



## **Homeowner's Information Packet For MCU Members**

As your mortgage servicer, we want you to know that there are programs available to you that may help you with your mortgage payment. If you qualify for assistance and comply with the Trial Period Plan, we will modify your loan and you can avoid foreclosure.

The modification may involve some or all of the following changes to your mortgage loan:

1. Bringing your account current
2. Reducing the interest rate of your loan
3. Extending the term of your loan, and
4. Delaying your payment of a portion of the mortgage principal until the end of the loan term

How can you find out if you qualify? Just follow the steps below and let us know that you need help today!

### **Step 1            GATHER THE INFORMATION WE NEED TO HELP YOU**

- Explain the financial hardship that makes it difficult for you to pay your mortgage loan using the Uniform Borrowers Assistance form (enclosed) completed and signed by all borrowers.
- Submit the required documentation of your income
- Make timely monthly trial-period payments

If you meet eligibility criteria, you will be offered a Trial Period Plan. The monthly trial period payments will be based on the income documentation that you provide. They will be an estimate of what your payment will be if we are able to modify your loan under the terms of the program.

If you do not qualify for a loan modification, we will work with you to explore other options available to help keep your home or ease your transition to a new home.

### **Step 2            COMPLETE AND SUBMIT**

Please complete the enclosed forms and submit all the required documentation. Please take the steps outlined on the enclosed document "Complete Your Checklist." If you have any questions, please contact us at 212-238-2370.

Sincerely,

Municipal Credit Union

## CHECKLIST

To see if you are eligible for Hardship Assistance, fax to (212) 416-7316 or mail the items listed below to:

Municipal Credit Union  
Real Property Department  
22 Cortlandt Street, 29<sup>th</sup> Fl  
New York, NY 10007

- 1) Signed and dated copy of the enclosed IRS Form 4506-T; (Send in copy with original signature)
- 2) 2010 Filed Federal Tax Return, 2010 & 2011 W2's; **AND** Utility bills as proof of address
- 3) The Following documentation is needed: (Send in all that apply to your income situation)
  - A. For each borrower who receives a salary or hourly wages send in:**
    - Copy of your two most recent pay stubs that show year-to-date earnings
  - B. For each borrower who is self-employed send in:**
    - Most recent quarterly or year-to-date profit/loss statement.
  - C. For each borrower who received other earned income send in (e.g. overtime, bonus, commission, fee housing allowance, tips) send in:**
    - Reliable third party documentation describing the nature of the income (e.g. an employment contract or printouts documenting tip income.)
  - D. For each borrower who has income such as social security, disability or death benefits, pension, adoption assistance, or public assistance send in:**
    - Copy of benefit statement or letter from the provider that states the amount, frequency and duration of the benefit, AND Copy of two most recent bank statements showing receipt of such payment.
  - E. For each borrower who has unemployment income send in:**
    - Copy of benefit statement or letter from the provider that states the amount, frequency and duration of the benefit; AND copy of two most recent bank statements showing receipt of such payment.
  - F. For each borrower who is relying on alimony or child support as qualifying income send in:**
    - Copy of divorce decree; or separation agreement or other written agreement filed with the court that states the amount and period of time over which it will be received, AND Copy of two most recent bank statements showing receipt of such payment.
  - G. For each borrower who has rental income send in:**
    - Copy of the most recently filed federal tax return with all schedules, including Schedule E - Supplemental Income and Loss.
- 4) Signed and Date Hardship Letter of Explanation w/ supporting documentations
- 5) Financial Hardship Form **AND** Legible copy of NYS issued ID or Passport
- 6) Copy of all the pages of the most recent bank statements for all accounts covering 2 months.



Real Property Department  
 22 Cortland Street, 29th Floor  
 New York, NY 10007  
 Tel: 212-238-2370

**MCU LOAN NUMBER**

Borrower Name	Social Security No	Co-Borrower Name	Social Security No
Day ( )		Day ( )	
Evening ( )		Evening ( )	
Email		Email	
Property Address		Property Address	
City, State & Zip:		City, State & Zip:	
<b>Property For Sale?</b> Yes No	<b>Property For Rent</b> Yes No (Circle One)		
List Date/Price	Monthly Rent / Unit #	Monthly Last Paid	Date Lease Expires
Realtor Name	/		
Realtor Phone	/		

Circle One

Monthly Obligations		Monthly Payment	Do you occupy the subject property?	Yes	No
Primary Residence	\$		How many people in the household?		
Condo / Homeowners Association (HOA) fees	\$		Do you have a 2nd mortgage, HELOC, judgments, liens secured by this property?	Yes	No
Property Taxes	\$		Do you own any other properties?	Yes	No
Homeowners Insurance/Flood insurance	\$		How many other properties do you owe?		
Other Mortgages	\$		Is the subject property vacant?	Yes	No
Auto Loans	\$		Is the subject property condemned?	Yes	No
Other Loans	\$		Is the subject property a 2nd home?	Yes	No
Credit Cards (minimum payments)	\$		Has this loan been previously modified?	Yes	No
Alimony/Child Support	\$		Have you attended credit counseling?	Yes	No
Child/Dependant Care/Day Care	\$		Are any borrowers out of the country?	Yes	No
Garbage/Sewer	\$		Have You filed Bankruptcy?	Yes	No
Utilities	Water	\$	Circle One if "Yes" Chapter 7 Chapter 13 Other Chapter:		
	Electricity	\$			
	Gas/Heat	\$			
	Cable/Satellite/Internet/Telephone	\$			
Other:	\$		File Date:		
Job Related Expenses	\$		Case Number:		
Health/Life Insurance	\$		Discharged:	Yes	No
Auto Insurance	\$		Discharged Date:	/	/
Medical Expenses	\$		Bankruptcy Reaffirmed:	Yes	No
Car Expenses (Gas and Maintenance)	\$		*send discharge documents along w/ reaffirmation.		
Groceries	\$		<b>What is the amount of funds you have available to apply towards the delinquent payments?</b>		
Toiletries	\$		\$		
Other	\$				

I (we) agree that the financial information provided is an accurate statement of my (our) financial status. I (we) understand and acknowledge that any action taken by the lender of my (our) mortgage loan on (our) behalf will be made in strict reliance on the financial information provided. My (Our) signature(s) below grants the holder of my (our) mortgage the authority to confirm the information I (we) have disclosed in this financial statement, to verify that it is accurate by ordering a credit report, and to contact my real estate agent and/or credit counseling service representative (if applicable).

By: \_\_\_\_\_  
 Signature of Borrower

Date: \_\_\_\_\_ I \_\_\_\_\_ I 2012

DOB: \_\_\_\_\_  
 (Date of Birth)

By: \_\_\_\_\_  
 Signature of Co-Borrower

Date: \_\_\_\_\_ I \_\_\_\_\_ I 2012

DOB: \_\_\_\_\_  
 (Date of Birth)

Before mailing, make sure you have signed and dated the form and attached a copy of your most recent paystub.  
 If you are self-employed, attached a copy of your most recent Federal Tax return and P&L Statement

Monthly Income	Borrower	Co-borrower	Reason For Default:	✓
Base Income	\$	\$	Abandonment of Property	<input type="checkbox"/>
Overtime	\$	\$	Business Failure	<input type="checkbox"/>
Bonuses	\$	\$	Casualty Loss	<input type="checkbox"/>
Commissions	\$	\$	Curtailment of Income	<input type="checkbox"/>
Dividend Interest	\$	\$	Death of Borrower	<input type="checkbox"/>
Net Rental Income	\$	\$	Death of Borrower Family Member	<input type="checkbox"/>
Social Security	\$	\$	Distant Employment Transfer	<input type="checkbox"/>
Child Support/Alimony	\$	\$	Energy Environment Costs	<input type="checkbox"/>
Other	\$	\$	Excessive Obligations	<input type="checkbox"/>

Assets - Estimated Values	Borrower	Co-borrower	Reason For Default:	✓
Checking	\$	\$	Fraud	<input type="checkbox"/>
Life Insurance Net Cash Value	\$	\$	Illness of Borrowers Family Member	<input type="checkbox"/>
Purchase Cash Deposit	\$	\$	Illness of Principal Borrower	<input type="checkbox"/>
Savings	\$	\$	Inability to Rent Property	<input type="checkbox"/>
Stocks & Bonds	\$	\$	Inability to Sell Property	<input type="checkbox"/>
Automobiles	\$	\$	Incarceration	<input type="checkbox"/>
Business Net Worth	\$	\$	Marital Difficulties	<input type="checkbox"/>
Real Estate Owned	\$	\$	Military Service	<input type="checkbox"/>
Vested Retirement Fund	\$	\$	Other	<input type="checkbox"/>
401K	\$	\$	Transfer of Ownership Pending	<input type="checkbox"/>
Other Assets	\$	\$	Unemployment	<input type="checkbox"/>

Liabilities	Borrower		Co-borrower	
	Monthly Payment	Balance	Monthly Payment	Balance
Real Estate Loans - 1st Lien	\$	\$	\$	\$
Real Estate Loans - Jr. Lien	\$	\$	\$	\$
Investment Property	\$	\$	\$	\$
Credit Card Payments	\$	\$	\$	\$
Automobile Loans	\$	\$	\$	\$
Personal Loans	\$	\$	\$	\$
Stock Pledge	\$	\$	\$	\$
Other	\$	\$	\$	\$

**Hardship:**

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By: \_\_\_\_\_  
Signature of Borrower

Date: \_\_\_\_ | \_\_\_\_ | \_\_\_\_

By: \_\_\_\_\_  
Signature of Co-Borrower

Date: \_\_\_\_ | \_\_\_\_ | \_\_\_\_

# Request for Transcript of Tax Return

OMB No. 1545-1872

▶ Request may be rejected if the form is incomplete or illegible.

**Tip.** Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at [IRS.gov](http://IRS.gov) and click on "Order a Transcript" or call 1-800-908-9946. 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.

<b>1a</b> Name shown on tax return. If a joint return, enter the name shown first.	<b>1b</b> First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
<b>2a</b> If a joint return, enter spouse's name shown on tax return.	<b>2b</b> Second social security number or individual taxpayer identification number if joint tax return
<b>3</b> Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)	
<b>4</b> Previous address shown on the last return filed if different from line 3 (see instructions)	
<b>5</b> 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.	

**Caution.** If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your IRS transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

**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. ▶ \_\_\_\_\_

**a Return Transcript**, which 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 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 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. 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. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. 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 2010, filed in 2011, will not be available from the IRS until 2012. 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. \_\_\_\_\_

Check this box if you have notified the IRS or the IRS has notified you that one of the years for which you are requesting a transcript involved **identity theft** on your federal tax return . . . . .

**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 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. **Note.** For transcripts being sent to a third party, this form must be received within 120 days of the signature date.

		Phone number of taxpayer on line 1a or 2a
▶ <b>Signature</b> (see instructions)	Date	
▶ <b>Title</b> (if line 1a above is a corporation, partnership, estate, or trust)		
▶ <b>Spouse's signature</b>	Date	

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

## What's New

The IRS has created a page on IRS.gov for information about Form 4506-T at [www.irs.gov/form4506](http://www.irs.gov/form4506). Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

## General Instructions

**CAUTION.** Do not sign this form unless all applicable lines have been completed.

**Purpose of form.** Use Form 4506-T to request tax return information. You can also designate (on line 5) a third party to receive the information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

**Note.** If you are unsure of which type of transcript you need, request the Record of Account, as it provides the most detailed information.

**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 addresses, send your request to the address based on the address of your most recent return.

**Automated transcript request.** You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Order a Transcript" or call 1-800-908-9946.

## Chart for individual transcripts (Form 1040 series and Form W-2 and Form 1099)

If you filed an individual return and lived in:	Mail or fax to the "Internal Revenue Service" at:
Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	RAIVS Team Stop 6716 AUSC Austin, TX 73301
Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	512-460-2272
Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	RAIVS Team Stop 37106 Fresno, CA 93888
Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia	559-456-5876
Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia	RAIVS Team Stop 6705 P-6 Kansas City, MO 64108
Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia	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, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, 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
Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin	801-620-6922
Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin	RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250
Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin	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) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

**Line 3.** Enter your current address. If you use a P. O. box, include it on this line.

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

**Note.** If the address on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address.

**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 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.

**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 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-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:

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.