

PO Box 9002 Holtsville, NY 11742-9002

Date:

October 20, 2014

Taxpayer identification number:

Form:

Form 1040

Tax period(s) ended:

December 31, 2012

Person to contact:

Contact telephone number:

1-866-897-0

Contact hours:

8:00am-3:30pm EST

Contact fax number:

1-855-234-2

Proposed Tax Adjustment

Why you are receiving this letter

We have not received a response to Letter 5044 sent to you on August 25, 2014. Without a response from you, we can't verify the gross receipts reported on your tax return. As a result, we are proposing changes to your tax return as listed in the Explanation of Adjustment at the end of this letter.

What you need to do

- 1. Review the proposed changes to your tax return and determine if you agree or disagree.
 - a. If you agree, check box A on the enclosed Form 14431, Response to Proposed Adjustment(s), and sign the form.
 - b. If you do not agree, check box B on the enclosed Form 14431 and sign the form. Additionally,
 - Please provide a written response explaining what you do not agree to, or
 - · You can file an amended tax return and enclose a written explanation of the changes made, or
 - You can submit an appeal to the proposed assessment. The enclosed Publication 3498-A, The
 Examination Process (Examinations by Mail), provides information if you want to appeal our decision.
 - c. Always include a completed Form 14431 with your written response to us. Attach any signed statement and copies of documents behind that form.
- 2. Provide your response within 30 days from the date of this letter. If you need more time, call the phone number listed above to request an extension of time.
- 3. Review your rights in the enclosed Publication 3498-A.