

Freedom of Information Act (FOIA) Template
Audit File Request

**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**

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Freedom of Information Act (FOIA) Template
Audit File Request

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) Covered by Request:

Dear Disclosure Manager:

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

I am requesting all documents relating to the IRS determination that additional tax should be assessed to the above taxpayer, my client. Specifically, tax in the amount of [\$XX.XX] on [date] assessed to [tax type & year]. I am seeking all documents related to decision to find my client liable; including, but not limited to, the following documents:

- All Form(s) 4564 -Information Document Request (IDR) – issued to the taxpayer or taxpayer's representative
- All documents received by the IRS in response to a Form 4564, whether provided by the taxpayer or taxpayer's representative.
- All Form(s) 4549 – Income Tax Examination Changes – issued to the taxpayer or taxpayer's representative.
- All Form(s) 886-A – Explanation of Items – issued to the taxpayer or taxpayer's representative.
- All other letters or correspondence issued by IRS personnel related to this audit/examination.
- All Notice(s) of Deficiency

Freedom of Information Act (FOIA) Template
Audit File Request

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]

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Freedom of Information Act (FOIA) Template
CAF Client Listing (CAF77)

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:

Dear Disclosure Manager:

This is a request under the Freedom of Information Act. I request that a copy of the CAF Representative/Client Listing be provided to me. 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 non-commercial or personal use. I am a tax professional and my CAF number is XXXXXXXX.

I am including a valid photo identification which includes my signature as proof of identity.

[Option 1] Send listing as a paper document. I am willing to pay copying fees for this request up to a maximum of \$XX (fill in amount). If you estimate that the fees will exceed this limit, please contact me prior to completing my request. (There is no charge for the first 100 pages and \$.20 per page thereafter).

[Option 2] Send listing on CD as a text file using Windows NotePad.

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]

Freedom of Information Act (FOIA) Request Template
General Use

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Freedom of Information Act (FOIA) Request Template
General Use

Taxpayer Name:

Taxpayer SSN:

Tax Period(s) Covered by Request:

Dear Disclosure Manager:

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

I request that a copy of the document(s) listed below be provided for the purpose of [insert purpose or goal if you feel it will assist in fulfillment of the request].

- Document #1
- Document #2
- Document #3

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]

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Freedom of Information Act (FOIA) Request Template
Proof of Manager Approval of Accuracy Penalty Request

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) Covered by Request:

Dear Disclosure Manager:

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

I am seeking proof that the accuracy penalties assessed against the above named taxpayer, my client, on [date] in the amount of [\$XX.XX] were approved in writing by a supervisor as required by IRC § 6751(b)(1).

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.

Freedom of Information Act (FOIA) Request Template
Proof of Manager Approval of Accuracy Penalty Request

Sincerely,

[Ink Signature]

[Print Name]

Freedom of Information Act (FOIA) Request Template
Proof of Statute Waiver Request

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Freedom of Information Act (FOIA) Request Template
Proof of Statute Waiver Request

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) Covered by Request:

Dear Disclosure Manager:

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

I am requesting the following for the above named taxpayer(s) and tax period(s) as it relates to consent to extend IRS statutory deadlines. [pick one]

- Copy of Form 872 – Consent to Extend the Time to Assess – signed by the taxpayer and input by the IRS on [date] as indicated by the enclosed account transcript
- Copy of Form 900 – Tax Collection Waiver – signed by the taxpayer and input by the IRS on [date] as indicated by the enclosed account transcript

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

Freedom of Information Act (FOIA) Request Template
Proof of Statute Waiver Request

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]

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Freedom of Information Act (FOIA) Request Template
SFR/Archived Income File Request

Monday, 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) Covered by Request:

Dear Disclosure Manager:

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

I am requesting documentation of all income reported to the IRS for the above named taxpayer(s) and tax period(s), specifically that used as the basis for a tax debt assessment. I have attempted to obtain via regular administrative channels prior to making this FOIA request. This can include, but is not limited, to the following:

- Form 4549 – Income Tax Examination Changes – related to the assessment of a Substitute For return (SFR) under IRC § 6020(B).
- Wage & Income Transcript generated by the Transcript Delivery System (TDS)

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

Freedom of Information Act (FOIA) Request Template
SFR/Archived Income File Request

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]

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Freedom of Information Act (FOIA) Request Template
TFRP File Request

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.

Freedom of Information Act (FOIA) Request Template
TFRP File Request

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]

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Freedom of Information Act (FOIA) Request Template
TXMODA Request

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) 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 TXMODA (internal) transcript for the taxpayer(s) and tax period(s) listed above. I am a tax representative authorized to receive a copy of this transcript as laid out in IRM 21.3.10.4.4 (5) & (7). I have attempted to obtain this information via regular channels but have been unable to do so.

I requested this information from the following employee(s) on the following date(s):

- Ms./Mr. [Name], Badge # XXXXXXXXXXX on [date]
- Ms./Mr. [Name], Badge # XXXXXXXXXXX on [date]
- Ms./Mr. [Name], Badge # XXXXXXXXXXX on [date]

If you are unable to provide the requested information, then please forward my request to the manager(s) in question along with my intention to file a TIGTA complaint if the issue, violating my right to access this information, remains unresolved.

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.

Freedom of Information Act (FOIA) Request Template
TXMODA Request

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]