



Department of the Treasury
Internal Revenue Service
Small Business / Self-Employed Division
600 DR MARTIN L KING PL
ROOM 663
LOUISVILLE, KY 40202-0000

Date:

03/12/2019

Person to contact:

Taxpayer ID number:

[REDACTED]
LEITCHFIELD, KY 42754-1104624

We approved your request to pay your taxes in installments. Your first payment of \$2,000.00 is due on 04/28/2019. You agreed to make future payments of \$2,000.00 on the 28th of each following month until you pay the full amount.

The amount you owe as of 03/11/2019 is \$49,273.26. This amount does not include all accrued penalties and interest. We will charge applicable penalties and interest until you pay the full amount you owe, because you didn't pay your total tax when it was due.

You agreed to pay us by direct debit. This means your financial institution will subtract (debit) the amount of your monthly payment from your checking or savings account on the same day each month and send that amount to us. Paying by direct debit also authorizes a financial institution to receive confidential information necessary to answer inquiries and resolve issues related to your payment. Remember to subtract the payments from your account balance each month.

If you don't have enough money in your checking or savings account for the monthly payment, we must charge a penalty of \$25 or two percent of your monthly payment, whichever is larger. If your monthly payment is less than \$25, the penalty amount will be the payment amount.

Note: If we're charging backup withholding on any of your accounts, it will continue. Having an installment agreement doesn't stop backup withholding.

Although we've established an installment plan for you, we must protect the government's interest. Therefore, we may still file a Notice of Federal Tax Lien.

MAY BE FILED IF THIS AGREEMENT DEFAULTS

Conditions of this agreement:

- We must receive each payment by the date shown above. If you cannot make your monthly payment, contact us immediately.
- This agreement is based on your current financial condition. We may change or cancel it if we show your ability to pay has significantly changed.
- We may cancel this agreement if you don't give us updated financial information when we ask for it.
- While this agreement is in effect, you must pay any federal taxes you owe on time.
- We'll apply your federal tax refunds (if any) to the amount you owe until it is fully paid.
- If you don't meet the conditions of this agreement, we'll cancel it, and may collect the entire amount you owe by levy on your income, bank accounts or other assets, or by seizing your property.

POA Copy

- We may cancel the agreement at any time if we find that collection of the tax is in jeopardy.
- You must pay a \$225.00 one-time installment fee (\$107.00 if direct debit installment agreement).
- If the agreement defaults, you must pay an \$89.00 fee to reinstate it.
- We'll let you know if you are a low-income taxpayer and qualify for the reduced installment fee (\$43.00) or meet certain conditions that would allow us to waive or reimburse that reduced fee. If we don't qualify you as a low-income taxpayer, you can request reconsideration using Form 13844, Application For Reduced User Fee For Installment Agreements.
- We'll apply all payments on this agreement in the best interest of the United States.

Note: If we propose to change or cancel your agreement for any reason, we'll send you, in most situations, a notice advising you of our proposal and give you the opportunity to appeal the change or cancellation.

Additional conditions

PLEASE INCLUDE STAT 53 PERIOD 10/201512

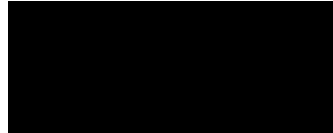
This installment agreement includes taxes for the following forms and tax periods:

<u>Form</u>	<u>Tax Period</u>	<u>Form</u>	<u>Tax Period</u>	<u>Form</u>	<u>Tax Period</u>
941	12/31/2014	941	03/31/2015	941	06/30/2015
941	09/30/2016	1120	12/31/2013	1120	12/31/2017

If you have questions, you can call the telephone number at the top of this letter.

Thank you for your cooperation.

Sincerely,





YOUR VOICE AT THE IRS



March 12, 2019

Sequoia Tax Relief
1490 W 121st Ave Ste 201
Westminster, CO 80234-3497

THE OFFICE OF THE TAXPAYER ADVOCATE OPERATES INDEPENDENTLY OF ANY OTHER IRS OFFICE AND REPORTS DIRECTLY TO CONGRESS THROUGH THE NATIONAL TAXPAYER ADVOCATE.

Taxpayer Name: [REDACTED]

Tax Form(s): 941, 1120, 940
Tax Period(s) Ended: December 31, 2014, March 31, 2015, June 30, 2015, September 30, 2016,
December 31, 2013, December 31, 2017, December 31, 2015
[REDACTED]

Dear Sequoia Tax Relief:

This is to follow up my last letter dated March 5, 2018. I'm writing to update you on the progress in your clients' case. I'm working to resolve your clients' request for an installment agreement. I apologize that your resolution is taking longer than expected.

Progress on your case

Since my last letter, the IRS has approved the installment payment request for Ace Building Systems Inc. I have attached a copy of the approval letter dated March 12, 2019. I will continue to monitor the tax account until the arrangement posted to the IRS database.

When you'll hear from me

I'll contact you again by April 2, 2019, to update you on your case. While I expect to resolve your clients' problem by April 30, 2019, that date may change if I need additional information or extra time. In the meantime, please let me know if someone at the IRS contacts you about this issue.

Questions?

If you have any questions or concerns about your case, you can reach me directly at 502-912-5039. You can also write to me at the address at the bottom of this letter.

I apologize for this delay and any inconvenience or frustration it may cause. I appreciate your patience. Please be assured that I am working on your case and advocating on your behalf.

Sincerely,

[REDACTED]

Case Advocate

Enclosure

CC: [REDACTED]

Taxpayer Advocate Service
600 Dr. Martin Luther King Jr
Place MS Room 325
Louisville, KY 40202

Hours:
T-F
7:45 a.m. - 6:15 p.m. EST

Toll-free number:
844-409-3268

Toll-free fax number:
855-296-7837
www.irs.gov/advocate



IRS

Department of the Treasury
Internal Revenue Service
Small Business / Self-Employed Division
600 DR MARTIN L KING PL
ROOM 663
LOUISVILLE, KY 40202-0000

Date:

03/12/2019

Person to contact:

Telephone: (502) 912-5159

Taxpayer ID number:

LEITCHFIELD, KY 42754-1104624

FILE COPY

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