

Department of the Treasury

Date of this Letter: 9/22/22

Internal Revenue Service  
Centralized OIC  
PO Box 9011 Stop 682  
Holtsville, NY 11742

Person to Contact:  
Christopher Peters  
Employee #: [REDACTED]  
Phone#: (844) 805-4980 EXT.  
08:00am-08:00pm Mon-Fri

Taxpayer ID#: [REDACTED]  
Offer Number: [REDACTED]

MARILYN [REDACTED]  
[REDACTED]  
[REDACTED]

Dear Ms. [REDACTED]

We have accepted the offer in compromise you signed and dated on 05/27/2021, as modified by an addendum dated 07/22/2022. The acceptance date is the date of this letter and our acceptance is subject to the terms and conditions on the enclosed Form 656, Offer in Compromise.

We accepted your offer based on effective tax administration or doubt as to collectibility with special circumstances. If you paid the application fee when you submitted your offer we will apply it toward the amount of the offer. If you prefer that we refund the application fee instead, you must notify us in writing at the address below within 30 days from the date of this letter. If we refund your fee, you will owe the full amount of the offer we accepted.

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.

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

Form **14640**  
(December 2020)

Department of the Treasury-Internal Revenue Service  
**Addendum to Form 656**

**Part 1.**

The purpose of this addendum is to amend the below offer amount I/we are offering to pay and/or to specify the payment terms if the offer is accepted.

Taxpayer name Marilyn [REDACTED]	Offer number 1001670030
Primary Taxpayer SSN/EIN (last 4 digits) [REDACTED]	Secondary Taxpayer SSN/EIN (last 4 digits)

I/we submitted an offer dated 05/27/2021 in the amount of \$ 100.00  
for the type of tax 1040 for the following tax periods 2007, 2008, 2009, 2010 & 2012

I understand that I retain the right to pay the offer amount sooner than the terms listed below.

**Part 2. Revised Offer in Compromise Payment—Lump Sum Cash Offer Terms**

Lump sum cash offer of \$ 1.00 with \$ 0.00 paid with the offer and \$ 0.00 paid with any amended Form 656 and/or this addendum. The remaining balance of \$ 1.00 to be paid as follows:

- A. \$ 1.00 payable within 1 month after acceptance.
- B. \$ 0.00 payable within 2 months after acceptance.
- C. \$ 0.00 payable within 3 months after acceptance.
- D. \$ 0.00 payable within 4 months after acceptance.
- E. \$ 0.00 payable within 6 months after acceptance.

**Part 3. Revised Offer in Compromise Payment—Periodic Payment Offer Terms**

Periodic payment offer of \$ \_\_\_\_\_ to be paid within \_\_\_\_\_ months with \$ \_\_\_\_\_ paid with the offer. The amount paid with any amended Form 656 and/or this addendum is \_\_\_\_\_ The amount already paid in periodic payments is \$ \_\_\_\_\_. The remaining balance of \$ \_\_\_\_\_ to be paid as follows:  
\$ \_\_\_\_\_ will be sent beginning on the \_\_\_\_\_ day of the month \_\_\_\_\_ (Jan-Dec) \_\_\_\_\_ (Year) and then  
\$ \_\_\_\_\_ will be sent on the \_\_\_\_\_ of each month for \_\_\_\_\_ months with a final payment of \$ \_\_\_\_\_  
to be paid on the \_\_\_\_\_ day of the \_\_\_\_\_ month.

**Part 4. Reason for the Offer**

- Doubt as to Collectibility  
IRS has determined that I have insufficient assets and income to pay the full amount.
- Exceptional Circumstance (Effective Tax Administration)  
IRS has determined that I owe this amount and have sufficient assets to pay the full amount, but due to my exceptional circumstances, requiring full payment would cause an economic hardship or would be unfair and inequitable.

Date <u>07-22-2022</u>	Signature of Taxpayer/Authorized Corporate Officer <u>Marilyn [REDACTED]</u>
Date	Signature of Taxpayer/Authorized Corporate Officer