



4156 Manchester Ave.  
St. Louis, MO 63110  
314-533-0600 ext. 22

**Here is the list of documents needed in order to assist you:**

1. Brief hardship letter stating your current situation
2. Last 30 days of pay stubs if employed
3. Proof of any other income: SSI, unemployment, pension, food stamps
4. Self employed: Year to Date Profit and Loss Statement
5. Last 2 months of bank statements **(all pages)**
6. Most recent mortgage statement
7. Foreclosure sale/default letters/attorney letters
8. One (1) recent utility bill
9. Photo ID if you have one

**You may mail, email, fax, or drop off the paperwork. We will schedule an appointment but failure to provide the requested information could result in cancellation.**

*Note: While we will work hard on your behalf, Beyond Housing cannot guarantee that your situation will be resolved. The ultimate solution rests with you, the homeowner, and the lender/servicer of your loan.*

Fax: 888-704-0042  
Location: Beyond Housing/Foreclosure Intervention  
4156 Manchester Ave., St. Louis, MO 63110



**HUD CERTIFIED COUNSELING AGENCY # 8 1120  
EIN# 510 179471**

**4156 Manchester Ave., St. Louis, MO  
314-533-0600 ext. 22**

Date: \_\_\_\_\_ Fax # \_\_\_\_\_

I hereby authorize the Foreclosure Intervention Department of Beyond Housing to discuss my mortgage and current situation with regard to delinquency, on my behalf, with the lender/servicer and/or foreclosing trustee of my mortgage loan. Members of the department include Linda Ingram, Ava Smith, Lindy Tarrant, Michele Chapel and Janis Branneky.

In addition, I hereby authorize Beyond Housing to release/exchange information with other institutions, companies and agencies that may provide assistance in resolving a mortgage default.

I acknowledge that I may revoke this consent at any time. I also acknowledge that this consent expires one year from the date above.

**Before signing this Third-Party Authorization, beware of foreclosure rescue scams**

- It is expected that a HUD approved housing counselor, HFA representative or other authorized third party will work directly with your lender/ mortgage servicer.
- Please visit <http://makinghomeaffordable.gov/counselor.html> to verify you are working with a HUD approved housing counseling agency.
- Beware of anyone who asks you to pay a fee in exchange for a counseling service or modification of a delinquent loan.

Name: (Print) \_\_\_\_\_

Property Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone # \_\_\_\_\_ Alternate Phone # \_\_\_\_\_

Lender: \_\_\_\_\_

Loan Number: \_\_\_\_\_

Signature: \_\_\_\_\_

Last Four Digits of SS#: \_\_\_\_\_

**Request for Transcript of Tax Return**

▶ Request may be rejected if the form is incomplete or illegible.

OMB No. 1545-1872

**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](http://IRS.gov) and click on "Order a Return or Account 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.	

**Caution.** If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax 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 **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 10 business days
  - c **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. Most requests will be processed within 10 business 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, 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 2011, filed in 2012, will likely not be available from the IRS until 2013. 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 10 business 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.

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

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

**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, at least one spouse 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 the signature date.

Phone number of taxpayer on line 1a or 2a

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

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

### Future Developments

For the latest information about Form 4506-T and its instructions, go to [www.irs.gov/form4506t](http://www.irs.gov/form4506t). Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

### General Instructions

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

**Purpose of form.** Use Form 4506-T to request tax return information. You can also designate (on line 5) a third party to receive the information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

**Note.** If you are unsure of which type of transcript you need, request the Record of Account, as it provides the most detailed information.

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

**Automated transcript request.** You can quickly request transcripts by using our automated self-help service tools. Please visit us at [IRS.gov](http://IRS.gov) and click on "Order a Return or Account Transcript" or call 1-800-908-9946.

**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 addresses, send your request to the address based on the address of your most recent return.

### Chart for individual transcripts (Form 1040 series and Form W-2 and Form 1099)

If you filed an individual return and lived in:	Mail or fax to:
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	Internal Revenue Service RAVTS Team Stop 6716 AUSC Austin, TX 73301
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	Internal Revenue Service RAVTS Team Stop 37106 Fresno, CA 93888
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	Internal Revenue Service RAVTS 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:
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	Internal Revenue Service RAVTS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409
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	Internal Revenue Service RAVTS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45260
	801-620-6922
	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. For a business address, file Form 8822-B, Change of Address or Responsible Party—Business.

**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. Ensure that all applicable lines are completed before signing.

**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 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.

**Signature by a representative.** A representative can sign Form 4506-T 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 Form 4506-T.

**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:

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.

## FINANCIAL STATEMENT

Borrower's Name: \_\_\_\_\_

Co-Borrower's Name: \_\_\_\_\_

Loan #: \_\_\_\_\_

BORROWER'S MONTHLY DEBTS		
<b>Housing Expenses</b>	1 <sup>st</sup> Mortgage	
	2nd Mortgage	
	Property Taxes	
	Homeowners Insurance	
	Neighborhood/Condo Fee	
<b>Utilities</b>	Gas	
	Electric	
	Water	
	Sewer	
	Trash	
	Cell Phone	
	Home Phone	
	Cable	
	Internet	
<b>Food/Supplies</b>	Groceries	
	Household Supplies	
<b>Transportation</b>	Car Maintenance	
	Car Payment	
	Car Insurance	
	Gas for Car	
<b>Insurance</b>	Med/Dent Insurance	
	Life/Disability Insurance	
<b>Monthly Debts</b>	Credit Cards	
	Personal Loans	
	Student Loans	
<b>Other</b>	Child Care/Education	
	Medical Expenses	
	Entertainment	
	Gifts	
	Misc.	
	<b>TOTAL:</b>	

<b>BORROWER'S MONTHLY INCOME</b>		
	<b>GROSS</b>	<b>NET</b>
Wages, Job 1		
Wages, Job 2		
Wages, Job 3		
Wages, Job 4		
Self employed, job 1		
Self employed, job 2		
Social Security 1		
Social Security 2		
Social Security 3		
Social Security 4		
Pension 1		
Pension 2		
Child Support/Alimony		
Food Stamps		
Unemployment		
Other		
Other		
<b>TOTAL</b>		

<b>SURPLUS/DEFICIT</b>		
<b>Write total net income in the space below</b>	<b>Write total expenses in the space below</b>	<b>Subtract "expenses" from "net income" and write number below</b>

Borrower's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Co-borrower's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Lender: _____	Investor: _____
Lender Phone Number: _____	Loan # _____
Last 4 #s of Social Security #: _____	

**Homeowner(s) listed on the mortgage:**

**Homeowner #1**

**Homeowner #2**

Full Name:	_____	_____
Property Address:	_____	_____
City, State:	_____ Zip: _____	City/ County: _____
Social Security #:	_____	_____
Home Telephone:	_____	_____
Cell phone/Alt. #:	_____	_____
Best time to call:	_____	_____
E-Mail address:	_____	_____
Date of Birth:	_____	_____
Race:	_____	_____
Gender:	<input type="checkbox"/> MALE / <input type="checkbox"/> FEMALE	<input type="checkbox"/> MALE / <input type="checkbox"/> FEMALE
Marital Status	_____	_____
Educational Level	_____	_____
Number in household	_____	Ages: _____
Contact Person not living with you:	_____	Phone Number: _____
Disabled _____	Veteran _____	Foreign Born _____
		Hispanic _____

**Homeowner(s) Employer information:**

**Homeowner #1**

**Homeowner #2**

Employer:	_____	_____
Address:	_____	_____
City, State, Zip & County:	_____	_____
Phone:	_____	_____
Hire Date:	_____	_____

# Mortgage information / history

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When did you purchase your home? \_\_\_\_\_ Original purchase price? \_\_\_\_\_

Type of loan (FHA/Conventional/VA) \_\_\_\_\_

Have you ever refinanced? (Y/N) \_\_\_\_\_ How many times have you refinanced? \_\_\_\_\_

When did you last refinance your home? \_\_\_\_\_ Loan amount of the refinance? \_\_\_\_\_

**Have you ever received a modification? (Y/N)** \_\_\_\_\_ **If so When** \_\_\_\_\_

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## Primary Mortgage

## 2<sup>nd</sup> Mortgage (if applicable)

Lender Name: \_\_\_\_\_

Loan #: \_\_\_\_\_

Current Payment: \_\_\_\_\_

Interest Rate: \_\_\_\_\_ %(fixed or ARM) \_\_\_\_\_ %(fixed or ARM)

Loan balance: \_\_\_\_\_

Loan Type: \_\_\_\_\_  
(FHA, VA, Conventional)

# of payments missed: \_\_\_\_\_

Date of last payment: \_\_\_\_\_

How much will it take to bring your mortgage current? \_\_\_\_\_

What is the estimated current value of property? \$ \_\_\_\_\_

What condition is the property in? : EXCELLENT, GOOD, FAIR or POOR. (circle one)

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Have you filed bankruptcy since you owned your home? \_\_\_\_\_

Are you currently in bankruptcy? \_\_\_\_\_

Have you received any letters from a foreclosure attorney? \_\_\_\_\_



# BEYONDHOUSING

## Privacy Policy

Beyond Housing is committed to assuring the privacy of individuals and/or families who have contacted us for assistance. We realize that the concerns you bring to us are highly personal in nature. We assure you that all information shared both orally and in writing will be managed within legal and ethical considerations. Your "nonpublic personal information," such as your total debt information, income, living expenses and personal information concerning your financial circumstances, will be provided to creditors, program monitors, and others only with your authorization and signature on the Foreclosure Mitigation Counseling Agreement. We may also use anonymous aggregated case file information for the purpose of evaluating our services, gathering valuable research information and designing future programs.

### **Types of information that we gather about you**

- Information we receive from you orally, on applications or other forms, such as your name, address, social security number, assets, and income;
- Information about your transactions with us, your creditors, or others, such as your account balance, payment history, parties to transactions and credit card usage; and
- Information we receive from a credit reporting agency, such as your credit history.

### **You may opt-out of certain disclosures**

1. You have the opportunity to "opt-out" of disclosures of your nonpublic personal information to third parties (such as your creditors), that is, direct us not to make those disclosures.
2. If you choose to "opt-out", we will not be able to answer questions from your creditors. If at any time, you wish to change your decision with regard to your "opt-out", you may call us at (314-533-0600) and do so.

### **Release of your information to third parties**

1. So long as you have not opted-out, we may disclose some or all of the information that we collect, as described above, to your creditors or third parties where we have determined that it would be helpful to you, would aid us in counseling you, or is a requirement of grant awards which make our services possible.
2. We may also disclose any nonpublic personal information about you or former customers to anyone as permitted by law (e.g., if we are compelled by legal process).
3. Within the organization, we restrict access to nonpublic personal information about you to those employees who need to know that information to provide services to you. We maintain physical, electronic and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**Foreclosure Mitigation Counseling Agreement**

1. I understand that Beyond Housing provides foreclosure mitigation counseling after which I will receive a written action plan consisting of recommendations for handling my finances, possibly including referrals to other housing agencies as appropriate.
2. I understand that Beyond Housing receives Congressional funds through the National Foreclosure Mitigation Counseling (NFMC) program and, as such, is required to share some of my personal information with NFMC program administrators or their agents for purposes of program monitoring, compliance and evaluation.
3. I give permission for NFMC program administrators and/or their agents to follow-up with me within the next three years for the purposes of program evaluation.
4. I acknowledge that I have received a copy of Beyond Housing's Privacy Policy.
5. I may be referred to other housing services of the organization or another agency or agencies as appropriate that may be able to assist with particular concerns that have been identified. I understand that I am not obligated to use any of the services offered to me.
6. A counselor may answer questions and provide information, but not give legal advice. If I want legal advice, I will be referred for appropriate assistance.
7. I understand that Beyond Housing provides information and education on numerous loan products and housing programs and I further understand that the housing counseling I receive from Beyond Housing in no way obligates me to choose any of these particular loan products or housing programs.

Client's signature \_\_\_\_\_

Date \_\_\_\_\_

Client's signature \_\_\_\_\_

Date \_\_\_\_\_

