

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

Internal Revenue Service

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

Subject: Appeal of Denied Claim - [Your Claim Number]

Dear Appeals Officer,

I am writing to formally appeal the denial of my claim for [specific claim, e.g., refund, credit, deduction], which was denied on [date of denial] under claim number [claim number].

The reason stated for the denial was [briefly summarize the reason given for the denial]. I would like to present additional information and clarify the circumstances surrounding my situation.

[Paragraph detailing your case; explain why you believe the denial was incorrect, provide supporting documentation, and clarify any misunderstandings.]

Enclosed, please find copies of [list any documents you are including, such as tax returns, W-2 forms, correspondence, etc.] which support my appeal.

I kindly request that you reconsider my claim in light of this additional information. 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]