FIRST FEDERAL BANK
OF CALIFORNIA

12555 W. JEFFERSON BLVD., LOS ANGELES, CA 90066

Date: ______________________________ Loan Number: _________________________________

Borrower(s) Name(s): ____

Address: ____

Address 2: ____

Dear Client(s):

Thank you for contacting us regarding your current financial situation. In order to respond to your request for a loan modification, please submit the following information to the undersigned as soon as possible. If you are unable to provide all of the information requested, please call us immediately so we may advise you accordingly. **Please only send copies of requested documentation as original documents cannot be returned.**

1. PERSONAL FINANCIAL STATEMENT (enclosed) - Please complete, sign, date and return.
   a. Section entitled "Reason for Hardship" MUST be completed with a narrative describing your current financial situation. Please provide as much specificity as necessary for us to make a determination as to the best course of action for you. You should indicate the source of your financial hardship, its expected duration and the financial resources with which you will manage your debt going forward.
2. LETTER AGREEMENT (enclosed) - Please sign, date and return.
3. REQUEST FOR TRANSCRIPT OF TAX RETURN FORM 4506-T (enclosed) – Please sign, date and return.
4. If you are a SALARIED EMPLOYEE, please provide the following:
   a. Copy of your most recent W -2
   b. Copy of your most recent paystub
5. If you are SELF-EMPLOYED, please provide the following information, as applicable:
   a. Signed and dated copy of your most recent Personal Tax Return (1040's), including all schedules and most recent paystub;
   b. Signed and dated copy of your most recent Corporate Tax Return, including all schedules, if applicable;
   c. Signed and dated copy of year-to-date Profit and Loss Statement and most recent month-end and quarter-end Balance Sheet; and
   d. Articles of Incorporation or Organization and Bylaws or Operating Agreement
6. If you are RETIRED/DISABLED/FIXED INCOME, please provide the following information:
   a. Award Letter (Social Security, Retirement, or Disability)
   b. 3 months of Bank Statements verifying income deposits
7. Copies (3 months) of your most recent monthly bank statements for all accounts (checking, savings, 401-k, CD's, Money Market, etc.)
8. If a 2nd T.D. exists on your property (HELOC, HELOAN, etc.), please provide a copy of the Promissory Note and your most recent payment notice.

We strongly recommend that your loan be kept current during this evaluation period and that you submit the requested documentation IMMEDIATELY. Please note: Borrowers requesting third parties to negotiate on their behalf must provide written authorization signed by the borrower and co-borrower (if applicable) prior to any information being provided or released to the third party. If you have any questions or need any clarification, please contact us at 310-302-5844

Sincerely,

Loss Mitigation Department

FIRST FEDERAL BANK
OF CALIFORNIA

PERSONAL FINANCIAL STATEMENT

SUBJECT PROPERTY INFORMATION

STREET ADDRESS	CITY AND STATE	ZIP

No. of Units: Property is my: ❑ Primary Residence ❑ Investment ❑ Secondary Residence

PERSONAL PROFILE

APPLICANT

NAME	DATE OF BIRTH	SOCIAL SECURITY #	Yrs. School	❑ MARRIED ❑ UNMARRIED ❑ SEPARATED

PRESENT ADDRESS	CITY AND STATE	ZIP	HOME PHONE #	HOW LONG	❑ OWN HOME ❑ BUYING	❑ RENTING ❑ OTHER	MONTHLY PMT.

CELL PHONE #	E-MAIL ADDRESS	NO. DEPENDENTS	AGES OF DEPENDENTS

MAILING ADDRESS (If Different from Present)	CITY AND STATE	ZIP

CO-APPLICANT

NAME	DATE OF BIRTH	SOCIAL SECURITY #	Yrs. School	❑ MARRIED ❑ UNMARRIED ❑ SEPARATED

PRESENT ADDRESS	CITY AND STATE	ZIP	HOME PHONE #	HOW LONG	❑ OWN HOME ❑ BUYING	❑ RENTING ❑ OTHER	MONTHLY PMT.

CELL PHONE #	E-MAIL ADDRESS	NO. DEPENDENTS	AGES OF DEPENDENTS

MAILING ADDRESS (If Different from Present)	CITY AND STATE	ZIP

EMPLOYMENT INFORMATION

APPLICANT

NAME OF EMPLOYER	YRS. ON THIS JOB	YRS. IN LINE OF WORK/PROFESSION	❑ Salaried ❑ Self-Employed ❑ Other ____________________

EMPLOYER ADDRESS	CITY AND STATE	ZIP	BUS. PHONE #	POSITION/TITLE/TYPE OF BUSINESS

CO-APPLICANT

NAME OF EMPLOYER	YRS. ON THIS JOB	YRS. IN LINE OF WORK/PROFESSION	❑ Salaried ❑ Self-Employed ❑ Other ____________________

EMPLOYER ADDRESS	CITY AND STATE	ZIP	BUS. PHONE #	POSITION/TITLE/TYPE OF BUSINESS

MONTHLY INCOME AND COMBINED HOUSING EXPENSE INFORMATION

Gross Monthly Income	Borrower	Co-Borrower	Total	Combined Monthly Housing Expense	Present	Proposed
Base Empl. Income*	$	$	$	Rent	$	
Overtime				First Mortgage (P&I)		$
Bonuses				Other Financing (P&I)		
Commissions				Hazard Insurance		
Dividends/Interest				Real Estate Taxes		
Net Rental Income				Mortgage Insurance		
Other (before completing, see the notice in "describe other income," below)				Homeowner Assn. Dues		
				Other:		
Total	$	$	$	**Total**	$	$

* All Borrowers will be required to provide documentation such as tax returns, W-2s, Paystubs, and financial statements.

Describe Other Income for Borrower (B) and Co-Borrower (C): **Notice: Alimony, child support or separate maintenance income must be revealed as a basis for repaying this obligation.**

B/C		Monthly Amount
		$

ASSETS AND LIABILITIES

This Statement and any applicable supporting schedules may be completed jointly by both married and unmarried Co-Borrowers if their assets and liabilities are sufficiently joined so that the Statement can be meaningfully and fairly presented on a combined basis; otherwise, separate Statements and Schedules are required. If the Co-Borrower section was completed about a non-applicant spouse or other person, this Statement and supporting schedules must be completed about that spouse or other person also.

Completed ❑ Jointly ❑ Not Jointly

ASSETS Description	**Cash or Market Value**
Cash deposit toward purchase held by:	**$**
List checking and savings accounts below	
Name and address of Bank, S&L, or Credit Union	
Acct. no.	$
Name and address of Bank, S&L, or Credit Union	
Acct. no.	$
Name and address of Bank, S&L, or Credit Union	
Acct. no.	$
Name and address of Bank, S&L, or Credit Union	
Acct. no.	$
Stocks & Bonds (Company name/ number & description)	$
Life insurance net cash value Face amount: $	$
Subtotal Liquid Assets	$
Real estate owned (enter market value from schedule of real estate owned)	$
Vested interest in retirement fund	$
Net worth of business(es) owned (attach financial statement)	$
Automobiles owned (make and year)	$
Other Assets (itemize)	$
Total Assets a.	$

Liabilities and Pledged Assets. List the creditor's name, address, and account number for all outstanding debts, including automobile loans, revolving charge accounts, real estate loans, alimony, child support, stock pledges, etc. Use continuation sheet, if necessary. Indicate by (*) those liabilities, which will be satisfied upon sale of real estate owned or upon refinancing of the subject property.

LIABILITIES	**Monthly Payment & Months Left to Pay**	**Unpaid Balance**
Name and address of Company	$ Payment/Months	**S**
Acct. no.		
Name and address of Company	$ Payment/Months	**$**
Acct. no.		
Name and address of Company	$ Payment/Months	**$**
Acct. no.		
Name and address of Company	$ Payment/Months	**$**
Acct. no.		
Name and address of Company	$ Payment/Months	S
Acct. no.		
Name and address of Company	$ Payment/Months	$
Acct. no.		
Alimony/Child Support / Separate Maintenance Payments Owed to:	$	
Job-Related Expense (child care, union dues, etc.)	$	
Total Monthly Payments	$	
Net Worth (a minus b)	$	
Total Liabilities b.		$

Schedule of Real Estate Owned (If additional properties are owned, use continuation sheet.)

Property Address (enter S if sold, PS if pending sale or R if rental being held for income)		Type of Property	Present Market Value	Amount of Mortgages & Liens	Gross Rental Income	Mortgage Payments	Insurance, Maintenance, Taxes & Misc.	Net Rental Income
			$	$	$	$	$	$
		Totals	$	$	$	$	$	$

List any additional names under which credit has previously been received and indicate appropriate creditor name(s) and account number(s):

Alternate Name	**Creditor Name**	**Account Number**

DECLARATIONS

	Borrower		Co-Borrower	
If you answer "Yes" to any questions a through c, please use continuation sheet for explanation.	Yes	No	Yes	No
a. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee? If "Yes," give details as described in the preceding question.	❑	❑	❑	❑
b. Are you obligated to pay alimony, child support, or separate maintenance?	❑	❑	❑	❑
c. Are any assets held in Trust? If "Yes," please include copy of family trust.	❑	❑	❑	❑

REASON(S) FOR HARDSHIP

❑ Lawsuit	❑ Divorce	❑ Death
❑ Loss of Employment	❑ Other ________________________________	❑ Other ________________________________

In the section below, please provide as much specificity as necessary for us to make a determination as to the best course of action for you. You should indicate the source of your financial hardship, its expected duration and the financial resources with which you will manage your debt going forward.

ACKNOWLEDGEMENT AND AGREEMENT

Each of the undersigned specifically represents to Lender and to Lender's actual or potenti al agents, brokers, processors, attorneys, insurers, servicers, successors and assigns and agrees and acknowledges that: (1) the information provided in this application is true and correct as of the date set forth opposite my signature and that any intentional or negligent misrepresentation of this information contained in this application may result in civil liability, including monetary damages, to any person who may suffer any loss due to reliance upon any misrepresentation that I have made on this application, and/or in criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Sec. 1001, et seq.; (2) if approved, the loan modification requested pursuant to this application (the ‘Modification”) will modify a loan (the “Loan”) secured by a mortgage or deed of trust on the property described in this application; (3) the property has and will not be used for any illegal or prohibited purpose or use; (4) all statements made in this application are made for the purpose of obtaining a modification to an existing residential mortgage loan; (5) the property has and will be occupied as indicated in this application; (6) the Lender, its servicers, successors or assigns may retain the original and/or an electronic record of this application, whether or not the Modification is approved; (7) the Lender and its agents, brokers, insurers, servicers, successors, and assigns may continuously rely on the information contained in the application, and I am obligated to amend and/or supplement the information provided in this application if any of the material facts that I have represented herein should change prior to entry into the Modification; (8) in the event that my payments on the Loan become delinquent, the Lender, its servicers, successors or assigns may, in addition to any other rights and remedies that it may have relating to such delinquency, report my name and account information to one or more consumer reporting agencies; (9) ownership of the Loan and/or administration of the Loan account may be transferred with such notice as may be required by law; (10) neither Lender nor its agents, brokers, insurers, servicers, successors or assigns has made any representation or warranty, express or implied, to me regarding the property or the condition or value of the property; and (11) my transmission of this application as an "electronic record" containing my "electronic signature," as those terms are defined in applicable federal and/or state laws (excluding audio and video recordings), or my facsimile transmission of this application containing a facsimile of my signature, shall be as effective, enforceable and valid as if a paper version of this application were delivered containing my original written signature.

Acknowledgement. Each of the undersigned hereby acknowledges that any owner of the Loan, its servicers, successors and assigns, may verify or reverify any information contained in this application or obtain any information or data relating to the Modification or the Loan, for any legitimate business purpose through any source, including a source named in this application or a consumer reporting agency.

I/We hereby give our consent to have FIRST FEDERAL BANK OF CALIFORNIA or any credit bureau which it may designate, obtain any and all information concerning our employment, checking and/or savings accounts, obligations and all other credit matters which they may require in connection with my/our application for a loan. This form may be used after our loan closes for audit, quality control and other loan related purposes (including, but not limited to, the enforcement of contractual and legal rights). This form may also be reproduced or photocopied and a copy shall be as effective consent as the original which I/we have signed.

Borrower's Signature	**Date**	**Co-Borrower's Signature**	**Date**
X		**X**	

CONTINUATION SHEET/RESIDENTIAL LOAN APPLICATION		
Use this continuation sheet if you need more space to complete the Residential Loan Application. Mark **B** for Borrower or **C** for Co-Borrower.	Borrower:	Agency Case Number:
	Co-Borrower:	Lender Case Number:

I/We fully understand that it is a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code, Section 1001, et seq.			
Borrower's Signature **X**	**Date**	**Co-Borrower's Signature** **X**	**Date**

FIRST FEDERAL BANK OF CALIFORNIA

12555 W. Jefferson Blvd., Los Angeles, CA 90066

LETTER AGREEMENT

This letter agreement will confirm that the borrower(s) on the referenced loan have contacted First Federal Bank of California ("First Fed") to request a loan workout. As you were advised, First Fed will not engage in any workout discussions until this Letter Agreement has been acknowledged and agreed to by the borrower(s) and returned to First Fed.

In light of the foregoing, and in consideration of the commencement of workout negotiations with First Federal, the undersigned borrower(s) hereby represent, warrant and agree as follows:

1. Either First Fed or the undersigned borrower(s), may, in its sole and absolute discretion, terminate the workout discussions at any time and for any reason. In the event of such a termination, the parties' respective obligations to one another shall be only as set forth in written loan documents.
2. There shall be no modification of the loan documents or waiver of any right thereunder unless and until the parties sign a written agreement, which expressly states that it modifies the terms of the loan documents. Without limitation, no oral statement, promise, commitment, representation, offer or discussion shall be relied upon or constitute a waiver by any party of any right, remedy or defense it may have, or modify or terminate the terms of the loan documents, until it has been reduced to writing and signed by both parties.
3. The mere commencement of negotiations shall not constitute a waiver of any right by, or create any further obligation on the part of, either party.

First Fed makes no warranty or representation to borrower(s) that workout discussions will result in any modification of the loan documents. Workout discussions shall not operate to relieve or delay the obligations of the undersigned borrowers to fully and timely comply with any and all obligations set forth in the loan documents. Further, workout discussions shall not constitute a waiver by First Fed of its right to demand full and timely performance of all obligations under the loan documents. Neither the execution of this Letter Agreement nor any discussions held hereunder shall operate to toll any time period which otherwise might be applicable under the loan documents or applicable law. Further, nothing contained in this Letter Agreement is intended to limit or delay the rights of First Fed to initiate, continue or otherwise proceed with the enforcement of any contractual or legal rights which it may hold pursuant to the loan documents, including but not limited to foreclosure and receivership proceedings.

Loan Account Number ______________________________________:

Property Address ______________________________________

City, State, Zip ______________________________________

Date: ___________ ____

Borrower Signature

Date: ___________ ____

Co-Borrower Signature

Sign, date, and return this letter agreement with your Loan Modification Package documents to:

Loss Mitigation Unit
First Federal Bank of California
12555 W. Jefferson Blvd.
Los Angeles, CA 90066-7036

Form **4506-T**

(Rev. January 2008)

Department of the Treasury
Internal Revenue Service

Request for Transcript of Tax Return

► **Do not sign this form unless all applicable lines have been completed. Read the instructions on page 2.**

► **Request may be rejected if the form is incomplete, illegible, or any required line was blank at the time of signature.**

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 also call 1-800-829-1040 to order a transcript. 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 or employer identification number (see instructions)

2a If a joint return, enter spouse's name shown on tax return

2b Second social security number if joint tax return

3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code

4 Previous address shown on the last return filed if different from line 3

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. The IRS has no control over what the third party does with the tax information.

First Federal Bank of California Corporate Office: (310) 302-5600
12555 W. Jefferson Blvd.
Los Angeles, CA 90066

Caution: ***DO NOT SIGN*** *this form if a third party requires you to complete Form 4506-T, and lines 6 and 9 are blank.*

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. ► 1040

a Return Transcript, which includes most of the line items of a tax return as filed with the IRS. 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 30 calendar days . ☐

c Record of Account, which is a combination of line item information and later adjustments to the account. Available for current year and 3 prior tax years. Most requests will be processed within 30 calendar days . . . ☐

7 Verification of Nonfiling, which is proof from the IRS that you **did not** file a return for the year. Most requests will be processed within 10 business days . . . ☑

8 Form W-2, Form 1099 series, Form 1098 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 2006, filed in 2007, will not be available from the IRS until 2008. 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 45 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.

12 / 31 / 2008 12 / 31 / 2007 ___ / ___ / ___ ___ / ___ / ___

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, **either** husband or wife 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.

Telephone number of taxpayer on line 1a or 2a
( )

Sign Here

Signature (see instructions) Date

Title (if line 1a above is a corporation, partnership, estate, or trust)

Spouse's signature Date

General Instructions

Purpose of form. Use Form 4506-T to request tax return information. You can also designate a third party to receive the information. See line 5.

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

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 RAIVS teams, send your request to the team based on the address of your most recent return.

Note. *You can also call 1-800-829-1040 to request a transcript or get more information.*

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

If you filed an individual return and lived in:	Mail or fax to the "Internal Revenue Service" at:
District of Columbia, Maine, Maryland, Massachusetts, New Hampshire, New York, Vermont	RAIVS Team Stop 679 Andover, MA 05501 978-247-9255
Alabama, Delaware, Florida, Georgia, North Carolina, Rhode Island, South Carolina, Virginia	RAIVS Team P.O. Box 47-421 Stop 91 Doraville, GA 30362 770-455-2335
Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, or A.P.O. or F.P.O. address	RAIVS Team Stop 6716 AUSC Austin, TX 73301 512-460-2272
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Iowa, Kansas, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	RAIVS Team Stop 37106 Fresno, CA 93888 559-456-5876
Arkansas, Connecticut, Illinois, Indiana, Michigan, Missouri, New Jersey, Ohio, Pennsylvania, West Virginia	RAIVS Team Stop 6705–B41 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 the "Internal Revenue Service" at:
Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Georgia, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Tennessee, Texas, Utah, Washington, Wyoming, a foreign country, or A.P.O. or F.P.O. address	RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409 801-620-6922
Connecticut, Delaware, District of Columbia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia, Wisconsin	RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250 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) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

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 60 days of the date signed by the taxpayer or it will be rejected.

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 Internal Revenue Code 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.

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. Sections 6103 and 6109 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, and the District of Columbia 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 the Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 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.