Form **843**

(Rev. August 2011) Department of the Treasury Internal Revenue Service

Claim for Refund and Request for Abatement

► See separate instructions.

OMB No. 1545-0024

Use Form 843 if your claim or request involves:

- (a) a refund of one of the taxes (other than income taxes or an employer's claim for FICA tax, RRTA tax, or income tax withholding) or a fee, shown on line 3,
- (b) an abatement of FUTA tax or certain excise taxes, or
- (c) a refund or abatement of interest, penalties, or additions to tax for one of the reasons shown on line 5a.

Do not use Form 843 if your claim or request involves:

- (a) an overpayment of income taxes or an employer's claim for FICA tax, RRTA tax, or income tax withholding (use the appropriate amended tax return),
- (b) a refund of excise taxes based on the nontaxable use or sale of fuels, or
- (c) an overpayment of excise taxes reported on Form(s) 11-C, 720, 730, or 2290.

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Name(s) Address (number, street, and room or suite no.)								Your social security number Spouse's social security number				
Name a	and add	dress shown on return if	different from abo	ove		0	Daytime	telephone ni	umber			
1	Period. Prepare a separate Form 843 for each tax period or fee year. From to						2 Amount to be refunded or abated:					
3	Type of tax or fee. Indicate the type of tax or fee to be refunded or abated or to which the interest, penalty, or addition to is related.											
4	Туре	mployment of penalty. If the cla d (see instructions). IF	•	☐ Gift nvolves a penalty,	enter the Interna		☐ Income ☐ Fee Code section on which the penalty is					
5a	Interest, penalties, and additions to tax. Check the box that indicates your reason for the request for refund or abatement. (In none apply, go to line 6.) Interest was assessed as a result of IRS errors or delays. A penalty or addition to tax was the result of erroneous written advice from the IRS. Reasonable cause or other reason allowed under the law (other than erroneous written advice) can be shown for no assessing a penalty or addition to tax.											
b												
6	Original return. Indicate the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the type of fee or return, if any, filed to which the tax, interest, penalty, or addition to tax related to the tax related to tax related									lates.		
7		anation. Explain why e 2. If you need more			hould be allowed	d and show the	e comp	outation of t	he amo	ount shown		
		you are filing Form 84							nust sig	n the claim.		
		of perjury, I declare that I d complete. Declaration of							wledge a	and belief, it is		
Signatur	e (Title,	if applicable. Claims by cor	rporations must be si	igned by an officer.)				Date				
Signatur	e (spou	se, if joint return)						Date				
Paid Prepa	arer	Print/Type preparer's nam	ne	Preparer's signature		Date	Check if self-employed PTIN		PTIN			
Use (Firm's name ▶						Firm's EIN ▶				
,		Firm's address ▶					Phone no.					