Form **9465**
(Rev. December 2026)
Department of the Treasury
Internal Revenue Service

Payment Plan Request

Go to *www.irs.gov/Form9465* for instructions and the latest information.
If you are filing this form with your tax return, attach it to the front of the return.
See separate instructions.

OMB No. 1545-0074

Tip: If you owe $50,000 or less in combined tax, penalties, and interest, you may be able to avoid filing Form 9465 and establish a payment plan (installment agreement) online, even if you haven't yet received a tax bill. If you establish your payment plan using the Online Payment Agreement application, your user fee that you pay will be lower than it would be with Form 9465. To apply for an Online Payment Agreement, go to *www.irs.gov/OPA* or scan this QR code:

Long-Term Payment Plan Request

This request is for Form(s) (for example, Form 1040 or Form 941) _____

Enter tax year(s) or period(s) involved (for example, 2023 and 2024, or January 1, 2023, to June 30, 2023) _____

1a	Your first name and initial	Last name	**Your social security number**
	If a joint return, spouse's first name and initial	Last name	**Spouse's social security number**
	Current address (number and street). If you have a P.O. box and no home delivery, enter your box number.		Apt. number
	City, town or post office, state, and ZIP code. If a foreign address, also complete the spaces below (see instructions).		
	Foreign country name	Foreign province/state/county	Foreign postal code

1b If this address is new since you filed your last tax return, check here . . . . . ☐

2 Name of your sole proprietorship business (must no longer be operating) | Employer identification number (EIN)

3 Your home phone number | Best time for us to call

4 Your work phone number | Ext. | Best time for us to call

5	Enter the total amount you owe as shown on your tax return(s) (or notice(s))	**5**	
6	If you have any **additional balances due** that aren't reported on line 5, enter the amount here (even if the amounts are included in an existing payment plan)	**6**	
7	Add lines 5 and 6 and enter the result	**7**	
8	Enter the amount of any payment you're making with this request. See instructions	**8**	
9	Amount owed. Subtract line 8 from line 7 and enter the result	**9**	
10	Enter the amount you can pay each month. Make your payment as large as possible to limit interest and penalty charges, **as these charges will continue to accrue until you pay in full**. If you have an existing payment plan, this amount should represent your total proposed monthly payment amount for all your liabilities. **If no payment amount is listed on line 10, a payment will be determined for you by dividing the balance due on line 9 by 72 months**	**10**	$
11	Enter the date you want to make your payment each month. **Don't** enter a date later than the 28th	**11**	

12 If you want to make your payments by direct debit from your checking account, see the instructions and fill in lines 12a and 12b. This is the most convenient way to make your payments and it will ensure that they are made on time.

12a Routing number

12b Account number

I authorize the U.S. Treasury and its designated Financial Agent to initiate a monthly ACH debit (electronic withdrawal) entry to the financial institution account indicated for payments of my federal taxes owed, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke payment, I must contact the U.S. Treasury Financial Agent at **1-800-829-1040** no later than 14 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payments of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payments.

12c **Low-income taxpayers only.** If you're unable to make electronic payments through a debit instrument by providing your banking information on lines 12a and 12b, check this box and your user fee will be reimbursed upon completion of your payment plan. See instructions . . . . . ☐

By signing and submitting this form, I authorize the IRS to contact third parties and to disclose my tax information to third parties in order to process this request and administer the agreement over its duration. I also agree to the terms of this agreement, as provided in the instructions, if it's approved by the IRS.

Your signature	Date	Spouse's signature (if a joint return, **both** must sign)	Date