Form 14039

Department of the Treasury - Internal Revenue Service

Identity Theft Affidavit

OMB Number 1545-2139

Rev. December 2011 Please complete and submit this form if you are an actual or potential victim of identity theft and would like the IRS to mark your account to identify any questionable activity.

Please check one of the follow	ving boxe	es				
I am a victim of identity the	eft and I b	elieve this	incident is affe	cting my tax re	ecords (Provide a short exp	planation of the tax impact)
I am a victim of identity the	eft and be	lieve I may	be at risk for for	uture impact to	o my tax account	
I am a potential victim of id (You should check "potential lost/stolen purse or wallet, que lost/stolen purse or wallet, que	l victim" if	you have r	ot experienced	d identity theft b	out are at risk due to a	
Tax year(s) impacted and/or date the incident occurred (if applicable or known)				Last tax return filed (year) (Enter NRF if not required to file)		
Taxpayer's last name			ame	Middle initial	Provide the last 4 digits of yo (SSN) or your complete Ind Number (ITIN)	our Social Security Number lividual Taxpayer Identification
Taxpayer's current mailing addr	ess			1		
City				State		ZIP code
Address on last tax return filed (Check he	re if yo	u are not requi	red to file a tax	return)	L
City				State		ZIP code
Telephone number				Best time(s) to call		
Primary language ☐ En	glish [Spanish	Other - sp	ecify		
Under penalty of perjury, I decorrect, complete, and made i			st of my know	ledge and beli	ief, the information enter	ed in this form is true,
(Signature of taxpayer)					(Date s	igned mm/dd/yyyy)
Please submit this completed (Check the box next to the docu				t one of the fo	llowing documents to ve	rify your identity.
a) Passport	,		3,			
b) Driver's license						
c) Social Security Card						
d) Other valid U.S. Federal or Sta	ate governi	ment issued	identification**			
** Please do not submit photo (e.g., official badges design				ation where pro	hibited by 18 U.S.C. 701	
Please submit the photoco	pies requ	uired abov	e with this for	m using one o	of the options described	on page 2 of this form.

For Privacy Act and Paperwork Reduction Act Notice, see page 2.

Please submit the photocopies required above with this form using one of the following options

BY MAIL

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

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:

IRS location for your state. Refer to the "Where Do You File"

Internal Revenue Service P.O. Box 9039 Andover, MA 01810-0939 USA

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.

BY FAX

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, fax this form to: (978) 684-4542.

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.