

# Form 9465

(Rev. December 2012)  
Department of the Treasury  
Internal Revenue Service

## Installment Agreement Request

- Information about Form 9465 and its separate instructions is at [www.irs.gov/form9465](http://www.irs.gov/form9465).
- If you are filing this form with your tax return, attach it to the front of the return.
- See separate instructions.

OMB No. 1545-0074

**Tip:** If you owe less than \$50,000, you may be able to establish an installment agreement on-line, even if you have not yet received a bill for your taxes. Go to IRS.gov to apply to pay on-line.

**Caution:** Do not file this form if you are currently making payments on an installment agreement or can pay your balance in full within 120 days. Instead, call 1-800-829-1040. If you are in bankruptcy or we have accepted your offer-in-compromise, see **Bankruptcy or offer-in-compromise**, in the instructions.

This request is for Form(s) (for example, Form 1040 or Form 1040EZ) ►

and for tax year(s) (for example, 2011 and 2012) ►

|                                                                                                          |           |                                 |
|----------------------------------------------------------------------------------------------------------|-----------|---------------------------------|
| 1 Your first name and initial                                                                            | Last name | Your social security number     |
| If a joint return, spouse's first name and initial                                                       | Last name | Spouse's social security number |
| Current address (number and street). If you have a P.O. box and no home delivery, enter your box number. |           | Apt. number                     |

City, town or post office, state, and ZIP code. If a foreign address, enter city, province or state, and country. Follow the country's practice for entering the postal code.

2 If this address is new since you filed your last tax return, check here . . . . . ►

|                                                                                                     |                                                                         |                        |      |                          |
|-----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|------------------------|------|--------------------------|
| 3                                                                                                   | 4                                                                       |                        |      |                          |
| Your home phone number                                                                              | Best time for us to call                                                | Your work phone number | Ext. | Best time for us to call |
| 5 Name of your bank or other financial institution:<br><br>Address<br><br>City, state, and ZIP code | 6 Your employer's name:<br><br>Address<br><br>City, state, and ZIP code |                        |      |                          |

|                                                                                                                                                                                                                                                                                                                                                                                                |   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| 7 Enter the total amount you owe as shown on your tax return(s) (or notice(s))<br><br><b>Note:</b> If the amount on line 7 is greater than \$25,000 but not more than \$50,000, you <b>must</b> complete line 11. If you owe more than \$50,000, complete Form 433-F and attach it to your request.<br>See instructions . . . . .                                                              | 7 |
| 8 Enter the amount of any payment you are making with your tax return(s) (or notice(s)). See instructions                                                                                                                                                                                                                                                                                      | 8 |
| 9 Enter the amount you can pay each month. <b>Make your payments as large as possible to limit interest and penalty charges.</b> The charges will continue until you pay in full. If no payment amount is listed on line 9, or the proposed payment does not meet our streamlined processing criteria, a payment will be determined for you by dividing the balance due by 72 months . . . . . | 9 |

10 Enter the date you want to make your payment each month. **Do not** enter a date later than the 28th ►  
11 If you want to make your payments by electronic funds withdrawal from your checking account, see the instructions and fill in lines 11a and 11b. This is the most convenient way to make your payments and it will ensure that they are made on time.

- a Routing number
- b Account number

I authorize the U.S. Treasury and its designated Financial Agent to initiate a monthly ACH debit (electronic withdrawal) entry to the financial institution account indicated for payments of my Federal taxes owed, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke payment, I must contact the U.S. Treasury Financial Agent at **1-800-829-1040** no later than 14 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payments of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payments.

|                |      |                                                               |      |
|----------------|------|---------------------------------------------------------------|------|
| Your signature | Date | Spouse's signature. If a joint return, <b>both</b> must sign. | Date |
|----------------|------|---------------------------------------------------------------|------|

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

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