**ATTENTION: TO ENSURE YOUR FREEDOM OF INFORMATION ACT (FOIA) REQUEST CAN BE PROCESSED TIMELY PLEASE FULLY REVIEW AND EDIT THIS TEMPLATE AS NECESSARY PRIOR TO SUBMITTING**

FOIA requests, other than those qualifying for expedited processing, are worked on a first-in, first-out basis.

For more information on IRS FOIA Process please visit their website at [Freedom of Information Act (FOIA) Guidelines | Internal Revenue Service (irs.gov)](https://www.irs.gov/privacy-disclosure/freedom-of-information-act-foia-guidelines)

FOIA requests can be submitted online by visiting <https://foiapublicaccessportal.for.irs.gov/>

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June 19, 2023

FOIA Requester Service Center

Internal Revenue Service

Central Processing Unit Stop 211

P.O. Box 621506

Atlanta, GA 30362-3006

[Professional’s Name]

[Address]

[City, State, & Zip]

Phone:

Fax:

Taxpayer Name:

Taxpayer SSN:

Tax Period(s) & Type(s) Covered by Request:

Dear Disclosure Manager:

This is a request under the Freedom of Information Act/Privacy Act.

I am requesting a copy of the 4180 file, aka a file compiled by a Revenue Officer (RO) for purposes of determining assessment of the Trust Fund Recovery Penalty (TFRP), for the above listed taxpayer. I am seeking all documents related to decision to find my client liable; including, but not limited, to the following documents:

* Completed Form 4180 – Report of Interview with Individual Relative to Trust Fund Recovery Penalty or Personal Liability for Excise Taxes
* Completed & Signed Form 4183 - Recommendation Re: Trust Fund Recovery Penalty Assessment
* Signed Payroll Tax Returns (form 941, 944, or 943s) covering the periods for which my client was held responsible for the TFRP [list periods]
* All bank signature cards and cancelled checks received by the RO, whether voluntarily from the taxpayer or via summons, covering the periods for which my client was held responsible for the TFRP [list periods]

I do not wish to inspect the documents first. In order to determine my status for the applicability of fees, you should know that I am an “other” requester seeking information for personal or non-commercial use.

A copy of my properly completed 2848, which has been submitted to the Centralized Authorization File (CAF) unit, has been enclosed demonstrating my authority to access to the requested information.

As proof of identity, I am including [pick one]

€ Copy of my Driver’s License, Passport, or other Government Issued Picture ID

€ Notarized statement swearing to or affirming my identity

€ A sworn statement as to my identity, under penalty of perjury.  The sworn statement must meet the requirements of 28 USC section 1746

I am willing to pay fees for this request up to a maximum of $XX. If you estimate that the fees will exceed this limit, please inform me first.

Thank you for your consideration of this request.

Sincerely,

[Ink Signature]

[Print Name]