

*Do not sign this form unless all applicable lines have been completed. Please read the instructions on page 2 before completing this form.*

<b>1a. Name of taxpayer</b> (first name, middle initial, last name, or name of business) <input style="width: 95%;" type="text"/>	<b>1b. Taxpayer identification number</b> (SSN, ITIN, or EIN) <input style="width: 95%;" type="text"/>
<b>2a. Spouse's name</b> (if joint return, first name, middle initial, last name) <input style="width: 95%;" type="text"/>	<b>2b. Spouse's taxpayer identification number</b> (SSN or ITIN) <input style="width: 95%;" type="text"/>
<b>3. Current name, address (including apt., room, or suite no.), city, state, and ZIP code</b> <input style="width: 95%;" type="text"/>	
<b>4. Previous address shown on the last return filed if different from line 3</b> <input style="width: 95%;" type="text"/>	
<b>5a. IVES Participant name, address, and IVES participant ID number</b> <input style="width: 95%;" type="text"/>	
<b>5b. Client name, client code, and address</b> <input style="width: 95%;" type="text"/>	
<b>5c. Unique Identifier</b> (if applicable) <input style="width: 95%;" type="text"/>	<b>5d. Client Phone Number</b> <input style="width: 95%;" type="text"/>
<b>6. Tax return transcript requested.</b> Enter Form number (1040, 1065, 1120, etc.) and item a or b below. <input style="width: 95%;" type="text"/>	
<b>6a. Return Transcript</b> (Type "Yes" to request): <input style="width: 50px;" type="text"/> <i>Note: If you want an Account Transcript instead, use line 6b.</i>	
<b>6b. Account Transcript</b> (Type "Yes" to request): <input style="width: 50px;" type="text"/>	
<b>7. Record of Account</b> (Type "Yes" to request): <input style="width: 50px;" type="text"/>	
<b>8. Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript</b> (Type "Yes" to request): <input style="width: 50px;" type="text"/>	
<b>9. Year or period requested.</b> Enter the ending date of the tax year or period using the mm/dd/yyyy format. Period 1: <input style="width: 50px;" type="text"/> Period 2: <input style="width: 50px;" type="text"/> Period 3: <input style="width: 50px;" type="text"/> Period 4: <input style="width: 50px;" type="text"/>	

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<b>Signature of Taxpayer(s)</b> 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.	
Taxpayer Signature (Print Name): <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
Phone Number: <input style="width: 95%;" type="text"/>	
Spouse's Signature (Print Name): <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>