						-			
Report of Inte	erview w	/ith			structions			erview Handouts . explain why not in case history.)	
Individual Relative to Trust				The interviewer <i>must</i> prepare this form either in person or via			Notice 609, Privacy Act Notice		
Fund Recovery Penalty or				telephone. Do not leave any			Notice 784, Could You be Personally		
Personal Liab			axes		n blank. Enter "Na is not applicable.	/A"		or Certain Unpaid Federal	
Type of Interview	1RC 667	2, Failure to co	llect and pay	over tax f	rom (<i>mmddyyyy</i>	")		to	
("x" one.)	TIRC 410	3, Failure to pa	y excise taxes	s from (m	mddyyyy)		to)	
Section I.		Backgro	ound Inform	ation fo	r Person Intel	rviewe	d		
1. Name			^				2. Social Se	ecurity Number (SSN)	
3. Address (Street, Cit	y, State, ZIP co	ode)					4. Home tele	ephone number	
41 40							E Work tolo	phone number	
							()	priorie number	
6. What was your job	title and how	were you asso	ciated with the	e busines	s? (Describe your	duties a	and responsibi	ilities and dates of employment.)	
7. Did you resign from	n your positio	n? No	Yes		/Did you have a ested in the bus			u were listed on the company's signature cards, did you have	
a. When?	h Is a cor	ov available?] Yes □ N		Yes No	111633 :		name removed from them?	
				-	100 140			N/A No	
c. To whom was it	submitted?							Yes When?	
10. Were financial sta	tements prep	ared for the bus	siness? 11	I. Have y	ou ever been in	volved	in another bι	usiness that had tax problems	
		them and where		☐ Ye	s If so, provide	name	of business	and dates.	
☐ No stateme	nts located?			☐ No	1				
		Backgi	round Inforr	mation f	or Business E	Entity			
Section II. (C	complete sha	aded items only	y if this is the	e first Fo	rm 4180 secure	d on th	ne business	entity.)	
1. Name of Business	and Employe	er Identification	Number (EIN))		2. Bu	siness telepl)	none number	
3. Address (Street, Cit	v State 710 co	nde)				4. Ha	s the busine	ss ever filed bankruptcy?	
3. Address Johnes, Oil	y, olato, zii oc					Пи	R Maderial State of the State o	A COLOR OF THE COL	
							es Chapt	ter:	
		8				'	Petitic		
5. Type of Entity					☐ Limited Lia	ability C	ompany (LLC	C)	
Partnership	Corpo	ration			لسسا			ax purposes?	
Outs Durantatan	Date in	ncorporated			· []	Disreg	arded Entity		
Sole Proprietor		where incorpora				Taxed	as a Partner	rship	
	Has th	e state ever rev	oked the char	ter?		Taxed	as a Corpora	ation	
s	☐ No	Yes W	/hen?		Has the l	LLC ma	ide any recei	nt election for reclassification?	
					Yes	If Ye	es, explain		
			.,		☐ No				
6. Is the business stil	operating?							old, transferred, quit-claimed,	
Yes No	When did it s	stop operating?		<u> </u>			iisposed of, f vide explanatio	or less than full value? on.)	
	ened to the a					,			
8. Which banks or fina	ancial instituti	ons did the bus	iness use for t	transactio				s, financing agreements, etc.?	
Name			Address		Types of	Transa	ctions	Dates	
			9					1	
						- Christian Control			
2 2				Charles constitutive by constitutions.					

Form **4180** (Rev. 7-2007) Catalog No. 22710P

Page 1 of 4

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Department of the Treasury - Internal Revenue Service

Section II. — continue	ed		Backç	ground Inform	nation for Bus	siness Entity					
9. Please list corporate po	ositio	ns be	elow, identifyin	ng the persons	who occupied the	em and their dates	of service.				
Position (e.g. President, Di				Name		Address		Dates			
r collion (eiginness)					9	8 0	¥				
						-					
									Out - I - I - I - I - I - I - I - I - I -		
P							A =				
10. Does the business use	the_	Elect	ronic Federal	Tax Payment		nan the EFTPS, do	es the busines	ss do any oth	ier		
System (EFTPS) to make Federal Tax Deposits (FTDs) or						banking electronically?					
payments? No				-		No Yes Where?					
To whom are the PINs	or pa	asswo	ords assigned	 ?	To who	m are the PINs/pa	ısswords assig	ned?			
*					P ₂		· ·				
Who authorized the as	signr	ment	of EFTPS PIN	ls/passwords?	Who au	uthorizes changes	to the PINs/pa	isswords?			
(If more than one, list dat	es.)										
				-							
12. Does the business file	Forn	า 941	electronically	/?							
☐ No ☐ Yes W	/ho is	auth	norized to sign	Form 941?			8				
13. Does/did the business Employer Organization	ever	use a	a Payroll Serv	vice Provider (Posits and/or file	SP) or Professio returns?	nal					
□ No □ Yes If	ves. i	denti	fy the PSP or	PEO				9			
□ 110 □ 100 m.			igned the con								
Section III.				Res	ponsibility						
						for the husiness at	nd the time ne	riods during v	which you		
Please state whether y performed these duties	ou pe	erforn ase a	ned any of the also provide th	e duties / function le names and ti	me periods that	any other person p	performed thes	se duties.	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
- periorifica triodo datroc			Dat						tes		
Did you	Yes	No	From	То	Who else	performed this d	uty?	From	То		
a. Determine financial policy for the business?					A 18						
b. Direct or authorize			2					z ¹³			
payments of bills/	Ш						- 8 -				
c. Open or close bank											
accounts for the business?						D N	a a				
d. Guarantee or co-sign								2			
loans?			,				2				
							8 8 8 F				
e. Sign or counter-sign checks?				-		. **					
3 1											
f. Authorize payroll?											
g. Authorize or make				=							
Federal Tax Deposits?						,					
h. Prepare, review, sign, transmit payroll tax returns?							·	5	-		
Totulio!											
i. Hire/Fire?											

Section II. — continu	ed		Back	ground Infor	matior	for Business Entit	У		*			
9 Please list cornorate n	ositio	ns be	elow identifyir	na the persons	who oc	cupied them and their	dates of service.					
Position (e.g. President, Di	et corporate positions below, identifying the persons who				Address	Dates						
Position (e.g. Fresident, Di	10010	+						5				
					* 2							
									2			
									Control of the second s			
10. Does the business use	e the	Elect	ronic Federal	Tax Payment	11	. Other than the EFTP		ss do any oth	ier			
System (EFTPS) to m	ake F	eder	al Tax Depos	its (FTDs) or		banking electronically?						
payments? No		Yes				No Yes	Where?					
To whom are the PINs	orn	266/4/	ords assigned	12	CF.	To whom are the PIN	Je/passwords assig	ned?				
io whom are the ring	o or pr	a33W	ords assigned			10 Whom are the Fir	vs/passwords assig	ilica:				
					1_							
Who authorized the as	ssign	ment	of EFTPS PIN	vs/passwords?		Who authorizes char	nges to the PINs/pa	sswords?				
(If more than one, list dat	ies.)											
			1 1 1 - 1 - 11-									
12. Does the business file	Forn	n 941	electronically	/ ?								
☐ No ☐ Yes V	Vho is	auth	orized to sign	Form 941?			12					
13. Does/did the business	ever	USE	a Pavroll Serv	ice Provider (F	PSP) or	Professional						
Employer Organization	n (PE	O) fo	r making dep	osits and/or file	e returns	?						
□ No □ Yes If	ves i	denti	fv the PSP or	PEO.				D =				
□ 100 H			igned the con			2						
		1110 0	19.100 1.10 00.1			L :1:4						
Section III.					sponsi	_						
Please state whether y	ou pe	erforn	ned any of the	duties / functi	ons liste	ed below for the busine	ss and the time per	iods during v	vhich you			
performed these duties	s. Ple	ase a	ilso provide th	e names and t	ime per	iods that any other per	son performed thes	e dulles.				
8			Dates		,	Who else performed this duty?		Dat	tes			
Did you	Yes	No	From	То		willo eise periorified t	ins duty :	From	То			
a. Determine financial												
policy for the business?								-				
b. Direct or authorize												
payments of bills/	ΙП						2.0					
creditors?												
c. Open or close bank												
accounts for the												
business?												
d. Guarantee or co-sign								.27				
loans?		$ \Box $		1		¥		-				
loans:												
e. Sign or counter-sign								e :				
checks?							ζ.					
onotio.						11						
f. Authorize payroll?				я			11					
	-								:			
g. Authorize or make				-			*					
Federal Tax Deposits?												
h Dronare review sign		\vdash							*			
h. Prepare, review, sign, transmit payroll tax							905					
returns?			. a	*			0.02					
i. Hire/Fire?	П			-								
	1 1	1	1				- 1	1				

Section IV. Know	ledge / Willfulness	•				
. When and how did you first become aware of the delinquent taxes?	2. What actions did you	take to see that the taxes were paid?				
 Were discussions ever held by stockholders, officers, or oth interested parties regarding nonpayment of the taxes? No Yes	4. Who handled IRS co- correspondence, or v	Who handled IRS contacts such as phone calls, correspondence, or visits by IRS personnel?				
No Yes Identify who attended, dates, any decisions reached, and whether any documentation is available.	When did these conta results of these conta	When did these contacts take place, and what were the results of these contacts?				
5. During the time the delinquent taxes were increasing, or at No Yes Which obligations were paid? Who authorized them to be paid?	any time thereafter, were any fin	ancial obligations of the business paid?				
□ No □ Yes □	No Yes (Explain in de					
 Other than those previously listed, please provide the name knowledge about or control over the company's financial af 	rairs.					
Name	Address	Telephone Number				
		()				
		()				
		()				
Section V. Personal Liab (Complete only if Business	oility for Excise Tax Cases is is required to file Excise Tax	Returns)				
Are you aware of any required excise tax returns which have been filed? No Yes (List periods)	ve not 2. With respect to excisinformed that the tax No Yes	With respect to excise taxes, were the patrons or customers informed that the tax was included in the sales price? No Yes				
If the liability is one of the "collected" taxes (transportation of persons or property and communications), was the tax collected. No Yes		ing the period tax accrued, that the law the tax?				
Section VI.	Signatures					
I declare that I have examined the information given in this intervi	ew and to the best of my knowled	ge and belief, it is true, correct, and complete.				
Signature of person interviewed		Date				
Signature of Interviewer		Date				
Date copy of completed interview form given to person intervie	wed					

Form **4180** (Rev. 7-2007) Catalog No. 22710P

Additional Information