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) ►		1040					
Enter ta	x year(s) or period(s) involved (for example, 2018 a	nd 2019, or Jan	uary 1, 2	2019, to June 30, 2019) ►	2014	, 2020,	2021		
1a	Your first name and initial	Last name			You	Your social security number			
	Michael	Connelly				195-50-2329 Spouse's social security number			
	If a joint return, spouse's first name and initial	Last name			Spo				
	Elizabeth	Connelly				18	80-64-	8531	
	Current address (number and street). If you ha	ve a P.O. box a	and no h	nome delivery, enter your box number			Apt. r	number	
	952 Briar Ln								
	ity, town or post office, state, and ZIP code. If a foreign address, also complete the spaces below (see instructions).								
	Pottstown, PA 19464								
	Foreign country name	Foreign province/state/county				Foreign posta		gn postal code	
1b	If this address is new since you filed your	last tax retur	n, chec	ck here				▶ 🗌	
2	Name of your business (must no longer be ope		-				ntificati	on number (EIN)	
3	(423) 482-9737 9:00 AM to	4·00 PM	4						
		for us to call		Your work phone number	Ext.	Be	est time	e for us to call	
5	Enter the total amount you owe as shown	on your tax	return(s	•		5		66,633	
6	If you have any additional balances due t	•	,	, , , , , , , , , , , , , , , , , , ,				33/223	
	the amounts are included in an existing in					6			
7	Add lines 5 and 6 and enter the result .			.		7		66,633	
8	Enter the amount of any payment you're	making with t	his rea	uest. See instructions		8		0.00	
9	Enter the amount of any payment you're making with this request. See instructions						66,633		
10	Divide the amount on line 9 by 72.0 and 6							926	
11a	Enter the amount you can pay each month					10		720	
	and penalty charges, as these charges								
	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 b	alance due	on line	9 by 72 months		11a	\$	750	
b	If the amount on line 11a is less than the	amount on lin	e 10 ar	nd you're able to increase your pa	yment				
	to an amount that is equal to or greater than the amount on line 10, enter your revised monthly payment 11b \$								
	• If you can't increase your payment on lin					, chec	k the		
	complete and attach Form 433-F, Collect							🗸	
	• If the amount on line 11a (or 11b, if app								
	over \$25,000 but not more than \$50,000, 433-F, then you must complete either line	then you dor	i't nave	to complete Form 433-F. Howe	er, if yo	u don	't con	npiete Form	
	• If the amount on line 9 is greater than \$		oloto on	nd attach Form 433 F					
12	Enter the date you want to make your pay				09+h	12			
						$\overline{}$	£:11 :	lines 10s and	
13	13 If you want to make your payments by direct debit from your checking account, see the instructions and fill in lines								
▶ a	13b. This is the most convenient way to make your payments and it will ensure that they are made on time. Routing number 2 3 1 3 8 2 3 0 6 ▶ b Account number 7 5 7 7 8 7 6 7 3 8								
– a	Routing number 2 3 1 3 8 2 3 0 6								
	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	Low-income taxpayers only. If you're	unable to m	ake ele	ectronic payments through a de	bit instr	ument	by r	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 payroll	deduction, ch	neck th	is box and attach a completed Fo	orm 215	9		🗂	
By sign	ing and submitting this form, I authorize the IRS	to contact thir	d parties	s and to disclose my tax information t	o third p	arties ir	n ordei	to process this	
request and administer the agreement over its duration. I also agree to the terms of this agreement, as provided in the instructions, if it's approved by the IRS.									
Your si	gnature	Date		Spouse's signature. If a joint return,	both mu	th must sign. Date		Date	
				•		-			

Form 9465 (Rev. 9-2020)

Part	Additional Information						
Comp	plete this Part only if all three conditions below apply:						
	1. You defaulted on an installment agreement in the						
	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 \$\chi_{0.00}^{\phi_{0.00}}\$ also applicables and at						
vote	: If you owe more than \$50,000, also complete and at	tach Form 433-F.					
15	In which county is your primary residence? Montgomery						
16a	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?						
	Yes.						
	✓ No.						
17	How many dependents will you be able to claim on this ye	ear's tax return?	 17 0				
	The wind appendence will you be able to claim on the ye		0				
18	How many people in your household are 65 or older? .		18 0				
19	How often are you paid?						
	Once a week.						
	Once every 2 weeks.						
	☐ Once a month. ✓ Twice a month.						
	Twice a monun.						
20	What is your net income per pay period (take home pay)?		20 \$ 5770				
Vote	: Complete lines 21 and 22 only if you have a spouse	and meet certain conditions (see instru	ctions) If you don't				
	a spouse, go to line 23.	and most contain containens (cos mond	otionoj. ii 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 ho	me pay)?	22 \$				
			I I				
23	How many vehicles do you own?		23 1				
04							
24	How many car payments do you have each month?		24 1				
25a	Do you have health insurance?						
	✓ Yes. Go to question 25b.	No. Skip question 25b and go to question 2	26a.				
	·						
b	Are your health insurance premiums deducted from your party. Yes. Skip question 25c and go to question 26a.	No. Go to question 25c.					
			I I.				
С	How much are your monthly health insurance premiums?		25c \$				
260	Do you make court-ordered payments?						
26a		No. Go to question 27.					
	·						
b	Are your court-ordered payments deducted from your pay						
	Yes. Go to question 27.	No. Go to question 26c.					
С	How much are your court-ordered payments each month?	?	26c \$				
27	Not including any court-ordered payments for child and o		a= a				
	for child or dependent care each month?		27 \$ 565				