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|Transmittal Number | Date of Issue
Department
of the
                             11-03 03/07/2011
Treasury
                              ______
                             |Originating Office|Form Number
                             SE:S:CCS:CRC:EP 3340C
           IDRS
           CORRESPONDEX
Internal
Revenue
Service
Title: Audit Reconsideration Denial
Number of Copies
                   Distribution to: Former Letter
         1 to TP
                                           3340C (Rev. 10-02)
Original
OMB Clearance Number | Expires
                                         | IMF
Letters Considered in evi ion:
       Taxpayer Identification Tumber: [01 12T]
                         K. d f Tax: [02 25V]
        Original Audit A sess ent/IC: $[03 12$] [04 12$]
[05 12$] [06 12$]
Tax ear(s) [07 13P] [08 13P]
[09 13P]
    Dear [-30V]
    We completed your audit reconsiders ion for the year(s) shown above.
    We reviewed your case file and the information that you sent with your
    reconsideration.
 A We did not allow all of the items requested equise
 В
    We are not changing your original audit asses ment amount of
    $[11 16$] because:
 В
 В
 C
       The employer reimbursement policy was not submitted.
 C
 D
       Residency requirement for the Earned Income Tax Credit (EITC) -
       Verification is needed to show the qualifying child lived with you
 D
       for more than half the tax year.
 D
 D
 Ε
       Relationship requirement for the Earned Income Tax Credit (EITC) -
       Verification is needed to show the person who qualifies you for the
 Ε
       EITC is your son, daughter, stepson, stepdaughter, foster child, or
 Ε
 Ε
       descendent of any of them (for example, grandchildren), or brother,
       sister, or descendent of any of them (for example, niece or
 Ε
 Ε
       nephew).
 Ε
    The amended return submitted did not include documentation and/or
 F
    schedules to support the disputed changes the IRS made to your return.
 F
    [12 385V]
 F
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F [13 385V]
F
G [14 385V]
G
H [15 385V]
H
I [16 385V]
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If you agree with our determination and have an outstanding balance that you are unable to pay, you may request an installment agreement. Refer to Publication 594, "The IRS Collection Process."

If you disagree with our determination, you may request an Appeals conference by filing a small case request or a formal written protest (depending upon the amount you owe), within 30 days from the date of this letter. Please see the enclosed Publication 5, "Your Appeal Rights and How to Prepare a Protest If You Don't Agree." The section entitled "Protests" provides the procedures for requesting an Appeals conference.

If you do not wish to have an Appeals conference, but wish to dispute our decision, you mus pay the full amount due and file a claim with the IRS. You must like your claim within three years from the date you filed your return, or to wears from the date you paid the taxes, whichever is later.

If you do not wish to pay or file a claim, and you have new information that we have not considered previously, you may submit that information for consideration. We must receive the information within 30 days from the date of this letter for it to be considered. If you decide not to take any action we will resume collection activity.

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J The amount you owe for tax period [ / 13P] is [18 15$].

J This amount includes penalties ar interput figured to [19 13D].

J Interest and penalties will continue to accord until you pay the J entire amount you owe.
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If you have questions please contact [20 300 at [21 24V] between the hours of [22 10V] to [23 14V].

Thank you for your cooperation.

Sincerely yours,

[24 35S] [25 35S]

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Enclosure(s):
   Publication 5
K Form 4549, Income Tax Examination Changes
[26 25V]
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NOTE:	You must use either Sel. A or B. Use Sel. C, D, E or F as needed depending upon the situation.
 NOTE:	Use Sel. G, H or I only if addressing additional issues
 NOTE:	In fill-in 23, include appropriate time zone

Letter 3340C (Rev. 11-2010)

