

We Are Here to Help You

It is critical that you work with us on a resolution for any issues that affect your ability to make timely payments, whether your challenges are temporary or long-term. The sooner you respond, the more quickly we can determine whether you qualify for assistance.

Options May Be Available

The right option for you depends on your individual circumstances. If you provide all required information and documentation about your situation, we can determine if you qualify for temporary or long-term relief.

Send Us the Information We Need to Help You

Requesting help is the first step. Start by providing information and documentation to help us understand the challenges you are facing. To do this, follow the detailed instructions Information Checklist to complete and submit your package.

Once we have received and evaluated your information, we will contact you regarding your options and next steps.

Learn More and Act Now

Please take action by completing and returning the entire Information Package. If you need assistance, contact our **Account Resolution Group at 1-855-219-4161**.

**TO RECEIVE HELP YOU
MUST ACT
IMMEDIATELY!**

- 1.** See the instructions on the Information Checklist
- 2.** Submit required Information Package:
 - Information Form/Income Documentation
 - Hardship Documentation
 - IRS Form 4506-T or 4506-EZ
- 3.** Acknowledgement Form

**If you need assistance,
contact us immediately at:**

1-855-219-4161

BORROWING BUSINESS/INDIVIDUAL GUARANTOR INFORMATION FORM

If you are experiencing a temporary or long-term hardship and need help, you should complete and submit this form along with other required documentation to be considered for available solutions.

On Page 3-4 you must disclose information about **all** of your income, expenses and assets. Page 3-4 also lists the required income documentation that you must submit in support of your request for assistance. Then on Page 11, you must complete the Hardship Documentation in which you disclose the nature of your hardship. The Hardship Documentation informs you of the required documentation that you must submit in support of your hardship claim.

NOTICE: In addition, when you sign and date this form, you will make important certifications, representations and agreements, including certifying that all of the information in this Form is accurate and truthful and any identified hardship has contributed to your submission of this request for mortgage relief.

REMINDER: The Individual Guarantor Information Form you need to return consists of: (1) this completed, signed and dated form; (2) completed and signed IRS Form 4506-T or 4506 EZ; (3) required income documentation.

| | | | | | | |
|--------------------------------|-----------------------|---------------------|------------------------|---------------------|--------------|-----|
| Business Description: | Individual | LLC | General Partnership | Non Profit | Estate | LLP |
| | Limited Partnership | S-Corp. | Trust | Sole Proprietorship | Municipality | PA |
| State of Organization: | Organization # | | | | | |
| Collateral Description: | Real Estate | Equipment/Other | AR/Inventory | Unsecured | | |
| The property is currently: | My Primary Residence | A Second Home | An Investment Property | | | |
| The property is currently: | Owner Occupied | Renter Occupied | Vacant | | | |
| I want to: | Keep the Property | Vacate the Property | Sell the Property | Undecided | | |

| Borrowing Business | | Individual Guarantor/Borrower | | |
|--|---------------------------|---|---------------|-------------|
| Borrowing Business Name | | Individual Guarantor/Borrower (Title) | | |
| Tax Identification Number | Type of Business | Social Security Number | Date of Birth | |
| Business Phone | | Home Phone | | |
| Business Fax | | Cell or Work Number | | |
| Mailing Address | | Mailing Address | | |
| Property Address | | Email Address(s) | | |
| Date Business Established: | | ID Type: | Number: | Expiration: |
| Date of Ownership: | Percent (%) Ownership: | | | |
| Have you filed for bankruptcy? Yes No | | Chapter filed: | | |
| Filing date: | Case Number: | Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | |
| | | Has your bankruptcy been discharged? Yes No | | |
| Is this property listed for sale? Yes No Listing Date: | | If you have contacted a credit counseling agency for help, please complete the following: | | |
| Have you received an offer? Yes No | | Agency Name: | | |
| Date of Offer: | Amount of the Offer: (\$) | Counselor Name: Phone Number: | | |
| Agent's Name: | Phone Number: | Counselor email: | | |
| For Sale By Owner? Yes No | | | | |

BORROWING BUSINESS INFORMATION FORM

| Monthly Business Income | | Monthly Business Expenses/Debt | | Business Assets | |
|--|----|--|----|-------------------------------|----|
| Monthly Gross Wages | \$ | First Mortgage Payment | \$ | Checking Account(s) | \$ |
| Overtime | \$ | Second Mortgage Payment | \$ | Checking Account(s) | \$ |
| Child Support/Alimony | \$ | Homeowner's Insurance | \$ | Savings/Money Market | \$ |
| Non-taxable social security/SSDI | \$ | Property Taxes | \$ | CDs | \$ |
| Taxable SS benefits or other monthly income from annuities or retirement plans | \$ | Credit Cards/Installment Loan(s) (total minimum payment per month) | \$ | Stocks/Bonds | \$ |
| Tips, commissions, bonus and self-employed income | \$ | Alimony, child support payments | \$ | Other cash on hand | \$ |
| Rents Received | \$ | Car lease payments | \$ | Real Estate (estimated value) | \$ |
| Unemployment Income | \$ | HOA/Condo fees/maintenance | \$ | Other (description) | \$ |
| Food Stamps/Welfare | \$ | Mortgage Payments on other properties | \$ | | \$ |
| Other | \$ | Other | \$ | | \$ |
| Total Gross Income | \$ | Total Debt/Expenses | \$ | Total Assets | \$ |

| | | |
|------------------|-----------------------|-------------|
| Lien Holder Name | Balance/Interest Rate | Loan Number |
|------------------|-----------------------|-------------|

Required Income Documentation

| | |
|--|---|
| <p>Do you earn a salary or hourly wage? For each borrower who is a salaried employee or hourly wage earner, include the most recent pay stub that reflects at least 30 days of year-to-date earnings for each borrower.</p> | <p>Are you self-employed? For each borrower who received self-employed income, include a complete, signed individual federal income tax return and, as applicable, the business tax return; AND either the most recent signed and dated profit/loss statement that reflects activity for the most recent three months; OR copies of bank statements for the business account for the last two months evidencing continuation of business activity.</p> |
|--|---|

Do you have any additional sources of income? Provide for each borrower as applicable:
"Other Earned Income" such as bonuses, commissions, housing allowance, tips or overtime:
 Reliable third-party documentation describing the amount and nature of the income (e.g., paystub, employment contract or printouts documenting tip income).
Social Security, disability or death benefits, pension, public assistance, or adoption assistance:
 Documentation showing the amount and frequency of the benefits, such as letters, exhibits, disability policy or benefits statement from the provider
 Documentation showing the receipt of payment, such as copies of the two most recent bank statements showing deposit amounts.
Rental income:
 Copy of the most recent filed federal tax return with all schedules, including Schedule E—Supplement Income and Loss. Rental income for qualifying purposes will be 75% of the gross rent you reported reduced by the monthly debt service on the property, if applicable; or
 If rental income is not reported on Schedule E – Supplemental Income and Loss, provide a copy of the current lease agreement with either bank statements or cancelled rent checks demonstrating receipt of rent.
Investment income:
 Copies of the two most recent investment statements or bank statements supporting receipt of this income.
Alimony, child support, or separation maintenance payments as qualifying income:*
 Copy of divorce decree, separation agreement, or other written legal agreement filed with a court, or court decree that states the amount of the alimony, child support, or separation maintenance payments and the period of time over which the payments will be received, and
 Copies of your two most recent bank statements or other third-party documents showing receipt of payment.

Notice: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered for repaying this loan.

INDIVIDUAL GUARANTOR INFORMATION FORM

| Monthly Individual Income | | Monthly Expenses/Debt | | Individual Assets | |
|--|----|--|----|-------------------------------|----|
| Monthly Gross Wages | \$ | First Mortgage Payment | \$ | Checking Account(s) | \$ |
| Overtime | \$ | Second Mortgage Payment | \$ | Checking Account(s) | \$ |
| Child Support/Alimony | \$ | Homeowner's Insurance | \$ | Savings/Money Market | \$ |
| Non-taxable social security/SSDI | \$ | Property Taxes | \$ | CDs | \$ |
| Taxable SS benefits or other monthly income from annuities or retirement plans | \$ | Credit Cards/Installment Loan(s) (total minimum payment per month) | \$ | Stocks/Bonds | \$ |
| Tips, commissions, bonus and self-employed income | \$ | Alimony, child support payments | \$ | Other cash on hand | \$ |
| Rents Received | \$ | Car lease payments | \$ | Real Estate (estimated value) | \$ |
| Unemployment Income | \$ | HOA/Condo fees/maintenance | \$ | Other (description) | \$ |
| Food Stamps/Welfare | \$ | Mortgage Payments on other properties | \$ | | \$ |
| Other | \$ | Other | \$ | | \$ |
| Total Gross Income | \$ | Total Debt/Expenses | \$ | Total Assets | \$ |

| | | |
|------------------|-----------------------|-------------|
| Lien Holder Name | Balance/Interest Rate | Loan Number |
|------------------|-----------------------|-------------|

Required Income Documentation

| | |
|--|---|
| <p>Do you earn a salary or hourly wage? For each borrower who is a salaried employee or hourly wage earner, include the most recent pay stub that reflects at least 30 days of year-to-date earnings for each borrower.</p> | <p>Are you self-employed? For each borrower who received self-employed income, include a complete, signed individual federal income tax return and, as applicable, the business tax return; AND either the most recent signed and dated profit/loss statement that reflects activity for the most recent three months; OR copies of bank statements for the business account for the last two months evidencing continuation of business activity.</p> |
|--|---|

Do you have any additional sources of income? Provide for each borrower as applicable:
"Other Earned Income" such as bonuses, commissions, housing allowance, tips or overtime:
 Reliable third-party documentation describing the amount and nature of the income (e.g., paystub, employment contract or printouts documenting tip income).
Social Security, disability or death benefits, pension, public assistance, or adoption assistance:
 Documentation showing the amount and frequency of the benefits, such as letters, exhibits, disability policy or benefits statement from the provider
 Documentation showing the receipt of payment, such as copies of the two most recent bank statements showing deposit amounts.
Rental income:
 Copy of the most recent filed federal tax return with all schedules, including Schedule E—Supplement Income and Loss. Rental income for qualifying purposes will be 75% of the gross rent you reported reduced by the monthly debt service on the property, if applicable; or
 If rental income is not reported on Schedule E – Supplemental Income and Loss, provide a copy of the current lease agreement with either bank statements or cancelled rent checks demonstrating receipt of rent.
Investment income:
 Copies of the two most recent investment statements or bank statements supporting receipt of this income.
Alimony, child support, or separation maintenance payments as qualifying income:*
 Copy of divorce decree, separation agreement, or other written legal agreement filed with a court, or court decree that states the amount of the alimony, child support, or separation maintenance payments and the period of time over which the payments will be received, and
 Copies of your two most recent bank statements or other third-party documents showing receipt of payment.

Notice: Alimony, child support, or separate maintenance income need not be revealed if you do not choose to have it considered for repaying this loan.

Borrowing Business Acknowledgement and Agreement (the "Acknowledgement")

1. I certify that all of the information submitted to BBVA Compass, whether now or at any time afterwards, is truthful, and the hardship(s) identified in such information have contributed to submission of this request for relief for the Borrowing Business's Loan obligations to BBVA Compass.
2. I understand and acknowledge that BBVA Compass, or the servicer, owner, or guarantor of the Loan, or their agent(s) may investigate the accuracy of these statements, may require additional supporting documentation, and that knowingly submitting false information may violate Federal and other applicable law.
3. I agree that BBVA Compass may obtain a current credit report on the Borrowing Business, and hereby authorize BBVA Compass to do so
4. I certify that any collateral that secures the Loan has not received a condemnation notice.
5. I certify that I am willing to provide all requested documents and to respond to all BBVA Compass communications in a timely manner. I understand that time is of the essence.
6. I understand that BBVA Compass will use this information to evaluate the Borrowing Business's eligibility for available relief options and foreclosure alternatives, but BBVA Compass is not obligated to offer assistance based solely on the representations in this document, or other documentation submitted in connection with my request. I further understand that if the Borrowing Business does not qualify for assistance at this time, or does not enter into a formalized agreement with BBVA Compass, the Loan with BBVA Compass remains in full effect.
7. If the Borrowing Business is eligible for a trial period plan, repayment plan, or forbearance plan, and it accepts and agrees to all terms of such plan, I agree that the terms of this Acknowledgment and Agreement are incorporated into such plan by reference as if set forth in such plan in full. The first timely payment following BBVA Compass's determination and notification of the Borrowing Business's eligibility or prequalification for a trial period plan, repayment plan, or forbearance plan (when applicable) will serve as acceptance, without modification, of the terms set forth in the notice sent to the Borrowing Business that sets forth the terms and conditions of the trial period plan, repayment plan, or forbearance plan.
8. I agree that when BBVA Compass accepts and/or posts a payment during the term of any repayment plan, trial period plan, or forbearance plan, it will be without prejudice to, and will not be deemed a waiver of, the acceleration of the Loan or foreclosure action and related activities, and shall not constitute a cure of the default under the Loan unless such payments are sufficient to completely cure the entire default under the Loan.
9. I agree that any prior waiver as to the payment of escrow items to BBVA Compass in connection with the Loan has been revoked. If the Borrowing Business qualifies for, and enters into a repayment plan, forbearance plan, or trial period plan, and if BBVA Compass so elects, I agree to the establishment of an escrow account and the payment of escrow items if an escrow account never existed on the Loan.

10. I understand that BBVA Compass will collect and record personal and business information that I submit to them, including, but not limited to, name, address, telephone number, social security number, credit score, income, payment history, and information about account balances and activity. I understand and consent to BBVA Compass's disclosure of such information, and the terms of any relief or foreclosure alternative that the Borrowing Business receives to any investor, insurer, guarantor, or servicer that owns, insures, guarantees, or services the Loan.
11. I consent to being contacted concerning this request for Loan assistance at any cellular or mobile telephone number I have provided to BBVA Compass. This includes text messages and telephone calls to my cellular or mobile telephone.
12. I understand that if Borrowing Business has intentionally defaulted on the Loan, engaged in fraud, or misrepresented any fact(s) or document (s) in connection with this request for relief, or if Borrowing Business does not provide all required documentation, BBVA Compass may cancel any relief granted and may pursue any available legal remedies, including foreclosure of any collateral that secures the Loan. Further, if BBVA Compass has reasonably relied on any such fraud or misrepresentation, I agree that the Borrowing Business shall be liable for any and all losses suffered by BBVA Compass resulting from such reliance.
13. I hereby represent that: (a) Borrowing Business is a duly organized and validly existing entity in good standing under the laws of the state in which it was incorporated/organized, with all requisite power and authority to own and operate its property and assets, to conduct the businesses in which it is engaged or proposes to engage, and to execute, deliver, and perform its obligations under this Acknowledgement; (b) The execution, delivery and performance of this Acknowledgement have been duly authorized by all necessary corporate or limited liability company action; (c) The execution, delivery, and performance by Borrowing Business of this Acknowledgement, the consummation of the transactions contemplated herein, and the compliance with the terms and provisions hereof will not contravene any material provision of any law or regulation to which Borrowing Business is subject or any order or decree of any court of governmental authority applicable to Borrowing Business, and will not result in any material breach of or constitute a default under any indenture, mortgage, deed of trust, agreement or other instrument to which Borrowing Business is a party or by which it or its properties are bound.

This Acknowledgement is made by the following person in his or her below-referenced capacity of the Borrowing Business.

By: _____ (Signature of Authorized Signer)

Name: _____ (Name of Authorized Signer)

Title: _____ (Title of Authorized Signer)

Date: _____

AUTHORIZATION TO RELEASE INFORMATION

There may be times when additional information is needed to review the Borrowing Business's situation thoroughly, including without limitation, ordering credit reports, verifying bank accounts in this disclosure, or obtaining any other information necessary to properly analyze your request. I/WE HEREBY AUTHORIZE YOU TO RELEASE TO **BBVA COMPASS** ANY AND ALL INFORMATION THEY MAY REQUIRE FOR THE PURPOSE OF A HARDSHIP REVIEW RELATING TO THE BORROWING BUSINESS'S OBLIGATIONS TO BBVA COMPASS.

By: _____ (Signature of Authorized Signer)

Name: _____ (Name of Authorized Signer)

Title: _____ (Title of Authorized Signer)

Date: _____

INDIVIDUAL GUARANTOR INFORMATION FORM

Individual Guarantor/Borrower Acknowledgement and Agreement (the "Acknowledgement")

1. I certify that all of the information submitted to BBVA Compass, whether now or at any time afterwards, is truthful, and the hardship(s) identified in such information have contributed to submission of this request for relief for the Borrowing Business's Loan obligations to BBVA Compass.
2. I understand and acknowledge that BBVA Compass, or the servicer, owner, or guarantor of the Loan, or their agent(s) may investigate the accuracy of these statements, may require additional supporting documentation, and that knowingly submitting false information may violate Federal and other applicable law.
3. I agree that BBVA Compass may obtain a current credit report on all individual guarantors of the Borrowing Business, and hereby authorize BBVA Compass to do so.
4. I certify that any collateral that secures the Loan has not received a condemnation notice.
5. I certify that I am willing to provide all requested documents and to respond to all BBVA Compass communications in a timely manner. I understand that time is of the essence.
6. I understand that BBVA Compass will use this information to evaluate the Borrowing Business's eligibility for available relief options and foreclosure alternatives, but BBVA Compass is not obligated to offer assistance based solely on the representations in this document, or other documentation submitted in connection with my request. I further understand that if the Borrowing Business does not qualify for assistance at this time, or does not enter into a formalized agreement with BBVA Compass, the Loan with BBVA Compass remains in full effect.
7. If the Borrowing Business is eligible for a trial period plan, repayment plan, or forbearance plan, and it accepts and agrees to all terms of such plan, I agree that the terms of this Acknowledgment and Agreement are incorporated into such plan by reference as if set forth in such plan in full. The first timely payment following BBVA Compass's determination and notification of the Borrowing Business's eligibility or prequalification for a trial period plan, repayment plan, or forbearance plan (when applicable) will serve as acceptance, without modification, of the terms set forth in the notice sent to the Borrowing Business that sets forth the terms and conditions of the trial period plan, repayment plan, or forbearance plan.
8. I agree that when BBVA Compass accepts and/or posts a payment during the term of any repayment plan, trial period plan, or forbearance plan, it will be without prejudice to, and will not be deemed a waiver of, the acceleration of the Loan or foreclosure action and related activities, and shall not constitute a cure of the default under the Loan unless such payments are sufficient to completely cure the entire default under the Loan.
9. I agree that any prior waiver as to the payment of escrow items to BBVA Compass in connection with the Loan has been revoked. If the Borrowing Business qualifies for, and enters into a repayment plan, forbearance plan, or trial period plan, and if BBVA Compass so elects, I agree to the establishment of an escrow account and the payment of escrow items if an escrow account never existed on the Loan.
10. I understand that BBVA Compass will collect and record personal and business information that I submit to them, including, but not limited to, name, address, telephone number, social security number, credit score, income, payment history, and information about account balances and activity. I understand and consent to BBVA Compass's disclosure of such information, and the terms of any relief or foreclosure alternative that the Borrowing Business receives to any investor, insurer, guarantor, or servicer that owns, insures, guarantees, or services the Loan.

11. I consent to being contacted concerning this request for Loan assistance at any cellular or mobile telephone number I have provided to BBVA Compass. This includes text messages and telephone calls to my cellular or mobile telephone.
12. I understand that if I have intentionally defaulted on the Loan, engaged in fraud, or misrepresented any fact(s) or document (s) in connection with this request for relief, or if I do not provide all required documentation, BBVA Compass may cancel any relief granted and may pursue any available legal remedies, including foreclosure of any collateral that secures the Loan. Further, if BBVA Compass has reasonably relied on any such fraud or misrepresentation, I agree that both I, individually, and the Borrowing Business shall be liable for any and all losses suffered by BBVA Compass resulting from such reliance.
13. I hereby represent that: (a) The execution, delivery and performance of this Acknowledgement is duly authorized by me; (b) The execution, delivery, and performance by myself of this Acknowledgement, the consummation of the transactions contemplated herein, and the compliance with the terms and provisions hereof will not contravene any material provision of any law or regulation to which I am subject or any order or decree of any court of governmental authority applicable to me, and will not result in any material breach of, or constitute a default under, any indenture, mortgage, deed of trust, agreement or other instrument to which I am a party or by which I am bound.

This Acknowledgement is made by each of the following individual guarantor(s):

By: _____ (Signature of Authorized Signer)
Individually

Name: _____ (Name of Authorized Signer)

Date: _____

By: _____ (Signature of Authorized Signer)
Individually

Name: _____ (Name of Authorized Signer)

Date: _____

AUTHORIZATION TO RELEASE INFORMATION

There may be times when additional information is needed to review your situation thoroughly, including without limitation, ordering credit reports, verifying bank accounts in this disclosure, or obtaining any other information necessary to properly analyze your request. I/WE HEREBY AUTHORIZE YOU TO RELEASE TO **BBVA COMPASS** ANY AND ALL INFORMATION THEY MAY REQUIRE FOR THE PURPOSE OF A HARDSHIP REVIEW RELATING TO MY/OUR OBLIGATIONS OR BORROING BUSINESS'S OBLIGATIONS TO BBVA COMPASS.

By: _____ (Signature of Authorized Signer)
Individually

Name: _____ (Name of Authorized Signer)

Date: _____

By: _____ (Signature of Authorized Signer)
Individually

Name: _____ (Name of Authorized Signer)

Date: _____

HARDSHIP DOCUMENTATION

(provide a written explanation with this request describing the specific nature of your hardship)

I am requesting review of my current financial situation to determine whether I qualify for temporary or permanent relief options.

Date Hardship Began is: _____

I believe that my situation is:

- Short term (under 6 months)
- Medium term (6 – 12 months)
- Long-term or Permanent Hardship (greater than 12 months)

I am having difficulty making my monthly payment because of reasons set forth below:

(Please check all that apply and submit required documentation demonstrating your hardship)

| If Your Hardship is: | Then the Required Hardship Documentation is: |
|---|--|
| <input type="checkbox"/> Unemployment | <input type="checkbox"/> No hardship documentation required |
| <input type="checkbox"/> Underemployment | <input type="checkbox"/> No hardship documentation required, as long as you have submitted the income documentation that supports the income described in the Required Income Documentation section above |
| <input type="checkbox"/> Income reduction (e.g., elimination of overtime, reduction in regular working hours, or a reduction in base pay) | <input type="checkbox"/> No hardship documentation required, as long as you have submitted the income documentation that supports the income described in the Required Income Documentation section above |
| <input type="checkbox"/> Divorce or legal separation; Separation of Borrowers unrelated by marriage, civil union or similar domestic partnership under applicable law | <input type="checkbox"/> Divorce decree signed by the court OR <input type="checkbox"/> Separation agreement signed by the court OR <input type="checkbox"/> Current credit report evidencing divorce, separation, or non-occupying borrower has a different address OR <input type="checkbox"/> Recorded quitclaim deed evidencing that the non-occupying Borrower or co-Borrower has relinquished all rights to the property |
| <input type="checkbox"/> Death of a borrower or death of either the primary or secondary wage earner in the household | <input type="checkbox"/> Death certificate OR <input type="checkbox"/> Obituary or newspaper article reporting the death |
| <input type="checkbox"/> Long-term or permanent disability; Serious illness of a borrower/co-borrower or dependent family member | <input type="checkbox"/> Doctor’s certificate of illness or disability OR <input type="checkbox"/> Medical bills OR <input type="checkbox"/> Proof of monthly insurance benefits or government assistance (if applicable) |
| <input type="checkbox"/> Disaster (natural or man-made) adversely impacting the property or Borrower’s place of employment | <input type="checkbox"/> Insurance claim OR <input type="checkbox"/> Federal Emergency Management Agency grant or Small Business Administration loan OR <input type="checkbox"/> Borrower or Employer property located in a federally declared disaster area |
| <input type="checkbox"/> Distant employment transfer | <input type="checkbox"/> No hardship documentation required |
| <input type="checkbox"/> Business Failure | <input type="checkbox"/> Tax return from the previous year (including all schedules) AND <input type="checkbox"/> Proof of business failure supported by one of the following: <ul style="list-style-type: none"> • Bankruptcy filing for the business; or • Two months recent bank statements for the business account evidencing cessation of business activity; or • Most recent signed and dated quarterly or year-to-date profit and loss statement |

Department of the Treasury
Internal Revenue Service

► **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 our automated self-help service tools. Please visit us at IRS.gov and click on "Order a Transcript" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return**. There is a fee to get a copy of your return.

| | |
|--|---|
| 1a Name shown on tax return. If a joint return, enter the name shown first. | 1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions) |
|--|---|

| | |
|---|--|
| 2a 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 |
|---|--|

3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (See instructions)

4 Previous address shown on the last return filed if different from line 3 (See instructions)

5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax information.

Caution. If the transcript is being mailed to a third party, ensure that you have filled in line 6 and line 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy.

6 **Transcript requested.** Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ►

a **Return Transcript**, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days

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. Most requests will be processed within 30 calendar days.

c **Record of Account**, which is a combination of line item information and later adjustments to the account. Available for current year and 3 prior tax years. Most requests will be processed within 30 calendar days

7 **Verification of Nonfiling**, which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days

8 **Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2007, filed in 2008, will not be available from the IRS until 2009. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 45 days

Caution. If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

9 **Year or period requested.** Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, **either** husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note.** For transcripts being sent to a third party, this form must be received within 120 days of signature date.

Telephone number of taxpayer on line 1a or 2a

| | | | |
|------------------|--|------|--|
| Sign Here | Signature (see instructions) | Date | |
| | Title (if line 1a above is a corporation, partnership, estate, or trust) | | |
| | Spouse's signature | Date | |
| | | | |

General Instructions

Purpose of form. Use Form 4506-T to request tax return information. You can also designate a third party to receive the information. See line 5.

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

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 RAVS teams, send your request to the team based on the address of your most recent return.

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

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

If you filed an individual return and lived in:

Mail or fax to the "Internal Revenue Service" at:

Florida, Georgia (After June 30, 2011, send your transcript requests to Kansas City, MO)

RAIVS Team
P.O. Box 47-421
Stop 91
Doraville, GA 30362
770-455-2335

Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, 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

RAIVS Team
Stop 6716 AUSC
Austin, TX 73301

512-460-2272

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

RAIVS Team
Stop 37106
Fresno, CA 93888

559-456-5876

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

RAIVS Team
Stop 6705 P-6
Kansas City, MO
64999

816-292-6102

Chart for all other transcripts

If you lived in or your business was in:

Mail or fax to the "Internal Revenue Service" at:

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, or A.P.O. or F.P.O. address

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

801-620-6922

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

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

859-669-3592

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.

Line 6. Enter only one tax form number per request.

Signature and date. Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected.

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.

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 Internal Revenue Code 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.

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.

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**, 20 min.

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 the Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 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.

(Rev. January 2012)

Department of the Treasury
Internal Revenue Service

▶ **Request may not be processed if the form is incomplete or illegible.**

Tip. Use Form 4506T-EZ to order a 1040 series tax return transcript free of charge, or you can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Order a Transcript" or call 1-800-908-9946.

| | |
|--|--|
| 1a Name shown on tax return. If a joint return, enter the name shown first. | 1b First social security number or individual taxpayer identification number on tax return |
| 2a 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 |

3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)

4 Previous address shown on the last return filed if different from line 3 (see instructions)

5 If the transcript is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax information.

| | |
|---|------------------|
| Third party name | Telephone number |
| Address (including apt., room, or suite no.), city, state, and ZIP code | |

Caution. If the tax transcript is being mailed to a third party, ensure that you have filled in line 6 before signing. Sign and date the form once you have filled in this line. Completing this step helps to protect your privacy. Once the IRS discloses your IRS transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

6 **Year(s) requested.** Enter the year(s) of the return transcript you are requesting (for example, "2008"). Most requests will be processed within 10 business days.

Check this box if you have notified the IRS or the IRS has notified you that one of the years for which you are requesting a transcript involved **identity theft** on your federal tax return.

Note. If the IRS is unable to locate a return that matches the taxpayer identity information provided above, or if IRS records indicate that the return has not been filed, the IRS may notify you or the third party that it was unable to locate a return, or that a return was not filed, whichever is applicable.

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

Signature of taxpayer(s). I declare that I am the taxpayer whose name is shown on either line 1a or 2a. If the request applies to a joint return, **either** husband or wife must sign. **Note.** For transcripts being sent to a third party, this form must be received within 120 days of the signature date.

| | | | |
|------------------|--------------------------------|------|---|
| Sign Here | ▶ Signature (see instructions) | Date | Phone number of taxpayer on line 1a or 2a |
| | ▶ Spouse's signature | Date | |

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

What's New

The IRS has created a page on IRS.gov for information about Form 4506T-EZ at <http://www.irs.gov/form4506>. Information about any recent developments affecting Form 4506T-EZ (such as legislation enacted after we released it) will be posted on that page.

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

Purpose of form. Individuals can use Form 4506T-EZ to request a tax return transcript for the current and the prior three years that includes most lines of the original tax return. The tax return transcript will not show payments, penalty assessments, or adjustments made to the originally filed return. You can also designate (on line 5) a third party (such as a mortgage company) to receive a transcript. Form 4506T-EZ cannot be used by taxpayers who file Form 1040 based on a tax year beginning in one calendar year and ending in the following year (fiscal tax year). Taxpayers using a fiscal tax year must file Form 4506-T, Request for Transcript of Tax Return, to request a return transcript.

Use Form 4506-T to request tax return transcripts, tax account information, W-2 information, 1099 information, verification of non-filing, and record of account.

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

Where to file. Mail or fax Form 4506T-EZ to the address below for the state you lived in when the return was filed.

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 recent return.

If you filed an individual return and lived in:

Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, 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

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

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

Mail or fax to the "Internal Revenue Service" at:

RAIVS Team
Stop 6716 AUSC
Austin, TX 73301
512-460-2272

RAIVS Team
Stop 37106
Fresno, CA 93888
559-456-5876

RAIVS Team
Stop 6705 P-6
Kansas City, MO 64108
816-292-6102

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

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. If you request a transcript, sections 6103 and 6109 require you to provide this information, including your SSN. 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 4506T-EZ will vary depending on individual circumstances. The estimated average time is: **Learning about the law or the form**, 9 min.; **Preparing the form**, 18 min.; and **Copying, assembling, and sending the form to the IRS**, 20 min.

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

Internal Revenue Service
Tax Products Coordinating Committee
SE:W:CAR:MP:T:T:SP
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.

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.

Signature and date. Form 4506T-EZ must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506T-EZ within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.

Borrowing Business/Individual Guarantor Information Checklist For Your Information Only - Do Not Return with Your Information Package

GET STARTED – use this checklist to ensure you have completed all required forms and have the right information.

| | |
|---------------|--|
| Step 1 | <input type="checkbox"/> Complete and sign the Borrowing Business and Individual Guarantor Information Form Must be signed by all borrowers on the note (notarization is not required) and must include: |
| | <input type="checkbox"/> All income, expenses, and assets for each borrower <input type="checkbox"/> Complete Business Schedule <input type="checkbox"/> A signed, dated letter explaining the Business/Individual Guarantor hardship and plan of action for curing the hardship <input type="checkbox"/> Your acknowledgment and agreement that all information that you provide is true and accurate |
| Step 2 | <input type="checkbox"/> Complete and sign a dated copy of IRS Form 4506-T or 4506-EZ |
| | <input type="checkbox"/> For each borrower, please submit a signed, dated copy of IRS Form 4506-T or 4506-EZ (Request for transcript of tax return) <input type="checkbox"/> Borrowers who filed their tax returns jointly may send in one IRS Form 4506-T or 4506-EZ signed and dated by both joint filers <input type="checkbox"/> Complete federal and state returns (including schedules) for prior two (2) years |
| Step 3 | <input type="checkbox"/> Provide required Income Documentation This documentation will be used to verify your hardship. |
| | <input type="checkbox"/> Year-to-date balance sheet and Income Statement (Borrowing Business and Individual Guarantor) <input type="checkbox"/> Personal financial statement (no more than six (6) months old) <input type="checkbox"/> Complete bank statements for prior two (2) months <input type="checkbox"/> Description of supplemental/other income; amount and duration |
| Step 4 | <input type="checkbox"/> Gather and send completed documents <u>AS SOON AS POSSIBLE.</u> You must send in all required documentation listed in steps 1-3 and summarized below: |
| | <ul style="list-style-type: none"> • Borrower Business/Individual Guarantor Information Form • Hardship documentation as outlined in Step 1 • Form 4506-T or 4506-EZ; federal and state returns as outlined in Step 2 • Income documentation as outlined in step 3 <p>Please mail all documents above to :</p> <p><u>Loans \$100,000 or less- BBVA Compass , Attn: AL-BI-HW-RTS/ Small Business Portfolio Management</u> <u>P.O. Box 10566 Birmingham, AL. 35296</u></p> |

IMPORTANT REMINDERS:

- If you cannot provide the documentation, have other types of income not specified the Information Form, cannot locate some or all of the required documents, OR have any questions, please contact us at **1-855-219-4161**.
- Keep a copy of all documents and proof of mailing/emailing for your records. **Don't send original documents. Copies are acceptable.**

Questions? Contact us at 1-855-219-4161