

Environmental Questionnaire

USDA LOAN PURCHASE CHECKLIST Guarantors: All principals with 20% or more ownership interest will need to provide the documents below. 4506C aka IRS Tax Verification Form (click here for online fillable form OR one is provided below) Personal Financial Statement (Signed & Dated within 60 days and signed by spouse, if married) (click here for online fillable form OR one is provided below) Management Resume Form OR Copy of Personal Resume 3 month recent Bank Statement from all sources of down payment (All pages of statement required) 2018 Personal Tax Return (only required if 2021 Personal Tax Return is yet to be filed) 2019 Personal Tax Return 2020 Personal Tax Return 2021 Personal Tax Return (if filed) A copy of request for automatic extension for 2021 Personal Tax Return (if applicable) Affiliates Business: If applicable, will need the documents below for all other businesses owned 20% or more An affiliate business is defined as any outside business where guarantor owns 20% or greater in that business 4506C aka IRS Tax Verification Form (click here for online fillable form OR one is provided below) 2018 Affiliate Business Tax Return (only required if 2021 Affiliate Tax Return is yet to be filed) 2019 Affiliate Business Tax Return 2020 Affiliate Business Tax Return 2021 Affiliate Business Tax Return (if filed) copy of request for automatic extension for 2021 Affilate Tax Return 12/31/21 Year Ending Profit & Loss Statement (only necessary if 2021 Tax Return is not filed) 12/31/21 Year Ending Balance Sheet (only necessary if 2021 Tax Return is not filed) Interim Year-to-Date Profit & Loss Statement (must be less than 60 days old) Interim Balance Sheet (must be less than 60 days old) Affiliate Business Debt Schedule with current loan balances matching balance sheet Seller: Copy of purchase and sales agreement with all amendments therto OR Signed LOI between Buyer/Seller 4506C aka IRS Tax Verification Form for business (click here for online fillable form OR one is provided below) 2018 Business Tax Return (only required if 2021 Affiliate Tax Return is yet to be filed) 2019 Business Tax Return 2020 Business Tax Return 2021 Business Tax Return (if filed) copy of request for automatic extension for 2021 Affilate Tax Return (if applicable) 12/31/21 Year Ending Profit & Loss Statement (only necessary if 2021 Tax Return is not filed) 12/31/21 Year Ending Balance Sheet (only necessary if 2021 Tax Return is not filed) Interim Year-to-Date Profit & Loss Statement (must be less than 60 days old) Interim Balance Sheet (must be less than 60 days old) 2020 and 2021 year ending STR report AND most recent interim monthly 2022 STR report Copy of any lease agreements or sublease agreements on subject property (if applicable)



HOTEL INFORMATION FORM

Property Address					
Nearby Highways					
Total Number of Rooms:	# Singles:				
	#Kings:				
Number of Buildings:	#Doubles:				
	#Suites:				
Number of Stories:	#Rooms out of service:				
Total lot square footage:					
Age of the building:					
What is age of the FF&E?					
When was last major renova	ition?				
What were the renovations and total cost?					
If Franchise, what is the remaining term?					
What is the estimated PIP cost requirements from franchise?					
What is the estimated Fir Co	ist requirements from franchise!				
Is there a restaurant or a 3rd party lease of any kind on site? If so, what are the terms?					
Describe area and occupancy generators:					



Funding



Business Debt Schedule

770-648-8100 Phone 1-800-319-4736 Fax

Company Name				Date (Same as Interim Balance Sheet)				
his schedule shou	ld include lo	ans, contracts	/notes payable ar	nd lines of crea	dit — not acco	ounts payable	or accrued liab	ilities.
CREDITOR NAME/ADDRESS	ORIGINAL DATE	ORIGINAL AMOUNT	TERM OR MATURITY DATE	PRESENT BALANCE	INTEREST RATE	MONTHLY PAYMENT	COLLATERAL	WHAT WAS LOAN FOR?
iotal Present Balan Total must agree w		own on Interim	Balance Sheet)					
nis is certified to l	be correct to	the best of m	y knowledge this _		day	of	2	0
his is certitied to l	be correct to	the best of m	y knowledge this _		day	ot	2	0
ignature/Title								

OMB APPROVAL NO.: 3245-0188 EXPIRATION DATE: 05/31/2024



PERSONAL FINANCIAL STATEMENT

U.S. SMALL BUSINESS ADMINISTRATION

The purpose of this form is to collect information about the Business Applicant and its owners' financial condition. SBA uses the information required by this Form 413 as one of a number of data sources in analyzing the repayment ability and creditworthiness of an applicant for an SBA loan or, with respect to a surety bond, to assist in recovery in the event that the contractor defaults on the contract. SBA also uses the information to assess whether an individual meets the economic disadvantage threshold for the Women-Owned Small Business (WOSB) Program and the 8(a) Business Development (BD) Program. Submission of this information is required as part of your application for assistance. Failure to provide the information would impact the agency's decision on your application.

To complete this form

- 1) Check all that apply.
- 2) Complete the form in its entirety (attached a separate sheet, if necessary)
- 3) Review the applicable certifications and sign (spousal signature, if required)

7(a) Ioan / 504 Ioan / Surety Bonds

Complete this form for: (1) each proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant; and (5) any person providing a guaranty on the loan (including the assets and liabilities of the owner's spouse and any minor children).

Return completed form to:

For 7(a) loans: the Lender processing the application for SBA guaranty

For 504 loans: the Certified Development Company (CDC) processing the application for SBA guaranty For Surety Bonds: the Surety Company or Agent processing the application for surety bond guarantee

Disaster Business Loan Application (Excluding Sole Proprietorships)

Complete this form for: (1) each applicant; (2) each general partner; (3) each managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant business; and (5) any person providing an unlimited guaranty on the loan.

Return completed form to: Disaster Processing and Disbursement Center at 14925 Kingsport Road, Fort Worth, TX 76155-2243 or FAX to 1-202-481-1505 or disasterloans@sba.gov

■ Women Owned Small Business (WOSB) Federal Contracting Program

This form must be completed by each individual claiming economic disadvantage in connection with the SBA's Women-Owned Small Business (WOSB) Federal Contracting Program. A separate form must be completed by the individual's spouse, unless the individual and the spouse are legally separated. Use attachments if necessary. Each attachment must be identified as a part of this statement and signed. In addition, each individual claiming economic disadvantage must update the form as changes arise, but at least annually, to ensure the information is current, accurate and complete.

SBA's regulations state that to be considered economically disadvantaged for purposes of the WOSB Program, a woman must have an adjusted gross income averaged over the three prior fiscal years of \$350,000 or less; less than \$6 million in the fair market value of all her assets (to include her primary residence and value of the business concern); and less than \$750,000 in personal net worth (excluding equity interest in her personal residence and ownership interest in the business, and funds invested in a retirement account that are unavailable until retirement age). 13 C.F.R. §127.203. The information contained in this form must be submitted and certified through beta.certify.sba.gov

8(a) Business Development Program

8(a) applicants must show that 51% of the firm is owned by one or more individuals determined by the SBA to be socially and economically disadvantaged. The information contained in this form must be submitted by each socially and economically disadvantaged individual using their one time 8(a) eligibility to qualify this firm for 8(a) certification. If married, the spouse must complete a separate SBA Form 413, except when the individual and the spouse are legally separated. If separated, provide copy of separation document.

SBA's regulations state that to be considered economically disadvantaged for purposes of the 8(a) Business Development Program, an individual must have an adjusted gross income averaged over the three prior fiscal years of \$350,000 or less; less than \$6 million in the fair market value of all assets (to include primary residence and value of the business concern); and less than \$750,000 in personal net worth (excluding equity interest in the personal residence and ownership interest in the business, and funds invested in a retirement account that are unavailable until retirement age). 13 C.F.R. §124.104.

Note: Please complete this form with Personal Information not Business Information and divide all jointly owned assets and liabilities, as appropriate with spouse or others. The information contained in this form must be submitted and certified through certify.sba.gov. For additional information go to: http://www.sba.gov/8abd

E	Business Phone (xxx-xxx-xxxx)	
	Home Phone (xxx-xxx-xxxx)	
dress)		
rp LLC Partnership	Sole Proprietor (does not appl	y to ODA applicant)
ay/year] /ODA/WOSB or within 30 days	of submission for 8(a) BD)	
_ No		
(Omit Cents)	LIABILITIES	(Omit Cents)
Note (Insta N Insta N Loan Mor' (Unp () Othe () Tota Net	es Payable to Banks and Others Describe in Section 2) allment Account (Auto)	·
As I Leg Pro Oth	Endorser or Co-Makeral Claims & Judgmentsvision for Federal Income Taxer Special Debt.	
	Cor Cor	rpLLCPartnershipSole Proprietor (does not appl) ay/year] //ODA/WOSB or within 30 days of submission for 8(a) BD)No (Omit Cents)

Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)									
Names and Addresses of Noteholder(s)		Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)		How Secured or Endorsed Type of Collateral		
Section 3. Stocks and	d Bond	ls. (Use at	tachments if nec	essary. Each at	tachment must be	identified as pa	art of this state	ement and signe	d.)
Number of Shares Name of S		ame of S	ecurities	Cost				te of	Total Value
					Quotation	/Exchange	Quotatioi	n/Exchange	
Section 4. Real Estate and signed.)	Owne	d. (List ea	ich parcel separa	ately. Use attach	nment if necessary	/. Each attachr	nent must be	identified as a pa	art of this statement
			Property	A	ı	Property B		Pr	operty C
Type of Real Estate (e. Primary Residence, Ot Residence, Rental Pro Land, etc.)	her								
Address									
Date Purchased									
Original Cost									
Present Market Value									
Name & Address of Mortgage Holder									
Mortgage Account Nun	nber								
Mortgage Balance									
Amount of Payment pe Month/Year	r								
Status of Mortgage									
Section 5. Other Personal holder, amount of lien,	sonal P	roperty a	and Other As nt and, if delin	sets. (Descr quent, describ	ibe, and, if any be delinquency	is pledged a: .)	s security, s	tate name an	d address of lien
		•							
1									
1									

Section 6. Unpaid Taxes. (Describe in detail as to type, to lien attaches.)	whom payable, when due, amou	nt, and to what property, if any, a tax
inch ditudines.)		
Section 7. Other Liabilities. (Describe in detail.)		
Section 8. Life Insurance Held. (Give face amount and ca Beneficiaries.)	ash surrender value of policies – n	ame of insurance company and
I authorize the SBA/Lender/Surety Company to make inquirie determine my creditworthiness.	s as necessary to verify the accur	acy of the statements made and to
<u>CERTIFICATION</u> : (to be completed by each person submittin more owner when spousal assets are included)	g the information requested on thi	s form and the spouse of any 20% or
By signing this form, I certify under penalty of criminal prosect information submitted with this form is true and complete to the Lenders or Certified Development Companies or Surety Compapilication for a loan, surety bond, or participation in the WOS statements required by law and executive order	ne best of my knowledge. I unders panies will rely on this information	tand that SBA or its participating when making decisions regarding ar
Signature	Date	
Print Name	Social Security No.	
Signature	Date	
Print Name	Social Security No.	

NOTICE TO 7(a) LOAN, 504 LOAN AND SURETY BOND APPLICANTS: CRIMINAL PENALITIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan or surety bond application. A false statement is punishable under 18 U.S.C. §§ 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 U.S.C. § 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally-insured institution, a false statement is punishable under 18 U.S.C. § 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000. Additionally, false statements can lead to treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729, and other administrative remedies including suspension and debarment.

NOTICE TO DISASTER BUSINESS LOAN APPLICANTS: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Whoever wrongfully misapplies the proceeds of an SBA disaster loan shall be civilly liable to the Administrator in an amount equal to one-and-one half times the original principal amount of the loan under 15 U.S.C. § 636(b). In addition, any false statement or misrepresentation to SBA may result in criminal, civil or administrative sanctions including, but not limited to: 1) fines and imprisonment, or both, under 15 U.S.C. § 645, 18 U.S.C. § 1001, 18 U.S.C. § 1014, 18 U.S.C. § 1040, 18 U.S.C. § 3571, and any other applicable laws; 2) treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729; 3) double damages and civil penalties under the Program Fraud Civil Remedies Act, 31 U.S.C. § 3802; and 4) suspension and/or debarment from all Federal procurement and non-procurement transactions. Statutory fines may increase if amended by the Federal Civil Penalties Inflation Adjustment Act Improvements Act of 2015.

NOTICE TO APPLICANTS OR PARTICIPANTS IN THE WOSB FEDERAL CONTRACTING PROGRAM: CRIMINAL PENALITIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Any person who misrepresents a business concern's status as a WOSB or EDWOSB, or makes any other false statement in order to influence the WOSB Program eligibility determination or other review process in any way (e.g., protest), shall be: (1) subject to fines and imprisonment of up to 5 years, or both, as stated in Title 18 U.S.C. § 1001; (2) subject to fines of up to \$500,000 or imprisonment of up to 10 years, or both, as stated in Title 15 U.S.C. § 645; (3) subject to civil and administrative remedies, including suspension and debarment; and (4) ineligible for participation in programs conducted under the authority of the Small Business Act.

NOTICE TO APPLICANTS OR PARTICIPANTS IN THE 8(a) BUSINESS DEVELOPMENT PROGRAM: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:

Any person who misrepresents a business concern's status as an 8(a) BD Program participant or SDB concern, or makes any other false statement in order to influence the 8(a) certification or other review process in any way(e.g., annual review, eligibility review), shall be: (1) subject to fines and imprisonment of up to 5 years, or both, as stated in Title 18 U.S.C. § 1001; (2) subject to fines of up to \$500,000 or imprisonment of up to 10 years, or both, as stated in Title 15 U.S.C. § 645; (3) subject to treble damages and civil penalties under the False Claims Act, 31 U.S.C. § 3729; (4) subject to administrative remedies, including suspension and debarment; and (5) ineligible for participation in programs conducted under the authority of the Small Business Act.

PLEASE NOTE:

According to the Paperwork Reduction Act, you are not required to respond to this request for information unless it displays a valid OMB Control Number. The estimated average burden hours for the completion of this form is 1.5 hour per response. If you have questions or comments concerning this estimate or any other aspect of this information collection, please contact: Director, Records Management Division, Small Business Administration, 409 Third Street SW, Washington, D.C. 20416, and SBA Desk Officer, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. PLEASE DO NOT SEND COMPLETED FORMS TO OMB.

PLEASE READ, DETACH, AND RETAIN FOR YOUR RECORDS

Privacy Act (5 U.S.C. 552a) and Debt Collection Improvement Act (31 U.S.C. 7701)

Authorities and Purpose for Collecting Information: SBA is collecting the information on this form, including social security numbers and other personal information, to make a character and credit or other eligibility decision in connection with you or your company's application for SBA assistance. SBA may also use social security numbers for the purpose of collecting and reporting on any delinquent fees or other amounts owed SBA, where applicable.

For purposes of SBA's financial assistance programs, 31 U.S.C. 7701 requires loan applicants and guarantors, or any indemnitor of a surety bond to provide their social security numbers, or other taxpayer identification numbers. Failure to provide this information would affect your ability to obtain an SBA loan or bond. For other individuals signing this form, the submission of the social security number is voluntary and failure to provide your social security number may not affect any right, benefit or privilege to which you are entitled. However, your social security number or other taxpayer identification number helps SBA to distinguish you from other individuals with the same or similar name or other personal identifier. This use is permitted under Executive Order 9397. Personal information collected is protected to the extent permitted by law, including the Freedom Information Act, 5 U.S.C. 552, and the Privacy Act 5 U.S.C. 552. Such information is maintained pursuant to SBA's Privacy Act System of Records at https://www.sba.gov/sites/default/files/2020-01/sba-sorns.pdf.

Right to Financial Privacy Act of 1978 (12 U.S.C. 3401) -- This is notice to you as required by the Right to Financial Privacy Act of 1978, of SBA's access rights to financial records held by financial institutions that are or have been doing business with you or your business, including any financial institutions participating in a loan or loan guaranty. The law provides that SBA shall have a right of access to your financial records in connection with its consideration or administration of assistance to you in the form of a Government guaranteed loan or guaranteed bond. SBA is required to provide a certificate of its compliance with the Act to a financial institution in connection with its first request for access to your financial records, after which no further certification is required for subsequent accesses. The law also provides that SBA's access rights continue for the term of any approved loan guaranty agreement or any approved bond agreement. No further notice to you of SBA's access rights is required during the term of any such agreement. The law also authorizes SBA to transfer to another Government authority any financial records included in an application for a loan or bond guarantee, or concerning an approved loan or loan guarantee or bond guarantee, as necessary to process, service or foreclose on a loan guaranty or collect on a defaulted loan guaranty, or to process or service the bond guarantee. No other transfer of your financial records to another Government authority will be permitted by SBA except as required or permitted by law.

Freedom of Information Act (5 U.S.C. 552)

This law provides, with some exceptions, that SBA must supply information contained in agency files and records to a person requesting it. Information about approved loans that will be automatically released includes, among other things, statistics on our loan programs (individual borrowers are not identified in the statistics), and other information such as the names of the borrowers (and their officers, directors, stockholders or partners), the collateral pledged to secure the loan, the amount of the loan, its purpose in general terms, and the maturity. With respect to SBA's bond guarantee program, SBA will release, among other things, statistics on the Surety Bond Guarantee (SBG) programs and other information such as the names of small businesses (and their officers, directors, stockholders or partners) and the amount of the bond guarantees. Proprietary data on a borrower would not routinely be made available to third parties. All requests under this Act are to be addressed to the nearest SBA office and be identified as a Freedom of Information request.

Form **4506-C** (September 2020)

Department of the Treasury - Internal Revenue Service

OMB Number 1545-1872

IVES Request for Transcript of Tax Return

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

- Request may be rejected if the form is incomplete or illegible.
- For more information about Form 4506-C, visit www.irs.gov and search IVES.

	Name <i>first)</i>	shown on tax return (if a joint return, enter the name shown	1b. First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)				
2a. I	f a joii	nt return, enter spouse's name shown on tax return	2b. Second social security number or individual taxpayer identification number if joint tax return				
3 . C	urrent	name, address (including apt., room, or suite no.), city, state, at	nd ZIP code (se	e instructions)			
4 . Pı	reviou	s address shown on the last return filed if different from line 3 (s	see instructions)				
5a. I	VES p	participant name, address, and SOR mailbox ID					
5 b. (Custo	mer file number (if applicable) (see instructions)					
Cau	tion:	This tax transcript is being sent to the third party entered on Line	e 5a. Ensure tha	t lines 5 through 8 are co	mpleted before signing. (see instructions)		
6.		script requested. Enter the tax form number here (1040, 1065, equest	1120, etc.) and	check the appropriate bo	ox below. Enter only one tax form number		
		Return Transcript, which includes most of the line items of a tamade to the account after the return is processed. Transcripts a 1120, Form 1120-A, Form 1120-H, Form 1120-L, and Form 112 during the prior 3 processing years	re only available	e for the following returns	: Form 1040 series, Form 1065, Form		
	b. Account Transcript, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns						
		Record of Account, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years					
7.	inforr for up 2016	n W-2, Form 1099 series, Form 1098 series, or Form 5498 semation returns. State or local information is not included with the to to 10 years. Information for the current year is generally not available from the IRS until 2018 at Security Administration at 1-800-772-1213	Form W-2 information Form Form Form Form Form Form Form Form	mation. The IRS may be year after it is filed with the	able to provide this transcript information ne IRS. For example, W-2 information for		
		If you need a copy of Form W-2 or Form 1099, you should first cuse Form 4506 and request a copy of your return, which include			orm W-2 or Form 1099 filed with your return,		
8.	Year	or period requested. Enter the ending date of the tax year or pe	riod using the n	nm/dd/yyyy format <i>(see in</i> / /	structions)		
Cau	tion:	Do not sign this form unless all applicable lines have been comp	oleted.				
requ man	ested aging	e of taxpayer(s). I declare that I am either the taxpayer whose n . If the request applies to a joint return, at least one spouse mus member, guardian, tax matters partner, executor, receiver, admorm 4506-C on behalf of the taxpayer. Note: This form must be	t sign. If signed ninistrator, truste	by a corporate officer, 1 pe, or party other than the	percent or more shareholder, partner, taxpayer, I certify that I have the authority to		
	_	atory attests that he/she has read the attestation clause and instructions.	d upon so read	ing declares that he/she	e has the authority to sign the Form 4506-C.		
		Signature (see instructions)		Date	Phone number of taxpayer on line 1a or 2a		
		Print/Type name					
	ign ere	Title (if line 1a above is a corporation, partnership, estate, or tr	rust)				
		Spouse's signature			Date		
		Print/Type name			1		

Instructions for Form 4506-C, IVES Request for Transcript of Tax Return

Section references are to the Internal Revenue Code unless otherwise noted.

Future Developments

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

What's New. Form 4506-C was created to be utilized by authorized IVES participants to order tax transcripts with the consent of the taxpayer.

General Instructions

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

Designated Recipient Notification. Internal Revenue Code, Section 6103(c), limits disclosure and use of return information received pursuant to the taxpayer's consent and holds the recipient subject to penalties for any unauthorized access, other use, or redisclosure without the taxpayer's express permission or request.

Taxpayer Notification. Internal Revenue Code, Section 6103(c), limits disclosure and use of return information provided pursuant to your consent and holds the recipient subject to penalties, brought by private right of action, for any unauthorized access, other use, or redisclosure without your express permission or request.

Purpose of form. Use Form 4506-C to request tax return information through an authorized IVES participant. You will designate an IVES participant to receive the information on line 5a.

Note: If you are unsure of which type of transcript you need, check with the party requesting your tax information.

Where to file. The IVES participant will fax Form 4506-C with the approved IVES cover sheet to their assigned Service Center.

Chart for ordering transcripts

If your assigned Service Center is:	Fax the requests with the approved coversheet to:
Austin Submission	Austin IVES Team
Processing Center	844-249-6238
Fresno Submission	Fresno IVES Team
Processing Center	844-249-6239
Kansas City Submission Processing Center	Kansas City IVES Team 844-249-8128
Ogden Submission	Ogden IVES Team
Processing Center	844-249-8129

Specific Instructions

Line 1b. Enter the social security number (SSN) or individual taxpayer identification number (ITIN) for the individual listed on line 1a, or enter the employer identification number (EIN) for the business listed on line 1a.

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 addresses on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address, or Form 8822-B,Change of Address or Responsible Party — Business, with Form 4506-C.

Line 5b. Enter up to 10 numeric characters to create a unique customer file number that will appear on the transcript. The customer file number cannot contain an SSN, ITIN or EIN. Completion of this line is not required.

Note. If you use an SSN, name or combination of both, we will not input the information and the customer file number will reflect a generic entry of "999999999" on the transcript.

Line 8. Enter the end date of the tax year or period requested in mm/dd/yyyy format. This may be a calendar year, fiscal year or quarter. Enter each quarter requested for quarterly returns. Example: Enter 12/31/2018 for a calendar year 2018 Form 1040 transcript.

Signature and date. Form 4506-C must be signed and dated by the taxpayer listed on line 1a or 2a. The IRS must receive Form 4506-C within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines, including lines 5a through 8, 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 if unchecked.

Individuals. Transcripts listed on on line 6 may be furnished to either spouse if jointly filed. Only one signature is required. Sign Form 4506-C exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Corporations. Generally, Form 4506-C 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-C but must provide documentation to support the requester's right to receive the information.

Partnerships. Generally, Form 4506-C can be signed by any person who was a member of the partnership during any part of the tax period requested on line 8.

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 an estate.

Signature by a representative. A representative can sign Form 4506-C 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 sign Form 4506-C.

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-C will vary depending on individual circumstances. The estimated average time is:

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-C 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.