



DEEPWATER HORIZON CLAIMS CENTER

ECONOMIC & PROPERTY DAMAGE CLAIMS

INSTRUCTIONS FOR COMPLETING REQUEST FOR TRANSCRIPT OF TAX RETURN (IRS FORM 4506-T)

We are requesting authorization to obtain a Transcript of Tax Return (IRS Form 4506-T). The Request for Transcript of Tax Return is attached immediately following these instructions. The form is also available in Adobe Fillable format at www.deepwaterhorizoneconomicsettlement.com.

Basic Information.

Individual Claimants who filed a single return. Complete **Lines 1a-1b** with your name and your Social Security Number or Individual Tax Identification Number. Do not complete **Lines 2a-2b**. Complete **Line 3** with your current name, address, city, state, and zip code. Complete **Line 4** only if your current address is different from the address used to file your most recent tax return.

Individual Claimants who filed a joint return. Complete **Lines 1a-2b** with your name and your Social Security Number or Individual Tax Identification Number, and your spouse's name and Social Security Number or Individual Taxpayer Identification Number. Complete **Line 1a** with the name of the spouse who appears first on your most recent tax return and Complete **Line 2a** with the name of the remaining spouse. Complete **Line 3** with your current name, address, city, state, and zip code. Complete **Line 4** only if your current address is different from the address used to file your most recent tax return.

1. Business Claimants. Complete **Lines 1a-1b** with the full name of the business (as it appears on the most recent tax return) and the Employer Identification Number. Do not complete **Lines 2a-2b**. Complete **Line 3** with the current name, address, city, state, and zip code of the business. Complete **Line 4** only if the current address is different from the address used to file the most recent tax return.

Business Claimants who filed a Schedule C or E. If you used a Schedule C or E to file taxes for your business, Complete **Lines 1a-2b** as an individual with your name and Social Security Number or Individual Tax Identification Number and not with the name of your business or your Employer Identification Number, if applicable. Complete **Lines 1a-2b**, as described above for individuals according to filing status. Complete **Line 3** with your current name, address, city, state, and zip code. Complete **Line 4** only if your current address is different from the address used to file your most recent tax return.

Non-Profit Business Claimants Requiring a Verification of Non-Filing. Complete **Lines 1a-1b** with the full legal name of the business and the Employer Identification Number. Do not complete **Lines 2a-2b**. Complete **Line 3** with the current name, address, city, state, and zip code of the business. Complete **Line 4** only if the current address is different from the address on file with the IRS.

Multi-Facility Businesses. If you are a Multi-Facility Business claimant with more than one claim filed under the same Taxpayer Identification Number, you are required to submit only one authorization form that covers all the years for the tax documents that you submit in support of your claim. You do not need to submit multiple authorization forms for the same business and years.

2.	<p><i>Authorization for Release of Tax Transcripts to the Claims Administrator.</i></p> <p>Line 5 is pre-filled and gives authorization for the IRS to mail your transcripts directly to the Claims Administrator.</p>
3.	<p><i>Required Transcripts.</i></p> <p>Line 6. Complete Line 6 with the type of tax return you filed for the requested year(s).</p> <p><u>Individual Claimants who filed a single or joint return.</u> Complete Line 6 with "1040".</p> <p><u>Individual Claimants who filed a Schedule C or E for business purposes.</u> Complete Line 6 with "1040."</p> <p><u>Business Claimants.</u> Complete Line 6 with the type of tax return filed for your business (1065, 1120, 1120S, etc.). Submit a separate form for each type of return filed (if more than one type of return was filed for any requested year, or a different type of return was filed for any of the requested years).</p> <p><u>Business Claimants who filed a Schedule C or E for business purposes.</u> Complete Line 6 with the type of tax return filed (1040)</p> <p><u>Non-Profit Business Claimants Requiring a Verification of Non-Filing.</u> Complete Line 6 with each of the following types of tax returns (1065, 1120, 1120S, 990), Submit a separate 4506-T form for each of the 4 available types or returns (A total of 4 4506-T Forms).</p> <p>Lines 6a-6c are pre-filled and gives the Claims Administrator authorization to request return and/or account transcripts for the requested year(s).</p> <p>Line 7 is pre-filled and gives the Claims Administrator authorization to request verification of non-filing if you did not file a return for the requested year(s).</p> <p>Line 8 is pre-filled and gives the Claims Administrator authorization to request transcripts of forms W-2, 1099, 1098 and 5498 filed with the IRS for the requested year(s).</p> <p>Line 9 is pre-filled and gives the Claims Administrator authorization to request transcripts and/or verification of non-filing for tax years 2008-2011.</p> <p><u>Business Claimants who filed taxes for a fiscal year ending on a date other than 12/31.</u> In order to obtain the correct results from the IRS, you will need to send us a Form 4506-T with the correct fiscal year ending date. Line 9 on the attached DWH version of the Form 4506-T is pre-filled with 12/31. This will result in transcripts being returned with "no record of return filed" and the IRS will not accept alterations to this form. You can visit the IRS website at http://www.irs.gov/pub/irs-pdf/f4506t.pdf for an adobe fillable version of the Form 4506-T. You must fill out Lines 5-8 exactly as they appear on the DWH pre-filled form and insert the corrected fiscal years for Line 9.</p>

<p><i>Required Signatures.</i></p> <p><u>Attestation Clause</u> Check the box in the signature area and acknowledge that you have the authority to sign and request the information. The form will not be processed if the box is unchecked.</p> <p><u>Individual Claimants.</u> Sign and date Form 4506-T and provide your daytime telephone number. Sign Form 4506-T exactly as your name appears on your latest tax return. If you changed your name, also sign your current name. If you are signing Form 4506-T on behalf of an individual, sign and date your name, and indicate your authority to sign on behalf of the individual listed in Line 1a or 2a. You must also attach documentation showing your authority to sign on behalf of the individual. For example, a power of attorney or the letters testamentary authorizing you to act on behalf of the deceased individual's estate.</p> <p><u>Business Claimants.</u> Sign and date Form 4506-T and provide a daytime telephone number. Form 4506-T must be signed and dated by, and indicate a title for, the authorized representative for the taxpayer listed on Line 1a. The IRS allows only certain representatives to authorize the 4506-T request and the authorized representative must have apparent authority to bind the business in legal matters.</p> <p><u>Non-Profit Business Claimants Requiring a Verification of Non-Filing.</u> Sign and date Form 4506-T and provide a daytime telephone number. The authorized business representative for the business listed on Line 1a must sign, date, and indicate a title for the Non-Profit business. The IRS allows only certain representatives to authorize the 4506-T request and the authorized representative must have apparent authority to bind the business in legal matters.</p>	<p>4.</p>
<p><i>Attorney Representation.</i></p> <p>If you are represented by an attorney in connection with your claim, do not sign the Authorization Form until you have conferred with your attorney about the decision to submit and sign the Authorization Form.</p> <p><i>Submit the Authorization Forms Online or by Hard Copy.</i></p> <p>Submit the required Authorization Form(s) online by uploading them to your DWH Portal. If you choose to upload the forms, please ensure that the PDFs are of good quality and that there are no marks or specks on the document as a result of scanning it. Also, when uploading, please label them as "Request for Transcript of Tax Return (IRS Form 4506-T)" or "Request for Copy of Tax Return (IRS Form 4506)", as appropriate. You may return the <i>original</i> hard copy signed Authorization Form(s) to the Claims Administrator, along with any required attachment(s).</p>	<p>5.</p> <p>6.</p>
<p>If you wish to submit the <i>original</i>, hard copy signed Authorization Form(s), you may submit the required documents in any of the following ways.</p>	
<p>By Mail (Postmarked no later than your response deadline)</p>	<p>Deepwater Horizon Economic Claims Center Claims Administrator Attn: Authorization Forms Department 250 Rocketts Way Richmond, VA 23231</p>

By Overnight, Certified or Registered Mail

(If mail, postmarked no later than your response deadline; if other overnight delivery, placed in the custody of an overnight carrier by your response deadline)

Deepwater Horizon Economic Claims Center
Claims Administrator
Attn: Authorization Forms Department
250 Rocketts Way
Richmond, VA 23231