

Claim for Refund and Request for Abatement

(Rev. January 1997)

OMB No. 1545-0024

Department of the Treasury
Internal Revenue Service

▶ **See separate instructions.**

Use Form 843 only if your claim involves **(a)** one of the taxes shown on line 3a or **(b)** a refund or abatement of interest, penalties, or additions to tax on line 4a.

Do not use Form 843 if your claim is for-

- An overpayment of incomes taxes;
- A refund of fuel taxes;
- An overpayment of excise taxes reported on Form 720, 730, or 2290 (see **General Instructions**).

P L E A S E P R I N T	Name of claimant 843 EXAMPLE	Your social security number 111-11-1111
	Address (number, street, and room or suite no.)	Spouse's social security number
	City or town, state, and ZIP code	Employer identification number
	Name and address shown on return if different from above	Daytime telephone number

1 Period-prepare a separate Form 843 for each tax period From 1/01 , 00 , to 12/31 , 00	2 Amount to be refunded or abated \$ 2,792
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3a Type of tax, penalty, or addition to tax:
 Employment Estate Gift Excise (unless reported on Form 720, 730, or 2290-see instructions.)
 Penalty-IRC section ▶ _____

b Type of return filed (see instruction):
 706 709 940 941 943 945 990-PF 4720 Other (specify) **1040**

4a Request for abatement or refund of:
 Interest caused by IRS errors or delays (if applicable-see instructions).
 A penalty or addition to tax as a result of erroneous advice from the IRS.

b Dates of payment ▶ _____

5 Explanation and additional claims. Explain why you believe this claim should be allowed, and show computation of tax refund or abatement of interest, penalty, or addition to tax.
SEE ATTACHED STATEMENT

Signature. If you are filing Form 843 to request a refund or abatement relating to a joint return, both you and your spouse must sign the claim. Claims filed by corporations must be signed by a corporate officer authorized to sign, and the signature must be accompanied by the officer's title.

Under penalties of perjury, I declare that I have examined this claim, including accompanying schedules and statements, and, to the best of my knowledge and belief, it is true, correct, and complete.

Signature (Title, if applicable. Claims by corporations must be signed by an officer.)	Date
Signature	Date