, will likely not be available fror purposes, you should contact the Social Security Administration at 1-800-772-12	rally not available until the year after it is filed with the IRS. For n the IRS until 2013. If you need W-2 information for retirement
Caution: If you need a copy of Form W-2 or Form 1099, you should first contact with your return, you must use Form 4506 and request a copy of your return,	the payer. To get a copy of the Form W-2 or Form 1099 filed which includes all attachments.
Year or period requested. Enter the ending date of the year or period, using years or periods, you must attach another Form 4506-T. For requests relating each quarter or tax period separately.	g the mm/dd/yyyy format. If you are requesting more than four g to quarterly tax returns, such as Form 941, you must enter
Caution: Do not sign this form unless all applicable lines have been completed.	
Signature of taxpayer(s). I declare that I am either the taxpayer whose name requested. If the request applies to a joint return, at least one spouse must sign member, guardian, tax matters partner, executor, receiver, administrator, trusted 4506-T on behalf of the taxpayer. Note. For transcripts being sent to a third part	. If signed by a corporate officer, 1 percent or more shareholder, partner, manage, or party other than the taxpayer. I certify that I have the authority to execute F ty, this form must be received within 120 days of signature date.
Signatory attests that he/she has read the attestation clause and upon that he/she has the authority to sign the Form 4506-T. See instructions	
Signature (see instructions)	Date
Here Title (if line 1a above is a corporation, partnership, estate, or trust)	
ī.	I .

Form 4506-T (Rev. 07-2017) Page 2

Section references are to the Internal Revenue Code unless otherwise noted

Future Developments

For the latest information about Form 4506-T and its instructions, go to www.irs.gov/form4506t. Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

General Instructions

CAUTION. Do not sign this form unless all applicable lines have been completed.

Purpose of form. Use Form 4506-T to request tax return information. You can also designate (on line 5) a third party to receive the information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request

Note. If you are unsure of which type of transcript you need, request the Record of Account, as it provides the most detailed information.

Tip. Use Form 4506, Request for Copy of Tax Return, to request copies of tax returns.

Automated transcript request. You can guickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript ..." under "Tools" or call 1-800-908-9946.

Where to file. Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart below shows two different addresses, send your request to the address based on the address of your most

Chart for individual transcripts (Form 1040 series and Form W-2 and Form 1099)

If you filed an individual return and lived in:

Mail or fax to:

Alabama, Kentucky Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Nothern Mariana Islands the U.S. Virgin Islands, or A.P.O. or F.P.O. address

Internal Revenue Service RAIVS Team Stop 6716 AUSC Austin, TX 73301

855-587-9604

Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico. North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming

Internal Revenue Service RAIVS Team Stop 37106 Fresno, CA 93888

855-800-8105

Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West

Virginia

Internal Revenue Service **RAIVS Team** Stop 6705 P-6 Kansas City, MO 64999

855-821-0094

Chart for all other transcripts

If you lived in or your business was in:

Mail or fax to:

Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address

Internal Revenue Service RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409

855-298-1145

Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin

Internal Revenue Service RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250

855-800-8015

Line 1b. Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

Line 3. Enter your current address. If you use a P.O. box, include it on this line.

Line 4. Enter the address shown on the last return filed if different from the address entered on line 3.

Note. If the address on Lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address. For a business address, file Form 8822-B, Change of Address or Responsible Party --- Business.

Line 6. Enter only one tax form number per

Signature and date. Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. the IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.



You must check the box in the signature area to acknowledge you have the authority to sign and request the information. The form will not be processed and returned to you if the box is unchecked.

Individuals. Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Corporations. Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer. A bona fide shareholder of record owning 1 percent or more of the outstanding stock of the corporation may submit a Form 4506-T but must provide documentation to support the requester's right to receive the information.

Partnerships. Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Note: If you are Heir at law. Next of kin. or Beneficiary you must be able to establish a material interest in the estate or trust.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the letters testamentary authorizing an individual to act for

Signature by a representative. A representative can sign Form 4506-T for a taxpayer only if the taxpayer has specifically delegated this authority to the representative on Form 2848, line 5. The representative must attach Form 2848 showing the delegation to Form 4506-T.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: Learning about the law or the form, 10 min.; Preparing the form, 12 min.; and Copying, assembling, and sending the form to the IRS,

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to:

Internal Revenue Service Tax Forms and Publications Division 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224

Do not send the form to this address Instead, see Where to file on this page.