

Internal Revenue Service

Department of the Treasury

Employer Identification Number:

Form Number:

Name of Plan:

Plan Number:

Plan Year(s) Ended:

Person to Contact/ID Number:

Contact Telephone Number:

Date:

Dear Sir or Madam:

Thank you for the information submitted on _____ concerning your return(s) for the year(s) shown above. Unfortunately, it is not sufficient.

Please send the information requested in the enclosed attachment within 15 days from the date of this letter to enable us to complete the examination. If you do not reply, we will close this case based on the information currently in our file. This could lead to disqualification of the tax-exempt status of the plan.

If you have any questions, please contact the person whose name and telephone number are shown above.

Thank you for your cooperation.

Sincerely,

Enclosure:
List of Additional Items Requested