## Form **9465**(Rev. September 2020) Department of the Treasury Internal Revenue Service

## **Installment Agreement Request**

▶ Go to www.irs.gov/Form9465 for instructions and the latest information.
 ▶ 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 \$50,000 or less, you may be able to avoid filing Form 9465 and establish an installment agreement online, even if you haven't yet received a tax bill. Go to *www.irs.gov/OPA* to apply for an Online Payment Agreement. If you establish your installment agreement using the Online Payment Agreement application, the user fee that you pay will be lower than it would be with Form 9465.

Part	Installment Agreement Reques	st							
This red	quest is for Form(s) (for example, Form 1040 or	Form 941) ►							
	x year(s) or period(s) involved (for example, 2018 a	nd 2019, or Janu	ary 1, 2	019, to June 30, 2019) ►					
1a	Your first name and initial	first name and initial Last name Your				our socia	our social security number		
	If a joint vature analyse's first name and initial					Spouse's social security number			
	ii a joint return, spouse's first name and initial	oint return, spouse's first name and initial Last name Spouse's soc				ociai	security number		
	Current address (number and street). If you ha	ve a P.O. box and no home delivery, enter your box number			er.	Apt. number		number	
	City, town or post office, state, and ZIP code.	lf a foreign addre	ess, als	o complete the spaces below (see	instruc	tions).			
	Foreign country name			Foreign province/state/county			Fore	gn postal code	
1b	If this address is new since you filed your		, chec	k here				▶ 📙	
2	Name of your business (must no longer be ope	erating)			Em	ıployer idei	ntificat	ion number (EIN)	
3	- Northwest		4						
5	Your home phone number Best time Enter the total amount you owe as shown	for us to call	turn/o	Your work phone number	Ext.	5	est tim	e for us to call	
6	If you have any additional balances due t	•	•						
O	the amounts are included in an existing in					"   6			
7	Add lines 5 and 6 and enter the result					7			
8						8			
9	Enter the amount of any payment you're making with this request. See instructions								
10	Divide the amount on line 9 by 72.0 and 6	enter the result				10			
11a	Enter the amount you can pay each mon			ent as large as possible to limit	intere	st			
	and penalty charges, as these charges will continue to accrue until you pay in full. If you have								
	an existing installment agreement, this								
	payment amount for all your liabilities. If the determined for you by dividing the b						¢		
b	If the amount on line 11a is less than the					_	Ψ		
b	to an amount that is equal to or greater that						\$		
	If you can't increase your payment on lii				-			box. Also.	
	complete and attach Form 433-F, Collect								
	• If the amount on line 11a (or 11b, if app	licable) is more	than	or equal to the amount on line	10 and	the amo	unt y	ou owe is	
	over \$25,000 but not more than \$50,000, 433-F, then you must complete either line		t have	to complete Form 433-F. How	ever, if	f you don	't cor	nplete Form	
	• If the amount on line 9 is greater than \$		ata an	d attach Form 433-F					
12	Enter the date you want to make your pay				28th	12			
13	If you want to make your payments by o						fill in	lines 13a and	
10	13b. This is the most convenient way to r		-	,				iiiles ioa ana	
<b>▶</b> a	Routing number			ount number	П		П		
	I authorize the U.S. Treasury and its designated Finar	ncial Agent to initia	te a mo	nthly ACH debit (electronic withdrawal)					
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 fu 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									
	1-800-829-1040 no later than 14 business days prior	to the payment (se	ettlemen	t) date. I also authorize the financial inst	itutions	involved in			
_	electronic payments of taxes to receive confidential in		•	·			t by	orovidina varr	
C	Low-income taxpayers only. If you're banking information on lines 13a and 1								
	installment agreement. See instructions.				, ,			, , ,	
14	If you want to make payments by payroll				orm 2	2159		📙	
	ing and submitting this form, I authorize the IRS								
	and administer the agreement over its duration. I								
Your si	gnature	Date		Spouse's signature. If a joint return	, both	must sign		Date	
		1						I	

Part II Additional Information
Complete this Part only if all three conditions below apply:

Part	Additional Information							
Complete this Part only if all three conditions below apply:								
	1. You defaulted on an installment agreement in							
	2. You owe more than \$25,000 but not more than \$50,000; and							
	3. The amount on line 11a (or 11b, if applicable) is less than line 10.							
Note	If you owe more than \$50,000, also complete and							
15	In which county is your primary residence?							
16a	a Marital status:							
	☐ Single. Skip question 16b and go to question 17.							
	☐ Married. Go to question 16b.							
b	Do you share household expenses with your spouse?							
Б	Yes.							
	☐ No.							
	□ NO.							
47			47					
17	How many dependents will you be able to claim on the	is year's tax return?	17					
40	New manny manufactor was the base of an alder		140					
18	How many people in your household are 65 or older?		18					
40	Herrichten aus von meid?							
19	How often are you paid?							
	Once a week.							
	Once every 2 weeks.							
	Once a month.							
	☐ Twice a month.							
		10	-					
20	What is your net income per pay period (take home page)	ay)?	20 \$					
Note	Complete lines 21 and 22 only if you have a spot	use and meet certain conditions (see instru	ctions) If you don't					
	a spouse, go to line 23.	doc and meet certain conditions (see meta	otions). If you don't					
21	How often is your spouse paid?							
	Once a week.							
	Once every 2 weeks.							
	Once a month.							
	☐ Twice a month.							
22	What is your spouse's net income per pay period (take	e home pay)?	22  \$					
23	How many vehicles do you own?		23					
	, , ,							
24	How many car payments do you have each month?		24					
	. , , ,							
25a	Do you have health insurance?							
	Yes. Go to guestion 25b.	☐ No. Skip question 25b and go to question	26a.					
b	Are your health insurance premiums deducted from your							
	Yes. Skip question 25c and go to question 26a.	☐ No. Go to question 25c.						
С	How much are your monthly health insurance premiun	ns?	25c \$					
	, , , , , , , , , , , , , , , , , , , ,							
26a	Do you make court-ordered payments?							
	Yes. Go to question 26b.	☐ No. Go to question 27.						
	·	·						
b	A way to the contract of the c	pavcheck?						
-	Are your court-ordered payments deducted from your							
-	Yes. Go to question 27.	☐ No. Go to question 26c.						
	Yes. Go to question 27.	☐ No. Go to question 26c.	260 \$					
С		☐ No. Go to question 26c.	26c  \$					
	Yes. Go to question 27.	No. Go to question 26c.	26c  \$					