

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

[IRS Office Address]
[City, State, Zip Code]

Subject: Appeal of IRS Determination - [Your Tax Identification Number / SSN]

Dear [IRS Appeals Officer's Name or "To Whom It May Concern"],

1. ****Introduction****

- State the purpose of the letter.
- Provide a brief summary of the matter being appealed.

2. ****Reason for Appeal****

- Clearly outline the reasons for your appeal.
- Reference any relevant IRS letters or notices.

3. ****Supporting Evidence****

- Detail and attach any supporting documents that validate your position.

- Include explanations for each document provided.

4. ****Legal Basis (if applicable)****

- Mention any tax laws or regulations that support your appeal.
- Include citations or references if applicable.

5. ****Conclusion****

- Summarize your request for reconsideration.
- Express willingness to provide further information or clarification if needed.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]