



P.O. Box 840, Buffalo, NY 14240

Dear Mortgage Customer(s):

Thank you for taking the first step towards resolving your mortgage payment difficulties. The following is M&T Bank's Mortgage Assistance Application that contains the required application materials. **Please note, you will only need to provide M&T Bank with the required financial information requested in this package and complete the enclosed forms if you are looking to sell your property.** Upon receipt of your documentation, we will be able to begin our review to determine if you qualify for a mortgage assistance option in accordance with investor guidelines.

Important

If you are looking to remain in your home and participate in a Home Retention mortgage assistance option, please contact us as soon as possible at 1-800-724-1633. If this is the case, you will not need to provide any documentation to us and you can disregard the forms enclosed with this letter.

Investor guidelines may require that we review your file for home retention options first. If you qualify for a home retention option based on your investor guidelines, you may not be qualified to participate in a Pre-foreclosure Sale program.

Getting Started

The following information is only applicable if you are looking to sell your property and participate in a Home Disposition mortgage assistance option.

Please refer to the next page of this application, for a checklist of the documents you are required to complete and return to us. The Borrower Financial Report and other required documents can be sent back to us by email, fax, or mail as indicated below.

Email: **opsmtgsupport@mtb.com** (in PDF format)
Fax: **1-855-678-0866**
Mail: **M&T Bank, P.O. Box 840, Buffalo, NY 14240**

Our ability to review your request will depend on how quickly you submit a complete application. It is possible that after our review, additional information may be requested from you. A decision will be reached within thirty (30) days from the date M&T Bank receives all of the required documentation to determine if any mortgage assistance options are available. If applicable, this would include approval from the mortgage insurance company. If there are any other mortgage loans secured by the above property, please contact that servicer to discuss any available mortgage assistance options. **If your property is in the state of Nevada**, and if after reviewing your file we are able to offer you a mortgage assistance option, you will have 14 calendar days to accept or reject the offer.

Until a decision is made with respect to your mortgage assistance request, you may still receive notices, and you should make every attempt to continue making your contractual payments during the review process. There is a possibility that the foreclosure process may commence/continue. If you do not intend to retain ownership of your home, understand that the owner of your loan requires that all properties be maintained until closing. Please keep the property in good condition and repair.

If you need any assistance or have any questions, please do not hesitate to contact our Single Point of Contact Team at 1-800-724-1633. Please note, if you have not received Consumer Credit Counseling, you should contact HUD-approved credit counseling for assistance. To contact one of these agencies in your area, please call 1-800-569-4287 or visit <http://www.hud.gov/counseling>.



Sincerely,

Single Point of Contact Team
Homeowner Assistance Center
Hours: Mon.-Thur. 8am-9pm; Friday 9am-5pm EST
Phone: 1-800-724-1633
Fax: 1-855-678-0866

M&T Bank may be considered a debt collector. M&T Bank is attempting to collect a debt and any information obtained will be used for that purpose. To the extent your original obligation was discharged, or is subject to an automatic stay of bankruptcy under Title 11 of the United States Code, this correspondence is for compliance or informational purposes only and does not constitute an attempt to collect a debt or to impose personal liability for such obligation. However, M&T Bank retains rights under its security instruments, including the right to foreclose its lien.

The below forms are *required* documents if you are looking to sell your property. These must be completed and signed by all borrowers. If you are looking to remain in your home with a Home Retention mortgage assistance option, please contact us as soon as possible at 1-800-724-1633 instead of filling out these forms.

Please note: If you are *not* a mortgagor on the loan, once your interest in the property has been confirmed and approved, you will need to send in a Mortgage Assistance Application (the below documentation) to be evaluated for mortgage assistance.

- ___ **Borrower Financial Report (710 Form for FHA loans)** (attached in this package)
- ___ **IRS Form 4506-C** (this allows us to verify tax return information) (attached in this package)

You must also submit:

- ___ **Checking and Savings Account(s) Statements for the last two months**
- ___ **Proof of all household income (Refer to 710 Form for additional document requirements)**
 - Most recent paystubs for the past 30 days including year to date income
 - Wage Earner Questionnaire for W2 wage earners
 - Award letters and Monthly Statements (for income such as Social Security, Retirement, Unemployment)
 - Court Orders (for income such as Alimony and Child Support)
 - Lease Agreements for Real Estate/Rental Income
 - Signed / Notarized letters for Non-Borrower Contribution
 - Profit and Loss Statement Template (attached in this package: you are only required to complete this if you are self-employed)
 - Other documentation to evidence income sources not listed above.

If you have any of the below, please include them in your Mortgage Assistance Application:

- ___ **M&T Bank Arm's Length Addendum** (attached in this package: must be signed & dated by the seller(s) & buyer(s))
- ___ **Listing Agreement** (current, non-expired listing agreement signed and dated by the sellers)
- ___ **Current MLS print out**
- ___ **Purchase Contract** (signed and dated by the seller(s) and buyer(s))
- ___ **Preliminary HUD-1 Settlement Statement**
- ___ **Buyer's Pre-approval Letter or Proof of Funds for a Cash Offer**

Please see the attached Pre-Foreclosure Sale Information Sheet for more information if you are unable to maintain ownership of your property

CL435

Loan Number: _____

Borrower Financial Report

(710 Form for FHA)

If you are having mortgage payment challenges, please complete and submit this application, along with the required documentation, to M&T Bank via mail: P.O. Box 840, Buffalo, NY 14240-0840, fax: 1-855-678-0866, or email: opsmtgsupport@mtb.com. We will contact you within five business days to acknowledge receipt and let you know if you need to send additional information or documents.

We will use the information you provide to help us identify the assistance you may be eligible to receive. If you need help completing this application, please contact M&T Bank at 1-800-724-1633.

For a list of HUD-approved housing counseling agencies that can provide foreclosure prevention information, contact one of the following federal government agencies:

- The U.S. Department of Housing and Urban Development (HUD) at (800) 569-4287 or www.hud.gov/counseling
- The Consumer Financial Protection Bureau (CFPB) at (855) 411-2372 or www.consumerfinance.gov/mortgagehelp

If you need assistance with translation or other language assistance, HUD-approved housing counseling agencies may be able to assist you. These services are provided without charge.

Borrower Information

Borrower's name: _____

Social Security Number (last 4 digits): _____

E-mail address: _____

Primary phone number: _____ ☐ Cell ☐ Home ☐ Work ☐ Other

Alternate phone number: _____ ☐ Cell ☐ Home ☐ Work ☐ Other

Co-borrower's name: _____

Social Security Number (last 4 digits): _____

E-mail address: _____

Primary phone number: _____ ☐ Cell ☐ Home ☐ Work ☐ Other

Alternate phone number: _____ ☐ Cell ☐ Home ☐ Work ☐ Other

Preferred contact method (choose all that apply): ☐ Cell phone ☐ Home phone ☐ Work phone ☐ Email ☐ Text—checking this box indicates your consent for text messaging

Is either borrower on active duty with the military (including the National Guard and Reserves), the dependent of a borrower on active duty, or the surviving spouse of a member of the military who was on active duty at the time of death? ☐ Yes ☐ No

Property Information

Property Address: _____

Mailing address (if different from property address): _____

• The property is currently: ☐ A primary residence ☐ A second home ☐ An investment property

• The property is (select all that apply): ☐ Owner occupied ☐ Renter occupied ☐ Vacant

• I want to: ☐ Keep the property ☐ Sell the property ☐ Transfer ownership of the property to my servicer ☐ Undecided

Is the property listed for sale? ☐ Yes ☐ No – If yes, provide the listing agent's name and phone number—or indicate “for sale by owner” if applicable: _____

Is the property subject to condominium or homeowners' association (HOA) fees? ☐ Yes ☐ No – If yes, indicate monthly dues: \$ _____

Hardship Information

The hardship causing mortgage payment challenges began on approximately (date) _____ and is believed to be:

- ☐ Short-term (up to 6 months)
- ☐ Long-term or permanent (greater than 6 months)
- ☐ Resolved as of (date) _____

TYPE OF HARDSHIP (CHECK ALL THAT APPLY)	REQUIRED HARDSHIP DOCUMENTATION
<input type="checkbox"/> Unemployment	<ul style="list-style-type: none"> Not required
<input type="checkbox"/> Reduction in income: a hardship that has caused a decrease in your income due to circumstances outside your control (e.g., elimination of overtime, reduction in regular working hours, a reduction in base pay)	<ul style="list-style-type: none"> Not required
<input type="checkbox"/> Increase in housing-related expenses: a hardship that has caused an increase in your housing expenses due to circumstances outside your control (e.g., uninsured losses, increased property taxes, HOA special assessment)	<ul style="list-style-type: none"> Not required
<input type="checkbox"/> Disaster (natural or man-made) impacting the property or borrower's place of employment	<ul style="list-style-type: none"> Not required
<input type="checkbox"/> Long-term or permanent disability, or serious illness of a borrower/co-borrower or dependent family member	<ul style="list-style-type: none"> Written statement from the borrower, or other documentation verifying disability or illness Note: Detailed medical information is not required, and information from a medical provider is not required
<input type="checkbox"/> Divorce or legal separation	<ul style="list-style-type: none"> Final divorce decree or final separation agreement OR Recorded quitclaim deed
<input type="checkbox"/> Separation of borrowers unrelated by marriage, civil union, or similar domestic partnership under applicable law	<ul style="list-style-type: none"> Recorded quitclaim deed OR Legally binding agreement evidencing that the non-occupying borrower or co-borrower has relinquished all rights to the property
<input type="checkbox"/> Death of borrower or death of either the primary or secondary wage earner	<ul style="list-style-type: none"> Death certificate OR Obituary or newspaper article reporting the death
<input type="checkbox"/> Distant employment transfer/relocation	<ul style="list-style-type: none"> For active-duty service members: Permanent Change of Station (PCS) orders or letter showing transfer. For employment transfers/new employment: Copy of signed offer letter or notice from employer showing transfer to a new location or written explanation if employer documentation not applicable, AND Documentation that reflects the amount of any relocation assistance provided (not required for those with PCS orders)
<input type="checkbox"/> Other – hardship that is not covered above:	<ul style="list-style-type: none"> Written explanation describing the details of the hardship and any relevant documentation

Wage Earner Questionnaire

*** A questionnaire should be completed for each borrower receiving W2 wages – only putting one employer per page. The information provided below will allow us to better understand your income situation, evaluate income consistency, and calculate income levels.**

Loan Number:
Borrower Name:
Employer Name:
Date of Hire:
How many months per year are you paid? <input type="checkbox"/> 12 months <input type="checkbox"/> Other - list how many months: _____
Is your employment on a permanent or temporary basis? <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary – If temporary, how many months are left in your contract? _____
Do you receive Bonus Income? <input type="checkbox"/> No <input type="checkbox"/> Yes – <i>If yes, answer the below:</i> <ul style="list-style-type: none">• Frequency of Bonus (Monthly, Quarterly, Annually, etc) _____• How is the bonus received? <input type="checkbox"/> Received in same check as base salary/wages <input type="checkbox"/> Received in separate check Do you consistently Receive the bonus each period? <input type="checkbox"/> No <input type="checkbox"/> Yes
Do you receive Commission Income? <input type="checkbox"/> No <input type="checkbox"/> Yes – <i>If yes, answer the below:</i> <ul style="list-style-type: none">• Frequency of Bonus (Monthly, Quarterly, Annually, etc) _____• How is the commission received? <input type="checkbox"/> Received in same check as base salary/wages <input type="checkbox"/> Received in separate check Do you consistently Receive the bonus each period? <input type="checkbox"/> No <input type="checkbox"/> Yes
Are there any upcoming changes expected to employment status? <input type="checkbox"/> No <input type="checkbox"/> Yes – <i>If yes, please explain:</i> _____

Borrower Income

Please enter all borrower income amounts in middle column.

MONTHLY TOTAL BORROWER INCOME TYPE & AMOUNT		REQUIRED INCOME DOCUMENTATION
Gross (pre-tax) wages, salaries and overtime pay, commissions, tips, and bonuses	\$	<ul style="list-style-type: none"> Most recent pay stub and documentation of year-to-date earnings if not on pay stub OR Two most recent bank statements showing income deposit amounts
Self-employment income	\$	<ul style="list-style-type: none"> Two most recent bank statements showing self-employed income deposit amounts OR Most recent signed and dated quarterly or year-to-date profit/loss statement OR Most recent complete and signed business tax return OR Most recent complete and signed individual federal income tax return
Unemployment benefit income	\$	<ul style="list-style-type: none"> No documentation required
Taxable Social Security, pension, disability, death benefits, adoption assistance, housing allowance, and other public assistance	\$	<ul style="list-style-type: none"> Two most recent bank statements showing deposit amounts OR Award letters or other documentation showing the amount and frequency of the benefits
Non-taxable Social Security or disability income	\$	<ul style="list-style-type: none"> Two most recent bank statements showing deposit amounts OR Award letters or other documentation showing the amount and frequency of the benefits
Rental income (rents received, less expenses other than mortgage expense)	\$	<ul style="list-style-type: none"> Two most recent bank statements demonstrating receipt of rent OR Two most recent deposited rent checks
Investment or insurance income	\$	<ul style="list-style-type: none"> Two most recent investment statements OR Two most recent bank statements supporting receipt of the income
Other sources of income not listed above (Note: Only include alimony, child support, or separate maintenance income if you choose to have it considered for repaying this loan)	\$	<ul style="list-style-type: none"> Two most recent bank statements showing receipt of income OR Other documentation showing the amount and frequency of the income

Current Borrower Assets

Exclude retirement funds such as a 401(k) or Individual Retirement Account (IRA), and college savings accounts such as a 529 plan.

Checking account(s) and cash on hand	\$
Savings, money market funds, and Certificates of Deposit (CDs)	\$
Stocks and bonds (non-retirement accounts)	\$
Other:	\$

Title and Borrower Information

Names:

Are you or the co-borrower known by any other name?

Yes: ☐ No: ☐

If "Yes" what other names are you or the co-borrower known by?

Marital Status:

We are collecting the data on this form for the limited purpose of verifying your marital status so that we can determine whether additional signatures (besides yours) are required to close your loss mitigation option should you be approved.

☐ Single

☐ Married

Date of marriage: _____

Maiden Name (if applicable): _____

Spouse's full name (first, middle, last): _____

☐ Divorced

Date of divorce: _____

*Send in Divorce Decree and Quit Claim Deed

☐ Separated

Date of separation: _____

*Send in Separation Agreement and Quit Claim Deed

☐ Widowed

Date of death of the deceased: _____

Transfer of the property:

Have you transferred the property to another person, company, or trust?

Yes: ☐ No: ☐

If "Yes" what is the name of the other person, company, or trust that you transferred title to?

Power of Attorney:

Will you be using a Power of Attorney to allow someone else to sign on your behalf for this loan workout?

Yes: ☐ No: ☐

Second Lien Information:

If there is a 2nd lien associated with this property please provide the information below:

Lien Holder's Name: _____ Lien Holder's Phone Number: _____

Amount of Lien: \$ _____ Loan Number: _____

Borrower Certification and Agreement

1. I certify and acknowledge that all of the information in this Borrower Financial Report is truthful, and the hardship I identified contributed to my need for mortgage relief. Knowingly submitting false information may violate Federal and other applicable law.
2. I agree to provide my servicer with all required documents, including any additional supporting documentation as requested, and will respond in a timely manner to all servicer or authorized third party* communications.
3. I acknowledge and agree that my servicer is not obligated to offer me assistance based solely on the representations in this document or other documentation submitted in connection with my request.
4. I consent to the servicer or authorized third party* obtaining a current credit report for the borrower and co-borrower.
5. I consent to the disclosure by my servicer, authorized third party,* or any investor/guarantor of my mortgage loan(s), of any personal information collected during the mortgage assistance process and of any information about any relief I receive, to any third party that deals with my first lien or subordinate lien (if applicable) mortgage loan(s), including any investor, insurer, guarantor, or servicer of my mortgage loan(s) or any companies that provide support services to them, for purposes permitted by applicable law. Personal information may include but is not limited to: (a) my name, address, telephone number, (b) my Social Security number, (c) my credit score, (d) my income, and (e) my payment history and information about my account balances and activity.
6. I agree that the terms of this borrower certification and agreement will apply to any modification trial period plan, repayment plan, or forbearance plan that I may be offered based on this application. If I receive an offer for a modification trial period plan or repayment plan, I agree that my first timely payment under the plan will serve as acceptance of the plan.
7. I consent to being contacted concerning this application for mortgage assistance at any telephone number, including mobile telephone number, or email address I have provided to the lender, servicer, or authorized third party.*
* An authorized third party may include, but is not limited to, a housing counseling agency, Housing Finance Agency (HFA) or other similar entity that is assisting me in obtaining a foreclosure prevention alternative.

Please note: If you provide M&T with an external email address that was provided to you by an employer, your employer may have access to confidential information contained in email messages from M&T. M&T will use the employer-provided email address provided by you to M&T to communicate with you in attempt to collect any debt owed by you to M&T.

Please note: All borrowers are required to participate in the mortgage assistance review, which includes completing the mortgage assistance application and signing any required documents. If you notify us of a situation that would prevent a co-borrower from participating in the review, we are required to review investor guidelines to determine if the guidelines allow us to move forward with the mortgage assistance review without the participation of the co-borrower.

Borrower Consent to the Use of Tax Return Information:

Borrower understands, acknowledges, and agrees that the Lender and Other Loan Participants can obtain, use, and share Borrower's tax return information for purposes of (i) providing an offer; (ii) originating, maintaining, managing, monitoring, servicing, selling, insuring, and securitizing a loan; (iii) marketing; or (iv) as otherwise permitted by applicable laws, including state and federal privacy and data security laws. The Lender includes the Lender's affiliates, agents, service providers and any of aforementioned parties' successors and assigns. The Other Loan Participants includes any actual or potential owners of a loan resulting from your loan application, or acquirers of any beneficial or other interest in the loan, any mortgage insurer, guarantor, any servicers, or service providers for these parties and any of aforementioned parties' successors and assigns.

Borrower signature: _____ Date: _____

Co-Borrower signature: _____ Date: _____

Please submit your completed application, together with the required documentation, to M&T Bank via mail: P.O. Box 840, Buffalo, NY 14240-0840, fax: 1-855-678-0866, or email: opsmtgsupport@mtb.com. We will contact you within five business days to acknowledge receipt and let you know if you need to send additional information or documents. We will use the information you provided to help us identify the assistance you may be eligible to receive.

Form 4506-C (October 2022)		Department of the Treasury - Internal Revenue Service IVES Request for Transcript of Tax Return				OMB Number 1545-1872	
Do not sign this form unless all applicable lines have been completed. Request may be rejected if the form is incomplete or illegible. For more information about Form 4506-C, visit www.irs.gov and search IVES.							
1a. Current name			2a. Spouse's current name (if joint return and transcripts are requested for both taxpayers)				
i. First name	ii. Middle initial	iii. Last name/BMF company name	i. Spouse's first name	ii. Middle initial	iii. Spouse's last name		
1b. First taxpayer identification number (see instructions)			2b. Spouse's taxpayer identification number (if joint return and transcripts are requested for both taxpayers)				
1c. Previous name shown on the last return filed if different from line 1a			2c. Spouse's previous name shown on the last return filed if different from line 2a				
i. First name	ii. Middle initial	iii. Last name	i. First name	ii. Middle initial	iii. Last name		
3. Current address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)							
a. Street address (including apt., room, or suite no.)			b. City	c. State	d. ZIP code		
4. Previous address shown on the last return filed if different from line 3 (see instructions)							
a. Street address (including apt., room, or suite no.)			b. City	c. State	d. ZIP code		
5a. IVES participant name, ID number, SOR mailbox ID, and address							
i. IVES participant name DataVerify			ii. IVES participant ID number		iii. SOR mailbox ID		
iv. Street address (including apt., room, or suite no.) 250 E. Broad St., Suite 2100			v. City Columbus		vi. State OH	vii. ZIP code 43215	
5b. Customer file number (if applicable) (see instructions)			5c. Unique identifier (if applicable) (see instructions)				
5d. Client name, telephone number, and address (this field cannot be blank or not applicable (NA))							
i. Client name M&T Bank					ii. Telephone number 1-800-724-1633		
iii. Street address (including apt., room, or suite no.) 475 Crosspoint Parkway			iv. City Getzville		v. State NY	vi. ZIP code 14068	
Caution: This tax transcript is being sent to the third party entered on Line 5a and/or 5d. Ensure that lines 5 through 8 are completed before signing. (see instructions)							
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 for line 6 transcripts							
a. Return Transcript <input checked="" type="checkbox"/> b. Account Transcript <input type="checkbox"/> c. Record of Account <input type="checkbox"/>							
7. Wage and Income transcript (W-2, 1098-E, 1099-G, etc.) <input type="checkbox"/>							
a. Enter a max of three form numbers here; if no entry is made, all forms will be sent.							
b. Mark the checkbox for taxpayer(s) requesting the wage and income transcripts. If no box is checked, transcripts will be provided for all listed taxpayers							
Line 1a <input type="checkbox"/> Line 2a <input type="checkbox"/>							
8. Year or period requested. Enter the ending date of the tax year or period using the mm dd yyyy format (see instructions) 12 / 31 / 2023 12 / 31 / 2024 / / / /							
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, if applicable, line 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; however, if both spouses' names and TINs are listed in lines 1a-1b and 2a-2b, both spouses must sign the request. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, 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-C on behalf of the taxpayer. Note: This form must be received by IRS within 120 days of the signature date.							
<input checked="" type="checkbox"/> Signatory attests that he/she has read the above attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-C. See instructions.							
Sign Here	Signature for Line 1a (see instructions)			Date		Phone number of taxpayer on line 1a or 2a	
	<input type="checkbox"/> Form 4506-C was signed by an Authorized Representative			<input type="checkbox"/> Signatory confirms document was electronically signed			
	Print/Type name						
	Title (if line 1a above is a corporation, partnership, estate, or trust)						
	Spouse's signature (required if listed on Line 2a)					Date	
	<input type="checkbox"/> Form 4506-C was signed by an Authorized Representative			<input type="checkbox"/> Signatory confirms document was electronically signed			
	Print/Type name						

Instructions for Form 4506-C, IVES Request for Transcript of Tax Return

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

Future Developments

For the latest information about Form 4506-C and its instructions, go to www.irs.gov and search IVES. Information about any recent developments affecting Form 4506-C (such as legislation enacted after we released it) will be posted on that page.

What's New. Form 4506-C includes the Client company requesting transcripts and increased the number of Wage and Income transcripts requests.

General Instructions

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

Designated Recipient Notification. Section 6103(c) limits disclosure and use of return information received pursuant to the taxpayer's consent and holds the recipient subject to penalties for any unauthorized access, other use, or redisclosure without the taxpayer's express permission or request.

Taxpayer Notification. Section 6103(c) limits disclosure and use of return information provided pursuant to your consent and holds the recipient subject to penalties, brought by private right of action, for any unauthorized access, other use, or redisclosure without your express permission or request.

Purpose of form. Use Form 4506-C to request tax return information through an authorized IVES participant. You will designate an IVES participant to receive the information on line 5a.

Note: If you are unsure of which type of transcript you need, check with the party requesting your tax information.

Where to file. The IVES participant will fax Form 4506-C with the approved IVES cover sheet to their assigned Service Center.

Chart for ordering transcripts

If your assigned Service Center is:	Fax the requests with the approved coversheet to:
Austin Submission Processing Center	Austin IVES Team 844-249-6238
Kansas City Submission Processing Center	Kansas City IVES Team 844-249-8128
Ogden Submission Processing Center	Ogden IVES Team 844-249-8129

Specific Instructions

Line 1a/2a (if spouse is also requested). For IMF Requests: Enter the First, Middle Initial, and Last Name in the indicated fields. If all characters will not fit, please enter up to 12 for First name and 22 for Last name. For BMF Requests: Enter the company name in the Last Name field. If all characters will not fit, please enter up to 22.

Line 1b/2b (if spouse is also requested). Enter the social security number (SSN) or individual taxpayer identification number (ITIN) for the individual listed on line 1a including the dashes in the correct format, or enter the employer identification number (EIN) for the business listed on line 1a including the dashes in the correct format.

Line 1c/2c (if spouse is also requested). Enter your previous name as shown on your last filed tax return if different than line 1a.

Line 3. Enter your current address in the indicated fields. If you use a P.O. Box, include it and the number in the Current Address field.

Line 4. Enter the address shown on the last return filed if different from the address entered on line 3.

Note: If the addresses on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address, or Form 8822-B, Change of Address or Responsible Party — Business, with Form 4506-C.

Line 5b. Enter up to 10 numeric characters to create a unique customer file number that will appear on the transcript. The customer file number cannot contain an SSN, ITIN or EIN. Completion of this line is not required.

Line 5c. Enter up to 10 alpha-numeric characters to create a unique identifier that will show in the mailbox file information. The unique identifier cannot contain an SSN, ITIN or EIN. Completion of this line is not required.

Note. If you use an SSN, we will not input the information and the customer file number or unique identifier will reflect a generic entry of "9999999999".

Line 5d. Enter the Client company name, address, and phone number in the indicated fields. A Client company receives the requested tax transcripts from the IVES participant. If the IVES participant is also the Client company, the IVES participant information should be entered on Line 5a and 5d. These fields cannot be blank or Not Applicable (NA).

Line 6. Enter only one tax form number (1040, 1065, 1120, etc.) per request for all line 6 transcripts request types.

Line 6a. Return Transcript 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 1120-H, Form 1120-L, and Form 1120-S. Return transcripts are available for the current year and returns processed during the prior 3 processing years.

Line 6b. Account Transcript 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.

Line 6c. Record of Account 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.

Line 7. The IRS can provide a transcript that includes data from these information returns: Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. Enter up to three information return types. If no specific type is requested, all forms will be provided. 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, Form W-2 information for 2016, filed in 2017, will likely not be available from the IRS until 2018. If you need Form W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213.

Line 8. Enter the end date of the tax year or period requested in mm dd yyyy format. This may be a calendar year, fiscal year or quarter. Enter each quarter requested for quarterly returns. Example: Enter 12 31 2018 for a calendar year 2018 Form 1040 transcript.



You must check the box in the signature area to acknowledge you have the authority to sign and request the information. The form will not be processed if unchecked.

Signature and date. Form 4506-C must be signed and dated by the taxpayer listed on line 1a and, if listed, 2a. The IRS must receive Form 4506-C within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines, including lines 5a through 8, are completed before signing.

Authorized Representative: A representative can sign Form 4506-C for a taxpayer if the taxpayer has specifically delegated this authority to the representative on Form 2848, line 5a, and Form 2848 is attached to the Form 4506-C request. If you are Heir at Law, Next of Kin, or Beneficiary, you must be able to establish a material interest in the estate or trust. If Form 4506-C is signed by a representative, the Authorized Representative check box must be marked.

Electronic Signature: Only IVES participants that opt in to the Electronic Signature usage can accept electronic signatures. Contact the IVES participant for approval and guidance for electronic signatures. If the Form 4506-C is signed electronically, the Electronic Signature check box must be marked.

Individuals. Transcripts listed on line 6 may be furnished to either spouse if jointly filed. Signatures are required for all taxpayers listed on Line 1a and 2a.

Corporations. Generally, Form 4506-C 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. A bona fide shareholder of record owning 1 percent or more of the outstanding stock of the corporation may submit a Form 4506-C but must provide documentation to support the requester's right to receive the information.

Partnerships. Generally, Form 4506-C can be signed by any person who was a member of the partnership during any part of the tax period requested on line 8.

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.

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-C 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.
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-C 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.

Loan Number: _____

PROFIT AND LOSS STATEMENT (MINIMUM OF LAST FULL THREE MONTHS BUT NO MORE THAN 12)

Please complete a separate Profit and Loss Statement for each business owned by the borrower(s)

*This form also needs to be completed if you are a 1099 employee

Company Name: _____

Type of Business: _____ Percentage of Ownership _____%

Check one: Business is ☐ **All year** OR ☐ **Seasonal** If seasonal, enter the number of months: _____

For the Period: _____ through _____ Date of business formation: _____
MM/DD/YYYY MM/DD/YYYY MM/DD/YYYY

Name(s) of Business Owner(s): _____

Income:	Gross Sales and Receipts.....	_____
	Costs of Goods Sold.....	_____
Other Income:	Interest, fees earned, etc.....	_____
	Total Income (Gross Sales + Other Income)	_____

Business Only		
Expenses:	Officer Wages and Salaries	
	How are the wages received? <input type="checkbox"/> W-2 <input type="checkbox"/> Owner draws (if taxes deducted, provide 30 days current paystubs)	_____
	Employee Wages and Salaries	_____
	Payroll Taxes Business	_____
	Utilities	_____
	Business Rent and/or Mortgage Payments Insurance	_____
	Advertising	_____
	Telephone Office	_____
	Expenses	_____
	Repairs and Maintenance	_____
	Business Travel, Meals, and Entertainment Supplies	_____
	Other Business Expenses.....	_____
	Other Business Expenses.....	_____
	Other Business Expenses.....	_____
	Total Business Expenses	_____
	Net Income/Loss: (Total Income minus Total Business Expenses)	_____

Amounts can be verified with my ☐ **Business Bank Statements** ☐ **Personal Bank Statements**

This form accurately states my/our business expenses and self-employed income for the stated period.

Business Owner's Signature

Date

Business Owner's Signature

Date

M&T Bank ARM's Length Addendum – only complete form if there is a purchase offer on the property

Servicer: M&T Bank	Servicer Loan Number: _____
Property Address: _____	
Date of Purchase Contract: _____	
Seller: _____	Buyer: _____
Seller: _____	Buyer: _____
Listing Agent: _____ Company: _____	Buyer's Agent: _____ Company: _____
Listing Broker: _____ Company: _____	Buyer's Broker: _____ Company: _____
Escrow/Closing Agent: _____ Company: _____	Transaction Facilitator (if applicable): _____

This Pre-Foreclosure Sale Addendum ("Addendum") is given by the Seller(s), Buyer(s), Agent(s), and Facilitator/Negotiator to the Mortgagee of the mortgage loan secured by the Property ("Mortgage") in consideration for the mutual and respective benefits to be derived from the pre-foreclosure sale of the Property.

NOW, THEREFORE, the Seller(s), Buyer(s), Agent(s), and Facilitator/Negotiator do hereby represent, warrant and agree under the pains and penalties of perjury, to the best of each signatory's knowledge and belief, as follows:

- (a) The sale of the Property is an "arm's length" transaction, between Seller(s) and Buyer(s) who are unrelated and unaffiliated by family, marriage, or commercial enterprise. Additionally, the transaction is characterized by a selling price and other conditions that would prevail in an open market environment and there are no hidden terms or special understandings that exist between any of the parties involved in the transaction including, but not limited to the buyer, seller, appraiser, broker, sales agent (including, but not limited to the listing agent and seller's agent), closing agent and mortgagee, except where such provision is expressly prohibited by law;
- (b) Any relationship or affiliation by family, marriage or commercial enterprise to the Seller(s) or Buyer(s) by other parties involved in the sale of the Property has been disclosed to the Mortgagee;
- (c) There are no agreements, understandings or contracts between the Seller(s) and Buyer(s) that the Seller(s) will remain in the Property as tenants or later obtain title or ownership of the Property, except that the Seller(s) are permitted to remain as tenants in the Property for a short term, as is common and customary in the market but no longer than ninety (90) days, in order to facilitate relocation, except where such provision is expressly prohibited by law;

M&T Bank ARM's Length Addendum – only complete this form if there is a purchase offer on the property

- (d) Neither the Seller(s) nor the Buyer(s) will receive any funds or commissions from the sale of the Property except that the Seller(s) may receive a payment if it is offered by the Mortgagee, and, if the payment is made at closing of the sale of the Property, reflected on the HUD-1 Settlement Statement;
- (e) There are no agreements, understandings, current or pending higher offers, or contracts relating to the current sale of subsequent sale of the Property that have not been disclosed to the Mortgagee;
- (f) The current sale transaction is a market real estate transaction, and the buyer is making an outright purchase of real property;
- (g) The current sale transactions will be recorded;
- (h) All amounts to be paid to any person or entity, including holders of other liens on the Property, in connection with the pre-foreclosure sale have been disclosed to and approved by the Mortgagee and will be reflected on the HUD-1 Settlement Statement;
- (i) Each signatory understands, agrees and intends that the Mortgagee is relying upon the statements made in the Addendum as consideration for the reduction of the payoff amount of the Mortgage and agreement to the sale of the Property;
- (j) Each signatory who makes a negligent or intentional misrepresentation agrees to indemnify the Mortgagee for any and all loss resulting from the misrepresentation including, but not limited to, repayment of the amount of the reduced payoff of the Mortgage;
- (k) This Addendum and all representations, warranties and settlements made herein will survive the closing of the pre-foreclosure sale transaction;
- (l) Except for the real estate agents and brokers identified in this addendum, the signatories to this agreement can only serve in one capacity in order to be in compliance with HUD's policies on conflicts of interest and arms-length transactions;
- (m) The listing Agent and Listing Broker certify that the subject property was initially listed in the Multiple Listing Service (MLS) for a period of 15 calendar days before any offers were evaluated;
- (n) If multiple offers were under consideration at the time the offer was submitted for acceptance, the Listing Agent and Listing Broker certify that, of all of the offers meeting HUD's guidelines, this offer yield the highest net return; and
- (o) Each signatory certifies that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001. 1010. 1012; 31 U.S.C. 3729. 3802)

M&T Bank ARM's Length Addendum – only complete this form if there is a purchase offer on the property

IN WITNESS WHEREOF, I have subscribed my name this ____ day of _____, 20__.

(Seller's Signature) By: _____

IN WITNESS WHEREOF, I have subscribed my name this ____ day of _____, 20__.

(Seller's Signature) By: _____

IN WITNESS WHEREOF, I have subscribed my name this ____ day of _____, 20__.

(Listing Agent's Signature) By: _____

IN WITNESS WHEREOF, I have subscribed my name this ____ day of _____, 20__.

(Listing Broker's Signature) By: _____

IN WITNESS WHEREOF, I have subscribed my name this ____ day of _____, 20__.

(Buyer's Signature) By: _____

IN WITNESS WHEREOF, I have subscribed my name this ____ day of _____, 20__.

(Buyer's Signature) By: _____

IN WITNESS WHEREOF, I have subscribed my name this ____ day of _____, 20__.

(Buyer's Agent's Signature) By: _____

IN WITNESS WHEREOF, I have subscribed my name this ____ day of _____, 20__.

(Buyer's Brokers' Signature) By: _____

IN WITNESS WHEREOF, I have subscribed my name this ____ day of _____, 20__.

(Transaction Facilitator's Signature (if applicable)) By: _____

IN WITNESS WHEREOF, I have subscribed my name this ____ day of _____, 20__.

(Escrow Closing Agent's Signature) By: _____

Information Sheet

Pre-foreclosure Sale Procedure

U. S. Department of Housing and
Urban Development
Office of Housing
Federal Housing Commissioner

OMB Approval No. 2502-0589
(Expire 7/31/2026)

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This information is required to obtain benefits. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

Section 1064 of the Stewart B. McKinney Homeless Assistance Amendments Act of 1988 authorizes the Secretary to pay an insurance claim that “bridges the gap” between the fair market value proceeds from the HUD-approved third party sale of a property. The respondents are lenders, counselors, and homeowners who are attempting to sell their properties prior to foreclosure. The Privacy Act of 1974 pledges assurances of confidentiality to respondents. HUD will not disclose this information except where permitted or required by law.

Homeowners who have defaulted on their mortgages often attempt to sell their properties in order to avoid foreclosure and to protect their credit standing. However, because of declining property values in certain areas, some homeowners cannot realize enough from the sale to pay off their mortgage balances.

Therefore, the Department of Housing and Urban Development (HUD) has implemented the Pre-foreclosure Sale (PFS) Program. This program permits homeowners to attempt to sell their home for a fair market sale price, which can be less than the amount owed to the lender. HUD then reimburses the lender for the difference between the sale proceeds and the outstanding mortgage indebtedness.

Homeowners who sell their properties under the PFS Program may also benefit by avoiding the effect of a foreclosure on their credit rating.

Upon review of the homeowner's financial situation, the lender will determine the type of PFS process for which the homeowner qualifies: (1) Standard PFS, (2) Streamlined PFS, or (3) Streamlined PFS for Servicemembers with Permanent Change of Station Orders.

Once the type of PFS has been determined, there are certain criteria which must be met before the homeowner may be permitted to pursue a PFS.

Homeowners must engage the services of a real estate broker/agent. The real estate broker/agent selected must have no conflict of interest with the homeowner, lender, appraiser, or buyer associated with the PFS transaction. The transaction must be between two unrelated parties and be characterized by a selling price and other conditions that would

prevail in a typical real estate sales transaction. If the homeowner secures a sales contract prior to receiving the Approval to Participate, the homeowner may submit the contract to the lender for consideration of PFS Program approval.

Owner-occupant homeowners who are not required to make minimum cash reserve contributions and successfully sell their properties using this program are relieved of their mortgage obligation and may be entitled to a cash incentive up to \$3,000. The homeowner may apply a portion or the entire amount of the \$3,000 consideration to resolve junior liens and to offset the sales transaction costs not paid by HUD (including a home warranty plan fee, costs of optional repairs, and buyer's closing expenses). Eligible homeowners are permitted at closing to receive the remaining amount from the aforementioned \$3,000 consideration. This remaining amount may only be used for transition or relocation assistance.

If, after a good faith effort, an acceptable purchase offer is not obtained within the allotted time, the lender may accept a Deed-in-Lieu (DIL) of Foreclosure from the homeowner. While a DIL is less desirable than a PFS on a homeowner's credit record, it is still looked upon more favorably by creditors than a foreclosure.

By calling this number, **1-800-724-1633**, the homeowner will receive further details from their lender about the procedure and whether they may qualify. **Please NOTE that the homeowner is under no obligation to make this call.**