Form 14039 Rev. December 2011		Department of the Trease Identity TI			OMB Number 1545-2139
Please complete and account to identify any		are an actual or potent	ial victim of ide	ntity theft and would like th	e IRS to mark your
Please check one of					
I am a victim of ic	entity theft and I belie	ve this incident is affe	cting my tax re	cords (Provide a short exp	lanation of the tax impact)
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I am a victim of ic	lentity theft and believ	e I may be at risk for f	uture impact to	o my tax account	
(You should check	ictim of identity theft ar " <i>potential victim</i> " if you r wallet, questionable c	u have not experience	d identity theft b	npact to my tax account. out are at risk due to a)	
Tax year(s) impacted (if applicable or known)	and/or date the inciden	t occurred	Last tax retur	n filed (year) <i>(Enter NRF if</i>	not required to file)
Taxpayer's last name		First name	Middle initial	Provide the last 4 digits of yo	our Social Security Number
i unpuyor o not namo					ividual Taxpayer Identification
					가 있었다. 이 가 있는 것이 있는 것이 있다. 같은 것이 같은 것이 있는 것이 있는 것이 있다. 같은 것이 같은 것이 있는 것이 있는 것이 있는 것이 있는 것이 없다.
Taxpayer's current ma	ailing address				
City			State		ZIP code
Address on last tax re	turn filed (Check here [if you are not requi	ired to file a tax	return)	
City			State		ZIP code
Telephone number	Home V	Vork 🗌 Cell	Best time(s)	o call	
Primary language	🗌 English 🛛 🗎 S	Spanish 🔲 Other - si	pecify		
	jury, I declare that, to nd made in good faith		vledge and bel	ief, the information enter	ed in this form is true,
	land a là chuir anns an Airte. Airte	an an shirt a san san san san san san san san san s		ang ang ang ang ang ang ang ang Tang ang ang	
	ature of taxpayer)		t and of the fo		igned mm/dd/yyyy) rifw your idontity
	ompleted form and a o the document you are		t one of the fo	llowing documents to ve	niy your identity.
b) Driver's license					
C) Social Security Ca	.				
d) Other valid U.S. Fe	ederal or State governmer	it issued identification**			
	bmit photocopies of feo ges designating federa		ation where pro	hibited by 18 U.S.C. 701	
Please submit the	e photocopies require	ed above with this fo	rm using one o	of the options described	on page 2 of this form.
	For Privacy	Act and Paperwork	Reduction Ac	t Notice, see page 2.	
Form 14039 (Rev. 12	-		v.irs.gov		Catalog Number 52525A
TOTAL TOOL (Rev. 12	-4VII)	*****			

Please submit the photocopies required above with this form using one of the following options				
BY MAIL	BY FAX			
If you received a notice from the IRS, return this form with a copy of the notice to the address contained in the notice. If you are unable to file your return electronically because the primary and/or secondary SSN was misused, submit this form with your paper return to the IRS location for your state. If you have already filed your return, submit the form with a letter of explanation to the IRS location for your state. Refer to the "Where Do You File" section of your return instructions.	If you received a notice in the mail from the IRS and a fax number is shown, fax this completed form with a copy of the notice to that number. Please include a cover sheet marked "Confidential." If no fax number is shown, please follow the mailing instructions. NOTE: The IRS does not initiate contact with taxpayers by e-mail or fax.			
If you have not received an IRS notice and are self-reporting as being at risk for future impact to your tax account, please mail this form to:	If you have not received an IRS notice and are self-reporting as being at risk for future impact to your tax account, fax this form to: (978) 684-4542.			
Internal Revenue Service P.O. Box 9039 Andover, MA 01810-0939 USA	NOTE: This is not a toll-free number. Your telephone company or a third party service provider, if applicable, may charge to send faxes.			

Other helpful identity theft information may be found on www.irs.gov (keyword "identity theft"). Additionally, locations and hours of operation for Taxpayer Assistance Centers can be found at http://www.irs.gov/localcontacts/index.html.

Note: The Federal Trade Commission (FTC) is the central federal government agency responsible for identity theft awareness. The IRS does not share taxpayer information with the FTC. Please refer to the FTC's website at http://www.ftc.gov (keyword "identity theft") for additional information, protection strategies, and resources.

Privacy Act and Paperwork Reduction Act Notice

Our legal authority to request the information is 26 U.S.C. 6001.

The primary purpose of the form is to provide a method of reporting identity theft issues to the IRS so that the IRS may document situations where individuals are or may be victims of identity theft. Additional purposes include the use in the determination of proper tax liability and to relieve taxpayer burden. The information may be disclosed only as provided by 26 U.S.C. 6103.

Providing the information on this form is voluntary. However, if you do not provide the information it may be more difficult to assist you in resolving your identity theft issue. If you are a potential victim of identity theft and do not provide the required substantiation information, we may not be able to place a marker on your account to assist with future protection. If you are a victim of identity theft and do not provide the required information, it may be difficult for IRS to determine your correct tax liability. If you intentionally provide false information, you may be subject to criminal penalties.

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.

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. If you have comments concerning the accuracy of these time estimates or suggestions for making this form 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 this form to this address. Instead, see the form for filing instructions.

Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.