## ATS Test Scenario 8 Taxpayer: Terry Smith SSN: 400-00-1044

Test	Scenario	8	includes	the	following	form:
1031	Occidant	v	IIIGIAACS	uic	IOIIOWIIIG	101111.

• Form 9465

Additional Information:

Taxpayer made a payment of \$2,000 with Form 9465.

## 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.

	There do not a symmetric Agreement		-			-				
Part			10.10							
	quest is for Form(s) (for example, Form 1040 c									
	x year(s) or period(s) involved (for example, 2018			2019, to June 30, 2019) ► 2023						
1a	Your first name and initial Last name				our social security number					
	Terry	Smith				400-00-1044 Spouse's social security number				
	If a joint return, spouse's first name and initia	irst name and initial Last name								
	Current address (number and street). If you have 452 State Street			Apt. number						
	City, town or post office, state, and ZIP code. If a foreign address, also complete the spaces below (see instructions).									
	Houston, Texas 77001									
	Foreign country name	NI		Foreign province/state/county		Fore	eign postal code			
1b	If this address is new since you filed you		return, ched	ck here			▶ 🗌			
2	Name of your business (must no longer be of	perating)			Employ	er identifica	tion number (EIN)			
3	832-222-3333 5:00	2-222-3333 5:00pm		000 005 7050		9:00am				
·		e for us to	call 4	888-225-7050 Your work phone number	Ext.	8:00am Best time for us to call				
5	Enter the total amount you owe as show			·			7,250			
6	If you have any additional balances due	-	-		even if		,			
	the amounts are included in an existing					6				
7	Add lines 5 and 6 and enter the result					7				
8	Enter the amount of any payment you're	making	with this req	uest. See instructions		8				
9	Amount owed. Subtract line 8 from line		9							
10	Divide the amount on line 9 by 72.0 and	enter the	result .			10				
11a	Enter the amount you can pay each month. Make your payment as large as possible to limit interest and penalty charges, as these charges will continue to accrue until you pay in full. If you have an existing installment agreement, this amount should represent your total proposed monthly payment amount for all your liabilities. If no payment amount is listed on line 11a, a payment will be determined for you by dividing the balance due on line 9 by 72 months									
b	If the amount on line 11a is less than the									
	to an amount that is equal to or greater the				-					
	• If you can't increase your payment on line 11b to more than or equal to the amount shown on line 10, check the box. Also, complete and attach Form 433-F, Collection Information Statement									
	• If the amount on line 9 is greater than		-				4-4			
12	Enter the date you want to make your payment each month. <b>Don't</b> enter a date later than the 28th    1st									
13	If you want to make your payments by direct debit from your checking account, see the instructions and fill in lines 13a and 13b. This is the most convenient way to make your payments and it will ensure that they are made on time.									
► a	Routing number 1011110271    b Account number 4567890    l 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.									
С	<b>Low-income taxpayers only.</b> If you're unable to make electronic payments through a debit instrument by providing your banking information on lines 13a and 13b, check this box and your user fee will be reimbursed upon completion of your installment agreement. See instructions									
14	If you want to make payments by payro									
, .	ing and submitting this form, I authorize the IF and administer the agreement over its duration	S to conta	ct third partie	s and to disclose my tax information	to third pa	arties in ord	er to process this			
	gnature		ate	Spouse's signature. If a joint return,			Date			

27

Not including any court-ordered payments for child and dependent support, how much do you pay