Department of the Treasury

INTERNAL REVENUE SERVICE AMC-Stop 880 PO Box 30834 Memphis, TN 38130-0834 Date of this Letter:

Person to Contact: Angela Johnson Employee #:100201604 Phone#:844-398-5025 EXT. 7:30AM-4:00PM Mon-Fri

Taxpayer ID#:
Offer Number:

NEWSOME

Dear NEWSOME,

We have accepted the offer in compromise you signed and dated on 04/16/2021. The acceptance date is the date of this letter and acceptance is subject to the terms and conditions on the enclosed Form 656, Offer in Compromise.

The conditions of the offer require you to timely file and pay all required taxes for five tax years (including any extensions). This requirement begins on the date of this letter.

Effective November 1, 2021, for offers accepted on or after this date, the IRS will not offset refunds and credits to the tax years you listed in Form 656. If applicable, you may receive any refund or credit that you are entitled to after the acceptance date of this offer. If you want your refund or credit applied to your offer amount or your liability instead of issued to you, you must contact the person listed at the top of this letter. Any refunds or credits prior to the offer acceptance date will be applied to your liability, not to your accepted offer. If we filed a Notice of Federal Tax Lien against you, we will release it when you pay the offer in full. If you make the final payment by credit or debit card, we won't be able to release the Notice of Federal Tax Lien for up to 120 days from the date of the credit or debit payment.

If you are required to make any payments under this agreement, make your check or money order payable to the United States Treasury. Write "offer payment" on the check, include your social security number or employer identification number on the payment and send it to:

Internal Revenue Service P.O. Box 219982 Kansas City, MO 64121

continued on next page

Please send all other correspondence to:

Internal Revenue Service PO Box 77 Memphis, TN 38101-0077

You must promptly notify us of any change in your address or marital status to ensure we can communicate with you about the status of your offer.

If you have submitted a joint offer with your spouse or former spouse and you are meeting or have met all the conditions of your offer agreement, but your spouse or former spouse does not meet the conditions of the offer agreement, your offer will not default.

If you fail to meet any of the terms and conditions of the offer, we will issue a notice to default the agreement. If the offer defaults, the original tax, including all penalties and interest will be due immediately. If we issue the default notice, we may:

- Immediately file suit to collect the entire unpaid balance of the offer.
- Immediately file suit to collect an amount equal to the original amount of the tax liability as liquidating damages, minus any payments already received under the terms of this offer.
- Disregard the amount of the offer and apply all amounts already paid under the offer against the original amount of the tax liability.
- File suit or levy to collect the original amount of the tax liability.

If your offer defaults, the shared responsibility payment (SRP) amount that you owe is not subject to penalties or to lien and levy enforcement actions. The SRP amount that you owe is the assessed payment for not having minimum essential health coverage for you and, if applicable, your dependents per Internal Revenue Code Section 5000A - Individual shared responsibility payment. Interest will continue to accrue and we may apply your federal tax refunds, in accordance with the terms of your offer, to the SRP amount that you owe until it is paid in full.

It is your responsibility to keep a record of payments and to monitor the remaining balance due of the offer terms. If you are unsure of your final payment amount, please call the number above to confirm the amount due prior to sending your final payment. Any overpayments will be kept and applied toward your liability.

If you have additional questions, you can contact the person listed at the top of this letter.

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Sincerely.

Self-Employed Offer Examiner Manager

Enclosure cc:POA

Form			
(April	20)2	0)
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Department of the Treasury - Internal Revenue Service

	Form 636	Department of the Trades,	
	(April 2020)	Offer in Compromis	
To:	Commissioner of Inte	rnal Revenue Service	IRS Received Date
in the i are siç	following agreement, the progning this agreement.	onoun "we" may be assumed in place of "i" when there are joint liabilities and both part	
require	ed by law for the tax type :	e the tax liabilities plus any interest, penalties, additions to tax, and additional an and period(s) marked in Section 1 or Section 2 below.	
Dld y	ou use the Pre-Qualifler	tool located on our website at <u>http://irs.treasury.gov/oic_pre_qualifier/</u> prio	r to filling out this form
	Yes No	the force of the language of the roccion of the roc	mmanded
Includ	de the \$205 application fee	ifier tool is not mandatory before sending in your offer. However, it is reco and initial payment <i>(personal check, cashier's check, or money order)</i> with your must also include the completed Form 433-A (OIC) and/or Form 433-B (OIC) and or Section 2, but not both, depending on the tax debt you are offering to compron	r Form 656 unless you qualify for the disapporting documentation. You
	tion 1	Individual Information (Form 1040 Filers)	
If you Individ	are a 1040 filer, an individual individual individual nersonally	dual with personal liability for Excise tax, individual responsible for Trust Fund Re responsible for partnership liabilities, and/or an individual who operated as a dis- proprietor prior to 2009 you should fill out Section 1.	ecovery Penalty, self-employed regarded single member Limited Liabilit
Your	first name, middle initial, la	ast name	Social Security Number (SSN)
	Newsome		
if a jo	oint offer, spouse's first nar	ne, middle initial, last name	Social Security Number (SSN)
NA			
Your	home physical address (st	reet, city, state, ZIP code, county of residence)	
Your	home mailing address (if o	lifferent from above or post office box number)	
NA	Tiothe maining address in	,	
le thi	s a new address		Yes X No
		ate our records to this address	Yes X No
	Employer Identification No		
	. ,		
		Individual Tax Periods (If Your Offer is for Individual Tax Debt	Only)
X	1040 Income Tax-Year(s)	2014, 2016 , 2019 (017 12/30/21	
	Touck Fund Donnung Don	aity as a responsible person of (enter business name)	The state of the s
	for failure to pay withhold	ing and Federal Insurance Contributions Act taxes (Social Security taxes), for pe	riod(s) ending
	TOT TOWNS TO PLAY THE PARTY OF	· · · · · · · · · · · · · · · · · · ·	The state of the s
			2, 25 3
·	•		100 2 1 2021
	941 Employer's Quarterly	/ Federal Tax Return - Quarterly period(s)	App 2 1 2021
		77	
			App 2 1 2021 Lemphis, Tennessen COIC MINISC
	940 Employer's Annual F	77	
	940 Employer's Annual F Other Federal Tax(es) [s	rederal Unemployment (FUTA) Tax Return - Year(s)	

Warning: The IRS will not compromise any amounts of restitution assessed by the IRS. Any liability arising from restitution is excluded from this offer. Also, the IRS will not compromise any liability for which an election under IRC § 965(i) is made; such liabilities are excluded from this offer. Any offer containing a liability for which payment is being deferred under IRC § 965(h)(1) can only be processed for investigation if an acceleration of payment under section 965(h)(3) and the regulations thereunder has occurred and no portion of the liability to be compromised resulted from entering into a transfer agreement under section 965(h)(3).

Do you qualify for Low-Income Certification? You qualify if your adjusted gross income, as determined by your most recently filed individual income from 1040) or your household's gross monthly income from Form 433-A(OIC) x 12, is equal to or less than the amount shown in the chart hased on your family size and where you live. If you qualify, you are not required to abuntly any payments of the application fee upon submission, and the consideration of your offer. If your business is other than a sole proprietor or disregated shigh emember LLC taxed es a patient proprietor ourse employment taxes on or after January 1, 2009, you cannot qualify for Low-Income Certification. The RR will verify whether you qualify for her lable below. I qualify for the low-income certification because my adjusted gross income for my household's size is equal to or less than the amount show the table below. I qualify for the low-income certification because my household's size and gross monthly income x 12 is equal to or less than the income short the table below. I qualify the low-income certification because my household's size and gross monthly income x 12 is equal to or less than the income short the table below. Note: By checking one of the boxes you are certifying that your adjusted gross income or your household's gross monthly income x 12 is equal to or less than the income short the table below. If you QUALIFY FOR THE LOW-INCOME CERTIFICATION DO NOT INCLIDE ANY PAYMENTS WITH YOUR OFFER, However, if you elect send in money and the Low-Income Certification box is checked, you wittST check ONE of the options listed below. If you QUALIFY FOR THE LOW-INCOME CERTIFICATION DO NOT INCLIDE ANY PAYMENTS WITH YOUR OFFER, However, if you elect send in money and the Low-Income Certification box is checked, you wittST check ONE of the options listed below. If you possible to my tax identify (ritial here				
Low-Income Certification (Individuals and Sole Proprietors Only) Do you qualify for Low-Income Certification? You qualify if your adjusted gross income, as determined by your most recently filed Individual Income their (from 1640) or your household's gross monthly income from Form 433-40(15) x 12, is equal to or least that the amount shown in the chart based on your family size and where you live. If you qualify, you are not required to submit any payments or the application fee upon submission during the consideration of your offer. If your brainbess is other than a sole proprietor or disregarded single member Live das as sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a sole proprietor or disregarded single member Live das as a deposit to expend the control or live live live in the live live live live live live live liv		me		Page 2
return (Form 1040) or your household's gross monthly income form in 43-4-401-4, it, is separate or the application fee you numbers of the application fee your outsites is other than a sole proprietor or disregarded single member to Laws das as obe proprietor or disregarded single member to a deep proprietor or disregarded single member to the low-income certification because my adjusted gross income for my household's size is equal to or less than the amount show the table below. I qualify for the low-income certification because my household's size and gross monthly income x 12 size of your family qualify you for the Low-income Certification. If YOU QUALIFY FOR THE LOW-INCOME CERTIFICATION DO NOT INCLUDE ANY PAYMENTS WITH YOUR OFFER. However, if you elect send in money and the Low-income Certification box is checked, you MUST check ONE of the options listed below. If payment - By checking this box I am requesting all money to be treated as a deposit. If my offer is not accepted I request my deposit be applied to my tax debt. Deposit - By checking this box I am requesting all money to be treated as a deposit. If my offer is not accepted I request my deposit be applied to my tax debt. Please note that failure to check either box or checking both boxes above will result in all payments being applied to your tax debt and returned to you. Do not complete deposit section on		ow-income Certification (Individuals and So	le Proprietors Only)	
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Note: By checking one of the boxes you are certifying that your adjusted gross income or your household's gross monthly income x 12 size of your family qualify you for the Low-Income Certification. IF YOU QUALIFY FOR THE LOW-Income Certification box is checked, you MUST check ONE of the options listed below. IF YOU QUALIFY FOR THE LOW-Income Certification box is checked, you MUST check ONE of the options listed below. IF YOU QUALIFY FOR THE LOW-Income Certification box is checked, you MUST check ONE of the options listed below. IF YOU QUALIFY FOR THE LOW-Income Certification box is checked, you MUST check ONE of the options listed below. IF YOU QUALIFY FOR THE LOW-Income Certification box is checked, you MUST check ONE of the options listed below. IF YOU QUALIFY FOR THE LOW-Income Certification box is checked, you MUST check ONE of the options listed below. IF YOU QUALIFY FOR THE LOW-Income Certification box is checked, you MUST check ONE of the options listed below. IF YOU QUALIFY FOR THE LOW-Income Certification box is checked, you MUST check ONE of the options listed below. IF YOU QUALIFY FOR THE LOW-Income Certification box is checked, you MUST check ONE of the options listed below. IF YOU QUALIFY FOR THE LOW-Income Certification box is checked, you MUST check ONE of the options listed below. IF YOU QUALIFY FOR THE LOW-Income Certification box is checked, you must complete the deposit section on the deposit section on page 4 for the deposit section have checked the deposit section here. Size of family unit 48 contiguous states, D.C., and U.S. Territories Hawaii Alaska Alaska 1	the table below.			
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Employer Identification Number Name and little of primary contact Telephone number		ity, state, ZIP code)		
Employer identification radings. Harne and title of printers contest	Business mailing address (street, cit	y, state, ZIP code)		
(Chy)	Employer Identification Number (EIN)	Name and title of primary contact		Telephone number

Business Tax Periods (If Your Offer Is for Business Tax Debt Only)

1120 Income Tax-Year(s)

941 Employer's Quarterly Federal Tax Return - Quarterly period(s)

940 Employer's Annual Federal Unemployment (FUTA) Tax Return - Year(s)

Other Federal Tax(es) [specify type(s) and period(s)]

Note: If you need more space, use attachment and title it "Attachment to Form 656 dated ______." Make sure to sign and date the attachment.

	Newsome NA		i,				.
Se	ction 3 == Doubt as to Collectibility - I do not have en	ough i	Reason for Off				Page (
X	Exceptional Circumstances (Effective Tarbut due to my exceptional circumstances, reundermine public confidence that the tax lavexplaining my circumstances.	c Admi quiring	inistration) - I owe this amo	unt and have e	nough in a	collection of the full liability would	
	Explanation of Circumstances (Add additional such as serious illness, where paying the full if this is the case and you can provide documapplicable, describe your special circumstants.)	l amou nentati	int or the minimum offer amo	ount might impa nen vour offer n	air your ab	ility to provide for yourself and you cepted despite your financial profile	r family
Re	guiring full payment o						
	onomic hardship and I						
	cept this offer and al					1 SC Y Not have the dear of the day of have have	

	ition 4 Check one of the payment options	halay	Payment T	eminemanistration.	u to nav	your offer in full. You must	
V			w to indicate now long. The offer amount shou				W
Lun	p Sum Cash		, , , , , , , , , , , , , , , , , , , ,		THE THE PERSON NAMED IN TH	00-48-4000440404040404040404040404044444444	······································
X	Check here if you will pay your offer in 5	or few	er payments within 5 or fe	wer months fro	om the da	ite of acceptance:	
	Enclose a check for 20% of the offer amount future payment(s).	t (waive	ed if you met the requiremen	nts for Low-Inco	me Certif	ication) and fill in the amount(s) of	your
	Total offer amount	T -	20% Initial pa	yment	=	Remaining balance	·
	\$ 1,000	 -	\$	·	=	\$ 1,000	
	You may pay the remaining balance in o	ne pay	ment after acceptance of	the offer or up	to five pa	ayments, but cannot exceed 5	
	Amount of payment \$		payable within	1	Máni	nth after acceptance	
	Amount of payment \$		payable within			aths after acceptance	
	Amount of payment \$		payable within	3		ths after acceptance	
	Amount of payment \$		payable within	4		iths after acceptance	·
		200	payable within	5		oths after acceptance	
	Attiount of payment \$ 1,	000	payable within		14101	inis and acceptance	
Davi	odic Payment						
ren	•						
	Check here if you will pay your offer in fu	ll in 6 t	to 24 months				
Ente	r the amount of your offer \$						
	Note: The total months may not exceed a therefore, the remainder of the payments					ent is considered to be month 1;	
	Enclose a check for the first month's payme		•			,	
	The first monthly payment of \$		is included with this offer	then \$		will be sent in on the	· · · · · · · · · · · · · · · · · · ·
	The first monthly payment of \$day of each month thereafter for	mont	ths with a final payment of \$		t	o be paid on the day of	the
	month.			•			
	You must continue to make these month income Certification), Failure to make regulareturned with no appeal rights.	y payn ar mon	nents while the IRS is con thly payments until you h	sidering the of ave received a	fer <i>(waive</i> final dec	d if you met the requirements for Lo ision letter will cause your offer	w- to be
IR	S Use Only						
	Attached is an addendum dated (insert	date)		setting forth th	ne amende	ed offer amount and payment term	S.
	Authorized to all management agreed fillipolit			22.000			

NA Newsome		Page 4
	, Electronic Federal Tax Pa	ayment System (EFTPS), and Deposit
Designation of Payment		
	ific tax year and a specific tax debt,	such as a Trust Fund Recovery Penalty, please tell us the tax
year/quarter If you do not demonstrate want to designate any payments not included with However, you cannot designate the application for	th this offer, you must designate a p	any money you send to the government's best interest. If you preference for each payment at the time the payment is made, cepts the offer.
Note: Payments submitted with your offer car	anot be designated as estimated	tax payments for a current or past tax year.
Electronic Federal Tax Payment System (EFT	PS)	
List offer payments made through the Electronic	Federal Tax Payment System (EFT	(PS) below.
Include the 15 digit Electronic Funds Transfer (E	FT) Number with each payment.	
Offer application fee	Date	EFT number
Offer payment	Date	EFT number
Note: Any Offer Application Fee or initial payr	nent made via EFTPS must be m	ade the same date your offer is mailed.
Deposit		
Do not complete if you have checked the Low	, Incomo Cartification in Sacti	ion 1
	with your offer to cover the initial	payment and application fee as "deposits." Doing so will
If you are paying more than the initial payment vand insert the amount.	vith your offer and you want any par	rt of that payment treated as a deposit, check the box below
		for my first month's payment. I am requesting the
additional amount of \$ be he		to be a superior of the same of with your dance.
If your offer is rejected, returned, or withdrawn pl Return it to you (Initial here)	lease check one of the boxes below Apply it to your tax deb	and let us know what you would like us to do with your deposit. t (Initial here)
Your deposit will be returned to you, unless you i	indicated in the above check box th	at you want it applied to your tax debt.
		irements, and Tax Payment Requirements
Source of Funds	Tour raymont, rang roge	
Tell us where you will obtain the funds to pay you	r offer	
Friends and family		_
rriends and ramily		

Making Your Payment Include separate checks for the payment and a	application fee	
Make checks payable to the "United States Treas	sury" and attach to the front of your lication fee with each offer; do not c ments through the Electronic Feder	Form 656, Offer in Compromise. All payments must be in U.S. combine it with any other tax payments, as this may delay all Tax Payment System (EFTPS). Your offer will be returned to is returned for insufficient funds.
Filing Requirements		
		ax return filed within 12 weeks of this offer submission
I was not required to file a tax return for the	following years	
Note: Do not include original tax returns with IRS processing office before sending in your	your offer. You must either electr offer.	ronically file your tax return or mail it to the appropriate
Tax Payment Requirements (check all that appl		
I have made all required estimated tax payr		
I am not required to make any estimated ta		
I have made all required federal tax deposit	s for the current quarter	
I am not required to make any federal tax d	eposits for the current quarter	

Section 7

Offer Terms

By submitting this offer, I have read, understand and agree to the following terms and conditions:

Terms, Conditions, and Legal Agreement

- a) I request that the IRS accept the offer amount listed in this offer application as payment of my outstanding tax debt (including interest, penalties, and any additional amounts required by law) as of the date listed on this form. I authorize the IRS to amend Section 1 or Section 2 if I failed to list any of my assessed tax debt or tax debt assessed before acceptance of my offer. By submitting a joint offer, both signers grant approval to the Internal Revenue Service to disclose the existence of any separate liabilities owed.
- b) I also authorize the IRS to amend Section 1 or Section 2 by removing any tax years on which there is currently no outstanding liability. I understand that my offer will be accepted, by law, unless IRS notifies me otherwise, in writing, within 24 months of the date my offer was received by IRS. I also understand that if any tax debt that is included in the offer is in dispute in any judicial proceeding that tax debt will not be included in determining the expiration of the 24-month period.

IRS will keep my payments, fees, and some refunds.

- c) I voluntarily submit the payments made on this offer and understand that they will not be returned even if I withdraw the offer or the IRS rejects or returns the offer except as otherwise provided in subpart (h) of this section (regarding "deposit" amounts). Unless I designate how to apply each required payment in Section 5, the IRS will apply my payment in the best interest of the government, choosing which tax years and tax debts to pay off. The IRS will also keep my application fee unless the offer is not accepted for processing.
- d) I understand that if I checked the Low-Income Certification in Section 1, then no payments are required. If I qualify for the Low-Income Certification and voluntarily submit payments, all money will be applied to my tax debt and will not be returned to me unless I designate it as a deposit. In making my deposit I do not have to designate any amounts to the application fee and my first month's payment.
- e) The IRS will keep any refund, including interest, that I might be due for tax periods extending through the calendar year in which the IRS accepts my offer. I cannot designate that the refund be applied to estimated tax payments for the following year or the accepted offer amount. If I receive a refund after I submit this offer for any tax period extending through the calendar year in which the IRS accepts my offer, I will return the refund within 30 days of notification. The refund offset does not apply to offers accepted under the provisions of Effective Tax Administration public policy/equity or Doubt as to Collectibility with special circumstances based on public policy/equity considerations.
- f) I understand that the amount I am offering may not include part or all of an expected or current tax refund, money already paid, funds attached by any collection action, or anticipated benefits from a capital or net operating loss.
- g) The IRS will keep any monies it has collected prior to this offer. Under section 6331(k), the IRS may levy on my property and rights to property up to the time that the IRS official signs and acknowledges my offer as pending. The IRS may keep any proceeds arising from such a levy. No levy will be issued on individual shared responsibility payments. However, if the IRS served a continuous levy on wages, salary, or certain federal payments under sections 6331(e) or (h), then the IRS could choose to either retain or release the levy.
- h) The IRS will keep any payments that I make related to this offer. I agree that any funds submitted with this offer will be treated as a payment unless I checked the box to treat any amount more than the required initial payment as a deposit. For other than Low-Income taxpayers, only amounts that exceed the mandatory payments can be treated as a deposit. A Low-Income taxpayer who has checked the deposit box is not required to make payments with the offer. I also agree that any funds submitted with periodic payments made after the submission of this offer and prior to the acceptance, rejection, or return of this offer will be treated as payments, unless I identify the amount more than the required payment as a deposit on the check submitted with the corresponding periodic payment. A deposit will be returned if the offer is rejected, returned, or withdrawn. I understand that the IRS will not pay interest on any deposit. If the IRS attempts to return a deposit once and it comes back as undeliverable then the IRS will apply the funds to my tax liability.
- i) If my offer is accepted and my final payment is more than the agreed amount by \$50 or less, the IRS will not return the difference, but will apply the entire payment to my tax debt. If my final payment exceeds the agreed amount by more than \$50, the IRS will return the excess payment to me.

Pending status of an offer and right to appeal

- i) Once an authorized IRS official signs this form, my offer is considered pending as of that signature date and it remains pending until the IRS accepts, rejects, or returns my offer, or I withdraw my offer. An offer is also considered pending for 30 days after any rejection of my offer by the IRS, and during the time that any rejection of my offer is being considered by the Appeals Office. An offer will be considered withdrawn when the IRS receives my written notification of withdrawal by personal delivery or certified mail or when I inform the IRS of my withdrawal by other means and the IRS acknowledges in writing my intent to withdraw the offer.
- k) I waive the right to an Appeals hearing if I do not request a hearing in writing within 30 days of the date the IRS notifies me of the decision to reject the offer.

Section 7 (Continued)

Offer Terms

I must comply with my future tax obligations and understand I remain liable for the full amount of my tax debt until all terms and conditions of this offer have been met. I) I will comply with all provisions of the internal revenue laws, including requirements to timely file tax returns and timely pay taxes for the five year period beginning with the date of acceptance of this offer and ending through the fifth year, including any extensions to file and pay. I agree to promptly pay any liabilities assessed after acceptance of this offer for tax years ending prior to acceptance of this offer that were not otherwise identified in Section 1 or Section 2 of this agreement. I also understand that during the five year period I cannot request an installment agreement for unpaid taxes incurred before or after the accepted offer. If this is an offer being submitted for joint tax debt, and one of us does not comply with future obligations, only the non-compliant taxpayer will be in default of this agreement. An accepted offer will not be defaulted solely due to the assessment of an individual shared responsibility payment.

m) I agree that I will remain liable for the full amount of the tax liability, accrued penalties and interest, until I have met all of the terms and conditions of this offer. Penalties and interest will continue to accrue until all payment terms of the offer have been met. If I file for bankruptcy before the terms and conditions of the offer are met, I agree that the IRS may file a claim for the full amount of the tax liability, accrued penalties and interest, and that any claim the IRS files in the bankruptcy proceeding will be a tax claim.

n) Once the IRS accepts my offer in writing, I have no right to challenge the tax debt(s) in court or by filing a refund claim or refund suit for any liability or period listed in Section 1 or Section 2, even if the IRS defaults the offer.

I understand what will happen if I fail to meet the terms of my offer (e.g., default). o) If I fail to meet any of the terms of this offer, the IRS may revoke the certificate of release of federal tax lien and file a new notice of federal tax lien; levy or sue me to collect any amount ranging from one or more missed payments to the original amount of the tax debt (less payments made) plus penalties and interest that have accrued from the time the underlying tax liability arose. The IRS will continue to add interest, as required by section 6601 of the Internal Revenue Code, on the amount the IRS determines is due after default. Shared responsibility payments are excluded from levy.

I agree to waive time limits provided by law.

p) To have my offer considered, I agree to the extension of the time limit provided by law to assess my tax debt (statutory period of assessment). I agree that the date by which the IRS must assess my tax debt will now be the date by which my debt must currently be assessed plus the period of time my offer is pending plus one additional year if the IRS rejects, returns, or terminates my offer or I withdraw it. (Paragraph (j) of this section defines pending and withdrawal.) I understand that I have the right not to waive the statutory period of assessment or to limit the waiver to a certain length or certain periods or issues. I understand, however, that the IRS may not consider my offer if I refuse to waive the statutory period of assessment or if I provide only a limited waiver. I also understand that the statutory period for collecting my tax debt will be suspended during the time my offer is pending with the IRS, for 30 days after any rejection of my offer by the IRS, and during the time that any rejection of my offer is being considered by the Appeals Office.

I understand the IRS may file a Notice of Federal Tax Lien on my property. q) The IRS may file a Notice of Federal Tax Lien during consideration of the offer or for offers that will be paid over time. If the offer is accepted, the tax lien(s) for the periods and taxes listed in Section 1 will be released within 35 days after the payment has been received and verified. The time it takes to transfer funds to the IRS from commercial institutions varies based on the form of payment. If I have not finished paying my offer amount, then the IRS may be entitled to any proceeds from the sale of my property. The IRS will not file a Notice of Federal Tax Lien on any individual shared responsibility debt.

Correction Agreement

r) I authorize the IRS, to correct any typographic≘i or clerical errors or make minor modifications to my Form 656 that I signed in connection to this offer.

I authorize the IRS to contact relevant third parties in order to process my offer. s) By authorizing the IRS to contact third parties, I understand that I will not be notified of which third parties the IRS contacts as part of the offer application process, including tax periods that have not been assessed, as stated in §7602 (c) of the Internal Revenue Code. In addition, I authorize the IRS to request a consumer report on me from a credit bureau.

I am submitting an offer as an individual for a joint liability.

t) I understand if the liability sought to be compromised is the joint and individual liability of myself and my coobligor(s) and I am submitting this offer to compromise my individual liability only, then if this offer is accepted, it does not release or discharge my co-obligor(s) from liability. The United States still reserves all rights of collection against the co-obligor(s).

I understand the IRS Shared Responsibility Payment (SRP),

u) If your offer includes any shared responsibility payment (SRP) amount that you owe for not having minimum essential health coverage for you and, if applicable, your dependents per Internal Revenue Code Section 5000A - Individual shared responsibility payment, it is not subject to penalties (except applicable bad check penalty) or to lien and levy enforcement actions. However, interest will continue to accrue until you pay the total SRP balance due. We may apply your federal tax refunds to the SRP amount that you owe until it is paid in full.

I understand the IRS is required to make certain information public. v) The IRS is required to make certain information, such as taxpayer name, city/state/zip, liability amount, and offer terms, available for public inspection and review for one year after the date of offer acceptance.

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Signatures

Under penalties of perjury, I declare that I have o	examined this offer, including	accompanying schedules	and statements, an	d to the best of my
knowledge and belief, it is true, correct and con	plete.			

Signature of Taxpayer/Corporation Name	Phone number	Today's date (mm/dd/yyyy)
		04/16/2021
by checking this box you are authorizing the IRS to contact yo	and the telephone property listed above	and lanua detailed manages according
this offer on your voice mail or answering machine.	on at the telephone number listed above	and leave detailed thessages concerning

By checking this box you are authorizing the IRS to contact you at the telephone number listed above and leave detailed messages concerning this offer on your voice mail or answering machine.

Section 9

Paid Preparer Use Only

Signature of Preparer

Phone number

(855) 834-8200

Today's date (mm/dd/yyyy)

(855) 834-8200

By checking this box you are author/zing the IRS to contact you at the telephone number listed above and leave detailed messages concerning this offer on your voice mail or answering machine.

Name of Paid Preparer

Preparer's CAF no. or PTIN

Michelle R. Morris/Lifeback Tax

P01780233

Firm's name (or yours if self-employed), address, and ZIP code

Lifeback Tax 21004 Nordhoff St. Unit B Chatsworth, CA 91311

If you would like to have someone represent you during the offer investigation, attach a valid, signed <u>Form 2848</u> with this application or a copy of a previously filed form. Form 2848 allows for representation and receipt of confidential information. You should also include the current tax year on the form, in the list of applicable years or periods.

Form 8821 allows a third party to receive confidential information but they cannot represent you before the IRS in a Collection matter. If you would like a third party to receive confidential information on your behalf attach a copy if previously filed and include the current tax year on the form.

IRS Use Only. I accept the waiver of the statutory period of limitations on assessment for the Internal Revenue Service, as described in Section 7(p)

Signature of Authorized Internal Revenue Service Official

PC

Title

Date (mm/dd/yyyy)

5/11/2021

Privacy Act Statement

We ask for the information on this form to carry out the internal revenue laws of the United States. Our authority to request this information is section § 7801 of the Internal Revenue Code.

Our purpose for requesting the information is to determine if it is in the best interests of the IRS to accept an offer. You are not required to make an offer; however, if you choose to do so, you must provide all of the taxpayer information requested. Failure to provide all of the information may prevent us from processing your request.

If you are a paid preparer and you prepared the Form 656 for the taxpayer submitting an offer, we request that you complete and sign Section 9 on Form 656, and provide identifying information. Providing this information is voluntary. This information will be used to administer and enforce the internal revenue laws of the United States and may be used to regulate practice before the Internal Revenue Service for those persons subject to Treasury Department Circular No. 230, Regulations Governing the Practice of Attorneys, Certified Public Accountants, Enrolled Agents, Enrolled Actuaries, and Appraisers before the Internal Revenue Service. Information on this form may be disclosed to the Department of Justice for civil and criminal litigation. We may also disclose this information to cities, states and the District of Columbia for use in administering their tax laws and to combat terrorism. Providing false or fraudulent information on this form may subject you to criminal prosecution and penalties.