

Request for Signature or Missing Information to Complete Return

To receive the forms, schedules or publications to respond to this letter, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).

We are returning your tax return because we need more information to process it. You must complete and send us all items asked for next to the boxes checked on both sides of this form. When you reply, include your return and this form. To avoid further delay, send all requested information within 20 days, unless otherwise instructed below. In case we need more information, provide in the spaces below your telephone number and the best hours to contact you.

Telephone _____ Hours _____

- ☒ 1. Your tax return doesn't show a **valid original signature**. A **photocopied signature is not a valid signature**. Don't sign this letter. Sign your name on the "Sign Here" signature line(s) on your Form 1040/A/EZ. Follow the additional requirements below, if they apply:
 - a. If this is a joint return, both spouses must sign the return.
 - b. If you can't write your name, sign your mark in the presence of two witnesses. The signatures of the witnesses also are required.
 - c. If you're signing as a parent of a minor child, sign the child's name and your name, writing "parent of a minor child," in the signature area.
 - d. We require a power of attorney or court certificate in all other instances when someone other than the taxpayer is signing the return.
 - e. If you signed in the wrong place on your return, sign your name in the "SIGN HERE" area of your return.
- ☐ 2. Your taxpayer identification number (Social Security Number or IRS Individual Taxpayer Identification Number) is missing or doesn't show nine digits. If this is a joint return or married filing separately return, both spouses must have a number. If you don't have a number, call the Social Security Administration at 1-800-772-1213. If you can't get a Social Security Number because you don't qualify, complete Form W-7, Application for IRS Individual Taxpayer Identification Number (ITIN). To apply, refer to the Form W-7 instructions. Re-submit your tax return to the IRS after you have been issued an SSN or ITIN. Write the correct SSN or ITIN in the space provided on your return. Also review all other SSNs, ITINs, or ATINs listed on your return to be sure they are correct.
- ☐ 3. The dependent information on the front of your return, is incomplete. Enter the following information for each dependent listed on line 6c:
 - a. Dependent's first and last name.
 - b. Dependent's Social Security Number (SSN), IRS Individual Taxpayer Identification Number (ITIN), or Adoption Taxpayer Identification Number (ATIN). Also, review all other SSNs, ITINs, or ATINs listed on your return to be sure they are correct.
 - c. Dependent's relationship to you.
 - d. If your dependent is a qualifying child for the child tax credit, check the box in column (4).
- ☐ 4. Attach supporting document(s) for your entry of \$ _____ for tax withheld. This may be a Form W-2, Form W-2G, Form 1099, or substitute Form W-2 (for example, a copy of an earning statement with year-end totals).

- ☐ 5. Your return includes income or tax for **more than one tax year**. You must file a separate tax return for each tax year.
- ☐ 6. Your return includes income or tax for **someone other than you** or your spouse. Each person (except married couples) must file a separate tax return.
- ☐ 7. Your Form 1040/A/EZ is blank, illegible, incomplete, or missing and we can't process it. You must resubmit the original completed form along with all applicable schedules, forms and attachments. **Your original signature(s) is required.**
- ☐ 8. Complete Form 8332, Form 2120, or attach a copy of the divorce decree which allows you to claim an exemption for a child who did not live with you due to divorce or separation.
- ☐ 9. Complete **Form or Schedule _____** to support your entry on line _____ of **Form or Schedule _____**.
- ☐ 10. Complete the indicated form(s) or schedule(s) to support your entry on the line(s) of your Form 1040 or Form 1040A as listed below:
 - ☐ Form or Schedule _____ to support line _____
 - ☐ Form or Schedule _____ to support line _____
 - ☐ Form or Schedule _____ to support line _____
 - ☐ Form or Schedule _____ to support line _____
 - ☐ Form or Schedule _____ to support line _____
 - ☐ Form or Schedule _____ to support line _____
 - ☐ You may be liable for self-employment tax on income reported on Schedule C/C-EZ or Schedule F. Submit a completed Schedule SE.
- ☐ 11. Complete the following line(s):
 - ☐ Line(s) _____ on Form or Schedule _____
 - ☐ Line(s) _____ on Form or Schedule _____
 - ☐ Line(s) _____ on Form or Schedule _____
 - ☐ Line(s) _____ on Form or Schedule _____
 - ☐ Line(s) _____ on Form or Schedule _____
- ☐ 12. Explain your entry of \$ _____ on line _____ of Form or Schedule _____ and attach the supporting form(s) or schedule(s), as required.
- ☐ 13. Explain the source of earned income or wages you used to compute your earned income credit and attach documents (such as Forms W-2 or Forms 1099-MISC) to support your entry.
- ☐ 14. The information about your qualifying child or children on Schedule EIC is incomplete. Enter the following information for each child listed on Schedule EIC:
 - a. Child's complete name.
 - b. Child's Social Security Number (SSN). Also, review all other SSNs listed on your return to be sure they are correct.
 - c. Child's relationship to you.
 - d. Number of months the child lived in your home during the tax year.

OVER

Request for Signature or Missing Information to Complete Return (Continued)

- ☐ 15. The information about the qualifying student on Form 8863 is incomplete. Enter the following information for each student listed on Form 8863.
- Student's complete name.
 - Student's Social Security Number.
- ☐ 16. We can't determine **which taxpayer** is filing Form or Schedule _____. Enter the name and Social Security Number (SSN) or IRS Individual Taxpayer Identification Number (ITIN) of the taxpayer who is required to pay this tax. If both spouses are required to pay this tax, each must file a separate form or schedule.
- ☐ 17. Your **Form 2441 or Schedule 2** is incomplete.
- ☐ a. You must complete all of Part I.
 - ☐ b. The dependent information on line 2, Part II is incomplete. Enter the information listed below:
 - First and last name of the qualifying person(s).
 - Social Security Number (SSN), Individual Taxpayer Identification Number (ITIN), or Adoption Taxpayer Identification Number (ATIN) of the qualifying person(s). Also, review all other SSNs, ITINs, or ATINs listed on your return to be sure they are correct.
 - Qualified expenses for the qualifying person(s) listed in column (a).
 - ☐ c. We can't determine the entry for line 5, Part II. Line 5 must be entered when married filing a joint return. If your spouse was a student or disabled during the tax year, the number of months your spouse was a student or disabled is required to calculate the entry.
- ☐ 18. Attach a copy of the birth certificate for the dependent who was born and died during the tax year.
- ☐ 19. Write the **date of death** for the deceased taxpayer across the top of your Form 1040/A/EZ.
- ☐ 20. You may file a **joint return** (Filing Status 2) and claim your spouse's exemption if your spouse died during the tax year and you didn't remarry during the tax year. Provide your spouse's name and Social Security Number (SSN) or IRS Individual Taxpayer Identification Number (ITIN). If you have a dependent child or children, you may claim qualifying widow(er) status (Filing Status 5) for the two tax years following your spouse's death.
- ☐ 21. A return for a **deceased taxpayer must be signed** by the taxpayer's spouse or a representative of the estate—an executor, administrator, or anyone who is in charge of the decedent's property. The appropriate person must sign on the "Sign Here" signature line on the tax return. **An original signature is required. A photocopied signature is not a valid signature.**
- ☐ 22. We can't determine who is **claiming the refund** for the deceased taxpayer(s). Print the name clearly in the signature area of the return.
- ☐ 23. We need **additional support** for the deceased taxpayer's return. See the item(s) checked below:
- ☐ a. If you are a **court appointed representative**, attach a copy of the court certificate showing your appointment. A will or power of attorney is not a valid court certificate.
- ☐ b. If you are **not** a court appointed representative, submit Form 1310 or change your previously submitted Form 1310, as indicated below:
- ☐ 1) Complete Part I, Form 1310.
 - ☐ 2) Answer questions 2a, 2b and 3 on Form 1310. **If line 2a or 2b is answered "Yes", the court appointed representative must file and sign the return and attach the court certificate showing his or her appointment.**
- OR
- If line 3 is answered "No", we can't issue a refund until you attach a court certificate showing your appointment as personal representatives or other evidence that you are entitled under state law to receive the refund.**
- ☐ 3) **Sign** Form 1310 in the signature space provided.
- ☐ 24. It appears you may be filing individual tax forms to reflect a business entity's filing requirement. Refer to the appropriate business and/or individual forms/schedules and instructions at www.irs.gov or contact us at 1-800-829-1040 (for individuals) or 1-800-829-4933 (for businesses).
- ☐ 25. We have delayed processing your return because we have questions about the withholding you reported or the credit you claimed. You must provide official supporting documents such as Form SSA-1099, RRB-1099 or other Form 1099 to support the withholding or credit. If we don't receive proper official documents, we may deny your claim.
- ☐ 26. Attachments to your return or credits or deductions you are claiming indicate you must file Form 1040 instead of Form 1040A or Form 1040EZ. Complete and submit Form 1040.
- ☐ 27. By law, the following statement must appear directly above your original signature in the "Sign Here" area of your tax return: "Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than the taxpayer) is based on all information of which preparer has any knowledge." RE-PRINT your computer generated return or obtain a new Form 1040/A/EZ that has this paragraph printed above the "Sign Here" area of the return and sign in the space provided.
- ☐ 28. _____
- ☐ 29. _____

To reply, use the return address on the mailing envelope or refer to IRS.gov and search "where to file."

If you have any questions regarding this form, call 1-800-829-1040.

Tax and Credits

Standard Deduction for—

• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.
• All others:
Single or Married filing separately, \$6,300
Married filing jointly or Qualifying widow(er), \$12,600
Head of household, \$9,250

38	Amount from line 37 (adjusted gross income)	38	0	00
39a	Check <input type="checkbox"/> You were born before January 2, 1951. <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1951. <input type="checkbox"/> Blind. Total boxes checked ▶ 39a			
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39b <input type="checkbox"/>			
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	6300	00
41	Subtract line 40 from line 38	41	0	
42	Exemptions. If line 38 is \$154,950 or less, multiply \$4,000 by the number on line 6d. Otherwise, see instructions	42	16000	00
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	0	00
44	Tax (see instructions). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/>	44	0	00
45	Alternative minimum tax (see instructions). Attach Form 6251	45	0	00
46	Excess advance premium tax credit repayment. Attach Form 8962	46	0	00
47	Add lines 44, 45, and 46	47	0	00
48	Foreign tax credit. Attach Form 1116 if required	48	0	00
49	Credit for child and dependent care expenses. Attach Form 2441	49	0	00
50	Education credits from Form 8863, line 19	50	0	00
51	Retirement savings contributions credit. Attach Form 8880	51	0	00
52	Child tax credit. Attach Schedule 8812, if required	52	0	00
53	Residential energy credits. Attach Form 5695	53	0	00
54	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	54	0	00
55	Add lines 48 through 54. These are your total credits	55	0	00
56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	56	0	00

Other Taxes

57	Self-employment tax. Attach Schedule SE	57	0	00
58	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	58	0	00
59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	0	00
60a	Household employment taxes from Schedule H	60a	0	00
b	First-time homebuyer credit repayment. Attach Form 5405 if required	60b	0	00
61	Health care: individual responsibility (see instructions) Full-year coverage <input type="checkbox"/>	61	0	00
62	Taxes from: a <input type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code(s)	62	0	00
63	Add lines 56 through 62. This is your total tax	63	0	00

Payments

If you have a qualifying child, attach Schedule EIC.

64	Federal income tax withheld from Forms W-2 and 1099	64	6856	50
65	2015 estimated tax payments and amount applied from 2014 return	65	0	00
66a	Earned income credit (EIC)	66a	0	00
b	Nontaxable combat pay election 66b			
67	Additional child tax credit. Attach Schedule 8812	67	0	00
68	American opportunity credit from Form 8863, line 8	68	0	00
69	Net premium tax credit. Attach Form 8962	69	0	00
70	Amount paid with request for extension to file	70	0	00
71	Excess social security and tier 1 RRTA tax withheld	71	0	00
72	Credit for federal tax on fuels. Attach Form 4136	72	0	00
73	Credits from Form: a <input type="checkbox"/> 2439 b <input checked="" type="checkbox"/> Reserved c <input type="checkbox"/> 8885 d <input type="checkbox"/>	73	0	00
74	Add lines 64, 65, 66a, and 67 through 73. These are your total payments	74	6856	50

Refund

Direct deposit? See instructions.

75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid	75	6856	50
76a	Amount of line 75 you want refunded to you. If Form 8888 is attached, check here ▶ <input type="checkbox"/>	76a	6856	50
b	Routing number <input type="text"/> ▶ c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings			
d	Account number <input type="text"/>			
77	Amount of line 75 you want applied to your 2016 estimated tax ▶	77	0	00

Amount You Owe

78	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions ▶	78	0	00
79	Estimated tax penalty (see instructions)	79		

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ Yes. Complete below. ☐ No

Designee's name ▶	Phone no. ▶	Personal identification number (PIN) ▶
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Sign Here

Joint return? See instructions. Keep a copy for your records

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature <i>[Signature]</i>	Date <i>02/11/16</i>	Your occupation <i>Private sector</i>	Daytime phone number
Spouse's signature. If a joint return, both must sign	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶			Firm's EIN ▶	
Firm's address ▶			Phone no.	

Substitute for Form W-2, Wage and Tax Statement, or Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

OMB No. 1545-0074

▶ Attach to Form 1040, 1040A, 1040-EZ, or 1040X.

▶ Information about Form 4852 is available at www.irs.gov/form4852.

1 Name(s) shown on return 3 Address <u>1080- B East veterans Hihgway, Jackson, New Jersey, [08527]</u> 4 Enter year in space provided and check one box. For the tax year ending December 31, <u>2015</u> I have been unable to obtain (or have received an incorrect) <input checked="" type="checkbox"/> Form W-2 OR <input type="checkbox"/> Form 1099-R. I have notified the IRS of this fact. The amounts shown on line 7 or line 8 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5. 5 Employer's or payer's name, address, and ZIP code <u>Crossroads Realty Group Limited L</u> 7 Form W-2. Enter wages, tips, other compensation, and taxes withheld. <table style="width: 100%;"><tr><td style="width: 50%;">a Wages, tips, and other compensation <u>0.00</u></td><td style="width: 50%;">f State income tax withheld <u>375.83</u></td></tr><tr><td>b Social security wages <u>0.00</u></td><td>(Name of state) <u>New Jersey</u></td></tr><tr><td>c Medicare wages and tips <u>0.00</u></td><td>g Local income tax withheld <u> </u></td></tr><tr><td>d Social security tips <u>0.00</u></td><td>(Name of locality) <u> </u></td></tr><tr><td>e Federal income tax withheld <u>1050.44</u></td><td>h Social security tax withheld <u>1495.44</u></td></tr><tr><td></td><td>i Medicare tax withheld <u>349.74</u></td></tr></table>	a Wages, tips, and other compensation <u>0.00</u>	f State income tax withheld <u>375.83</u>	b Social security wages <u>0.00</u>	(Name of state) <u>New Jersey</u>	c Medicare wages and tips <u>0.00</u>	g Local income tax withheld <u> </u>	d Social security tips <u>0.00</u>	(Name of locality) <u> </u>	e Federal income tax withheld <u>1050.44</u>	h Social security tax withheld <u>1495.44</u>		i Medicare tax withheld <u>349.74</u>	2 Your social security number 6 Employer's or payer's identification number (if known) <u>47-3976170</u> 8 Form 1099-R. Enter distributions from pensions, annuities, retirement/profit-sharing plans, IRAs, insurance contracts, etc. <table style="width: 100%;"><tr><td style="width: 50%;">a Gross distribution <u> </u></td><td style="width: 50%;">f Federal income tax withheld <u> </u></td></tr><tr><td>b Taxable amount <u> </u></td><td>g State income tax withheld <u> </u></td></tr><tr><td>c Taxable amount not determined <input type="checkbox"/></td><td>h Local income tax withheld <u> </u></td></tr><tr><td>d Total distribution <u> </u></td><td>i Employee contributions <u> </u></td></tr><tr><td>e Capital gain (included in line 8b) <u> </u></td><td>j Distribution codes <u> </u></td></tr></table>	a Gross distribution <u> </u>	f Federal income tax withheld <u> </u>	b Taxable amount <u> </u>	g State income tax withheld <u> </u>	c Taxable amount not determined <input type="checkbox"/>	h Local income tax withheld <u> </u>	d Total distribution <u> </u>	i Employee contributions <u> </u>	e Capital gain (included in line 8b) <u> </u>	j Distribution codes <u> </u>
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9 How did you determine the amounts on lines 7 and 8 above?

After an in depth review and research of 26 USC, IRC, Federal register, case law et al, the erroneously alleged "wages" by the "PAYER" are clearly NOT consistent with relevant law. No taxable "wages" were received by the "recipient", "payer" erroneously reported payments information that is bad payers data 6401(c). The amounts withheld are over payments. I was/am NOT an sec 3401(c) "employee"

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.

Notified my private employer since Jan, 2013 that the amounts that they were/are currently withholding from my private compensation are not within the category of "wages" described by 26 USC, IRC or other relevant law. I have also demanded for the withholding to stop, but have only received threats of be fired if insisting on my demands because they fear retaliation from the IRS if honoring my demands.

General Instructions

Section references are to the Internal Revenue Code.

Future developments. The IRS has created a page on IRS.gov for information about Form 4852, at www.irs.gov/form4852. Information about any future developments affecting Form 4852 (such as legislation enacted after we release it) will be posted on that page.

Purpose of form. Form 4852 serves as a substitute for Forms W-2, W-2c, and 1099-R and is completed by you or your representatives when (a) your employer or payer does not issue you a Form W-2 or Form 1099-R or (b) an employer or payer has issued an incorrect Form W-2 or Form 1099-R. Attach this form to the back of your income tax return, before any supporting forms or schedules.

You should always attempt to get Form W-2, Form W-2c, or Form 1099-R from your employer or payer before contacting the IRS or filing Form 4852. If you do not receive the missing or corrected form from your employer or payer by February 14, you may call the IRS at 1-800-829-1040 for assistance. You must provide your name, address (including ZIP code), phone number, social security number, and dates of employment, and your employer's or payer's name, address (including ZIP code), and phone number. The IRS will contact your employer or payer and request the missing form. The IRS also will send you a Form 4852. If you do not receive the missing form in sufficient time to file your income tax return timely, you may use the Form 4852 that the IRS sent you.

If you received an incorrect Form W-2 or Form 1099-R, you should always attempt to have your employer or payer issue a corrected form before filing Form 4852.

Note. Retain a copy of Form 4852 for your records. To help protect your social security benefits, keep a copy of Form 4852 until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year. After September 30 following the date shown on line 4, you may use a my Social Security online account to verify wages reported by your employers. Please visit www.ssa.gov/myaccount. Or, you may contact your local SSA office to verify wages reported by your employer.

Will I need to amend my return? If you receive a Form W-2, Form W-2c, or Form 1099-R after your return is filed with Form 4852, and the information differs from the information reported on your return, you must amend your return by filing Form 1040X, Amended U.S. Individual Income Tax Return.

Penalties. The IRS will challenge the claims of individuals who attempt to avoid or evade their federal tax liability by using Form 4852 in a manner other than as prescribed. Potential penalties for the improper use of Form 4852 include:

- Accuracy-related penalties equal to 20 percent of the amount of taxes that should have been paid.
- Civil fraud penalties equal to 75 percent of the amount of taxes that should have been paid, and

1 Wages, tips, other comp	2 Fed. income tax withheld
-0-	1050.44
3 Social security wages	4 Soc. sec. tax withheld
-0-	1495.44
5 Medicare wages and tips	6 Medicare tax withheld
-0-	349.74
Employer's name, address, and ZIP code Crossroads Realty Group Limited L 525 E County Line Road Suite 2 Lakewood NJ 08701	
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a
	12b
13 Statutory employee Retirement plan Third-party sick pay	12c
	12d
14	Employee's SSN
SLT 011 HC/WD 102-51 NJ 01 45-10 NJ FLI 21-71	Employer ID number (EIN) 47-3976170 Control 001788000007001
Elias Agredo-Narvaez 1080 B East Veterans Highway Apt Jackson NJ 08527	
Employee's name, address, and ZIP code	
15a Employer's state EIN number NJ 473-976-170/000	16 State wages, tips, etc. -0-
	17 State income tax 375.83
18 Local wages, tips, etc.	19 Local income tax
	20 Locality name
Wage and Tax Statement Form Copy B This information is being furnished to the IRS To Be Filed With Employee's W-2 FEDERAL Tax Return. 2015 <small>OMB No. 1545-0048 Department of the Treasury - Internal Revenue Service</small>	

NOTICE

This statement includes a representation of a form W-2. The representation it is NOT intended to represent a corrected W-2 filed by the party identified in it as the "PAYER". The correcting W-2 form is submitted to "rebut" a document known to have been submitted by the party identified therein as "PAYER" which erroneously alleged a payment or payments to the party identified therein as the "Recipient" of gains, profit or "income" made in the course of a "trade or business". Neither the "PAYER" nor the "RECIPIENT" engaged in any transactions with each other that were made in the course of a "trade or business" as those terms are defined by the code. This correcting form ends any such presumption. Note however that the amounts deducted were/are correct.

STATEMENT

No payments were received by the party identified in the form above as the "RECIPIENT" from the party identified therein as the "PAYER" which were connected with the performance of the functions of a "PUBLIC OFFICE" or otherwise constituted gains, profit or income within the meaning of relevant law. Deductions amounts are however correct.

Under penalty of perjury, I declare that these statements are true and complete.

Elias Agredo-Narvaez 02/14/16

Substitute for Form W-2, Wage and Tax Statement, or Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

OMB No. 1545-0074

▶ Attach to Form 1040, 1040A, 1040-EZ, or 1040X.

▶ Information about Form 4852 is available at www.irs.gov/form4852.

1 Name(s) shown on return <u>Elias Agredo-Narvaez</u>		2 Your social security number _____												
3 Address <u>1080-B East veterans Highway, Jackson, New Jersey 08527</u>														
4 Enter year in space provided and check one box. For the tax year ending December 31, <u>2015</u> I have been unable to obtain (or have received an incorrect) <input checked="" type="checkbox"/> Form W-2 OR <input type="checkbox"/> Form 1099-R. I have notified the IRS of this fact. The amounts shown on line 7 or line 8 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5.														
5 Employer's or payer's name, address, and ZIP code <u>Goldstone Management Inc.</u> <u>525 County Line Road suite 2, Lakewood, NJ 08701</u>		6 Employer's or payer's identification number (if known) <u>75-3024492</u>												
7 Form W-2. Enter wages, tips, other compensation, and taxes withheld. <table border="0" style="width:100%"><tr><td style="width:50%">a Wages, tips, and other compensation <u>0.00</u></td><td style="width:50%">f State income tax withheld <u>399.87</u></td></tr><tr><td>b Social security wages <u>0.00</u></td><td>(Name of state) <u>New Jersey</u></td></tr><tr><td>c Medicare wages and tips <u>0.00</u></td><td>g Local income tax withheld _____</td></tr><tr><td>d Social security tips <u>0.00</u></td><td>(Name of locality) _____</td></tr><tr><td>e Federal income tax withheld <u>571.16</u></td><td>h Social security tax withheld <u>1790.00</u></td></tr><tr><td></td><td>i Medicare tax withheld <u>418.63</u></td></tr></table>			a Wages, tips, and other compensation <u>0.00</u>	f State income tax withheld <u>399.87</u>	b Social security wages <u>0.00</u>	(Name of state) <u>New Jersey</u>	c Medicare wages and tips <u>0.00</u>	g Local income tax withheld _____	d Social security tips <u>0.00</u>	(Name of locality) _____	e Federal income tax withheld <u>571.16</u>	h Social security tax withheld <u>1790.00</u>		i Medicare tax withheld <u>418.63</u>
a Wages, tips, and other compensation <u>0.00</u>	f State income tax withheld <u>399.87</u>													
b Social security wages <u>0.00</u>	(Name of state) <u>New Jersey</u>													
c Medicare wages and tips <u>0.00</u>	g Local income tax withheld _____													
d Social security tips <u>0.00</u>	(Name of locality) _____													
e Federal income tax withheld <u>571.16</u>	h Social security tax withheld <u>1790.00</u>													
	i Medicare tax withheld <u>418.63</u>													
8 Form 1099-R. Enter distributions from pensions, annuities, retirement/profit-sharing plans, IRAs, insurance contracts, etc. <table border="0" style="width:100%"><tr><td style="width:50%">a Gross distribution _____</td><td style="width:50%">f Federal income tax withheld _____</td></tr><tr><td>b Taxable amount _____</td><td>g State income tax withheld _____</td></tr><tr><td>c Taxable amount not determined <input type="checkbox"/></td><td>h Local income tax withheld _____</td></tr><tr><td>d Total distribution _____</td><td>i Employee contributions _____</td></tr><tr><td>e Capital gain (included in line 8b) <input type="checkbox"/></td><td>j Distribution codes _____</td></tr></table>			a Gross distribution _____	f Federal income tax withheld _____	b Taxable amount _____	g State income tax withheld _____	c Taxable amount not determined <input type="checkbox"/>	h Local income tax withheld _____	d Total distribution _____	i Employee contributions _____	e Capital gain (included in line 8b) <input type="checkbox"/>	j Distribution codes _____		
a Gross distribution _____	f Federal income tax withheld _____													
b Taxable amount _____	g State income tax withheld _____													
c Taxable amount not determined <input type="checkbox"/>	h Local income tax withheld _____													
d Total distribution _____	i Employee contributions _____													
e Capital gain (included in line 8b) <input type="checkbox"/>	j Distribution codes _____													

9 How did you determine the amounts on lines 7 and 8 above?

After an in depth review of 26 USC, IRC, Federal register and case law et al, the erroneously alleged "wages" by the payer are clearly not consistent with relevant law as in sec 3121 of part 31 of the same, nor am (was) I their "employee" under 3401(c) of the same. These earnings are NOT based on activities of federal privilege for which the taxes are devised (as consistently upheld by the Supreme Court).

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.

Notified my private employer since January 2013 that the amounts they (were) and are currently withholding from my private compensation are not within the category of "wages" described by 26 USC, IRC, or any relevant law, I have also demanded for the withholding to stop, but have only received threats of be left unemployed if insisting on the matter because they fear retaliation from the IRS if honoring my demands.

General Instructions

Section references are to the Internal Revenue Code.

Future developments. The IRS has created a page on IRS.gov for information about Form 4852, at www.irs.gov/form4852. Information about any future developments affecting Form 4852 (such as legislation enacted after we release it) will be posted on that page.

Purpose of form. Form 4852 serves as a substitute for Forms W-2, W-2c, and 1099-R and is completed by you or your representatives when (a) your employer or payer does not issue you a Form W-2 or Form 1099-R or (b) an employer or payer has issued an incorrect Form W-2 or Form 1099-R. Attach this form to the back of your income tax return, before any supporting forms or schedules.

You should always attempt to get Form W-2, Form W-2c, or Form 1099-R from your employer or payer before contacting the IRS or filing Form 4852. If you do not receive the missing or corrected form from your employer or payer by February 14, you may call the IRS at 1-800-829-1040 for assistance. You must provide your name, address (including ZIP code), phone number, social security number, and dates of employment, and your employer's or payer's name, address (including ZIP code), and phone number. The IRS will contact your employer or payer and request the missing form. The IRS also will send you a Form 4852. If you do not receive the missing form in sufficient time to file your income tax return timely, you may use the Form 4852 that the IRS sent you.

If you received an incorrect Form W-2 or Form 1099-R, you should always attempt to have your employer or payer issue a corrected form before filing Form 4852.

Note. Retain a copy of Form 4852 for your records. To help protect your social security benefits, keep a copy of Form 4852 until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year. After September 30 following the date shown on line 4, you may use a my Social Security online account to verify wages reported by your employers. Please visit www.ssa.gov/myaccount. Or, you may contact your local SSA office to verify wages reported by your employer.

Will I need to amend my return? If you receive a Form W-2, Form W-2c, or Form 1099-R after your return is filed with Form 4852, and the information differs from the information reported on your return, you must amend your return by filing Form 1040X, Amended U.S. Individual Income Tax Return.

Penalties. The IRS will challenge the claims of individuals who attempt to avoid or evade their federal tax liability by using Form 4852 in a manner other than as prescribed. Potential penalties for the improper use of Form 4852 include:

- Accuracy-related penalties equal to 20 percent of the amount of taxes that should have been paid.
- Civil fraud penalties equal to 75 percent of the amount of taxes that should have been paid, and

1 Wages, tips, other comp		2 Fed. income tax withheld	
3 Social security wages		4 Soc. sec. tax withheld	
5 Medicare wages and tips		6 Medicare tax withheld	
Employer's name, address, and ZIP code Goldstone Management Inc. 525 East County Line Road Suite 2 Lakewood NJ 08701			
7 Social security tips		8 Allocated tips	
9		10 Dependent care benefits	
11 Nonqualified plans		12a	
		12b	
13 Statutory employee		12c	
Retirement plan		12d	
14		Employee's SSN	
NJ 02 72 18		Employer ID number (EIN)	
NJ FLI 25.97		75-3024492	
		Control 00543600024001	
Elias Agredo-Narvaez 1080 B East Veterans Highway Apt Jackson NJ 08527			
Employee's name, address, and ZIP code			
15 State income tax		16 State income tax	
NJ 753-024-492/000		399.87	
18 Local wages, tips, etc.		19 Local income tax	
		20 Locality name	
Wage and Tax Statement Copy B To Be Filed With Employee's FEDERAL Tax Return. <small>OMB No. 1545-0046 Department of the Treasury Internal Revenue Service</small>			

NOTICE

This statement includes a representation of a form W-2. The representation it is NOT intended to represent a corrected W-2 filed by the party identified in it as the "PAYER". The correcting W-2 form is submitted to "rebut" a document known to have been submitted by the party identified therein as "PAYER" which erroneously alleged a payment or payments to the party identified therein as the "Recipient" of gains, profit or "income" made in the course of a "trade or business". Neither the "PAYER" nor the "RECIPIENT" engaged in any transactions with each other that were made in the course of a "trade or business" as those terms are defined by the code. This correcting form ends any such presumption. Note however that the amounts deducted were/are correct.

STATEMENT

No payments were received by the party identified in the form above as the "RECIPIENT" from the party identified therein as the "PAYER" which were connected with the performance of the functions of a "PUBLIC OFFICE" or otherwise constituted gains, profit or income within the meaning of relevant law. Deductions amounts are however correct.

Under penalty of perjury, I declare that these statements are true and complete.

Elias Agredo-Narvaez

02/14/16

LPC PROPERTIES LLC 525 EAST COUNTY LINE RD SUITE 2 LAKEWOOD NJ 08701 (732)886-7400	
81-0574157	
ELIAS AGREDO-NARVAEZ 1080B EAST VETERANS HIGHWAY APT 1080B JACKSON NJ 08527	
Account number 664930940713	Agent
Provider	Other funding
1. Federal income tax withheld	2. Rollover from previous year
3. Medical and dental premiums	4. Nonemployee compensation -0-
5. Substantive payments (dividends, interest)	6. Royalties, fees, honoraria, or other income from intellectual property <input type="checkbox"/>
7. Crop insurance proceeds	8. Access to other parachute payments
9. Section 409A deferrals	10. Section 409A deferrals
11. State tax withheld	12. State income
13. State tax withheld NJ/223-836-034/000	14. State income -0-
1099-MISC Miscellaneous Income 2015 Copy 2 - To be filed with Recipient's State Tax Return CORRECTED - FATCA filing requirement (OMB No. 1545-0047)	

STATEMENT

This statement includes the representation of a form 1099-MISC.

The form is NOT intended to represent a corrected 1099-MISC filed by the party identified therein as the "PAYER".

The corrected form 1099-MISC herein presented, is submitted to "rebut" a document known to have been submitted by the party identified therein as the "payer" which erroneously alleges a payment or payments to the party identified therein as the "recipient" of "gains, profits or incomes" within the meaning of relevant law; which they are not.

If the IRS or any of its agents have first hand knowledge of taxable activities or transactions performed by me during the year 2015, or other information that differs from what I am declaring and swearing herein under penalty of perjury, I hereby request and demand clarification as to the nature of and the reason of such information and all other pertinent information regarding those assertions.

In accordance with 26 USC sec 6201(d)* I am asserting a reasonable dispute with respect to items of income reported on information returns filed with the secretary under subpart (d) of 26USC sec 6041. I am cooperating with the secretary in this matter, and I am providing timely access and response to reasonable request by the IRS and its agents.

Under penalty of perjury, I declare that I have examined this statement and that to the best of my well informed knowledge and firm belief, it is true, correct and complete.

02/14/16
Elias Agredo-Narvaez

PAYER'S name, address, ZIP/postal code, country, & phone no. 3600 HORIZON HOLDINGS LLC 525 EAST COUNTY LINE ROAD SUITE 2 LAKEWOOD NJ 08701 (732)886-7400 509	
PAYER'S federal ID number 47-2433545	RECIPIENT'S ID number
RECIPIENT'S name, address, ZIP/postal code & country ELIAS AGREDO-NARVAEZ 1080B EAST VETERANS HWY JACKSON NJ 08527	
Account number 537703940367	1. Rents
2. Royalties	3. Other income
4. Fed. income tax withheld	5. Fishing boat proceeds
6. Medical & health care pymts.	7. Nonemployee comp. -0-
8. Substitute payments in lieu of dividends or interest	9. Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient for resale) <input type="checkbox"/>
10. Crop insurance proceeds	11.
12.	13. Excess golden parachute payments
14. Gross proceeds paid to an attorney	15a. Section 409A deferrals
15b. Section 409A income	16. State tax withheld
17. State/Payer's state no. PA/	18. State income -0-
1099-MISC Miscellaneous Income 2015 Copy 2 - To be filed with Recipient's State Tax Return <input checked="" type="checkbox"/> CORRECTED (if checked) <input type="checkbox"/> FATCA filing requirement <small>Dept. of Treasury - IRS Form No. 1041-0115</small>	

STATEMENT

This statement includes the representation of a form 1099-MISC.

The form is NOT intended to represent a corrected 1099-MISC filed by the party identified therein as the "PAYER".

The corrected form 1099-MISC herein presented, is submitted to "**rebut**" a document known to have been submitted by the party identified therein as the "payer" which erroneously alleges a payment or payments to the party identified therein as the "recipient" of "gains, profits or incomes" within the meaning of relevant law; which they are not.

If the IRS or any of its agents have first hand knowledge of taxable activities or transactions performed by me during the year 2015, or other information that differs from what I am declaring and swearing herein under penalty of perjury, I hereby request and demand clarification as to the nature of and the reason of such information and all other pertinent information regarding those assertions.

In accordance with 26 USC sec 6201(d)* I am asserting a reasonable dispute with respect to items of income reported on information returns filed with the secretary under subpart (d) of 26USC sec 6041. I am cooperating with the secretary in this matter, and I am providing timely access and response to reasonable request by the IRS and its agents.

Under penalty of perjury, I declare that I have examined this statement and that to the best of my well informed knowledge and firm belief, it is true, correct and complete.

02/14/16

Elias Agredo-Narvaez

PLEASANT GARDENS HOLDINGS 525 E COUNTY LINE RD SUITE 2 LAKEWOOD NJ 08701 (732)886-7400	
20-4914309	RECIPIENT'S ID number
ELIAS AGREDO-NARVAEZ 1080 B EAST VETERANS HIGHWAY JACKSON NJ 08527	
574914045899	1. Events
2. Royalties	3. Other income
4. Fed. income tax withheld	5. Fishing boat proceeds
6. Medical & health care pymts	7. Nonemployee comp -0-
8. Substitute payments for loss of dividends or interest	9. Payor made direct sales of 50,000 or more of consumer products to a buyer recipient for resale <input type="checkbox"/>
10. Group insurance proceeds	11.
12.	13. Excess golden parachute payments
14. Gross proceeds paid to an attorney	15a. Section 409A deferrals
15b. Section 409A income	16. State tax withheld
17. State Payor's state no. NJ/204-914-309/000	18. State income -0-
1099-MISC Miscellaneous Income 2015 Copy 2 - To be filed with Recipient's State Tax Return CORRECTED <input checked="" type="checkbox"/> FATCA filing <input type="checkbox"/> Dept. of Treasury - IRG checked requirement MBR No. 1545 01/16	

STATEMENT

This statement includes the representation of a form 1099-MISC.

The form is NOT intended to represent a corrected 1099-MISC filed by the party identified therein as the "PAYER".

The corrected form 1099-MISC herein presented, is submitted to "rebut" a document known to have been submitted by the party identified therein as the "payer" which erroneously alleges a payment or payments to the party identified therein as the "recipient" of "gains, profits or incomes" within the meaning of relevant law; which they are not.

If the IRS or any of its agents have first hand knowledge of taxable activities or transactions performed by me during the year 2015, or other information that differs from what I am declaring and swearing herein under penalty of perjury, I hereby request and demand clarification as to the nature of and the reason of such information and all other pertinent information regarding those assertions.

In accordance with 26 USC sec 6201(d)* I am asserting a reasonable dispute with respect to items of income reported on information returns filed with the secretary under subpart (d) of 26USC sec 6041. I am cooperating with the secretary in this matter, and I am providing timely access and response to reasonable request by the IRS and its agents.

Under penalty of perjury, I declare that I have examined this statement and that to the best of my well informed knowledge and firm belief, it is true, correct and complete.

02/11/16
 Elias Agredo - Narvaez

Consolidated Shipping Transmittal

IRS CENTERS		IRS FIELD OFFICES	
Andover IRS 310 Lowell St. Andover, MA 01810	Baltimore Field Office 31 Hopkins Plaza Baltimore, MD 21201	Phoenix Field Office 210 East Earl Dr. Phoenix, AZ 85012	
Atlanta IRS 4800 Buford Hwy. Chamblee, GA 30341	Boise Field Office 550 W. Fort St. Boise, ID 83724	Portland Field Office 1220 SW 3rd Ave. Portland, OR 97204	
Austin IRS 3651 S. Interregional Hwy. 35 Austin, TX 78741	Brooklyn Field Office 10 Metro Tech Center 625 Fulton St. Brooklyn, NY 11201	Sacramento Field Office 4330 Watt Ave North Highlands, CA 95660	
Brookhaven IRS 1040 Waverly Ave. Holtsville, NY 11742	Cincinnati Field Office 550 Main St. Covington, KY 45202	Salt Lake City Field Office 50 South 200 East Salt Lake City, UT 84111	
Cincinnati IRS 201 W. Rivercenter Blvd. Covington, KY 41011	Dallas Field Office 1100 Commerce St. Dallas, TX 75242	SLC Appeals/EO/KDO 150 Social Hall Ave. Ste. 325 Salt Lake City, UT 84111	
2 Fresno IRS 5045 E. Butler Ave. Fresno, CA 93888	Denver Field Office 600 17th St. Denver, CO 80202-2490	San Francisco Field Office (Western Region) 333 Market Street 14th Floor San Francisco, CA 94105	
Kansas City IRS 333 W. Pershing Rd. Kansas City, MO 64108 <i>(includes mail to Mission, KS)</i>	Las Vegas Field Office 110 City Pkwy. Las Vegas, NV 89106	St. Paul Field Office 30 7th St. S.E. Saint Paul, MN 55101	
Memphis IRS 5333 Getwell Rd. Memphis, TN 38130	Oakland Field Office 1301 Clay St. Ste. 1600S Oakland, CA 94612	Seattle Field Office 915 2nd Ave. Seattle, WA 98174	
Philadelphia IRS 11601 Roosevelt Blvd. Philadelphia, PA 19154 <i>(includes mail to Bensalem, PA)</i>		MISCELLANEOUS OFFICES	
		Detroit Data Center 985 Michigan Ave. Detroit, MI 48226	Martinsburg Computing Center 250 Murall Dr. Kearnsyville, WV 25430
		IRS National Office 1111 Constitution Ave. Washington, DC 20224	Social Security Administration Wilkes-Barre, PA 18769 <i>(Specify Group (A - G))</i>

NOTE: If address is not listed above DO NOT USE. Attach Form 12606 attached to a sealed and addressed envelope.

REMARKS (include Mail Stop, Suite #, etc...):

FROM	
Name or IDRS # 1486781387	Phone
Mail Stop 4451	Date 8-9-14

Elias Agredo-Narvaez
C/O 1080-B East veterans highway
Jackson, New Jersey, [08527-9998]

February, 14, 2016

Department of the Treasury
Internal Revenue Service
Kansas City, MO 64999-0002

To the Internal Revenue Service, To the Commissioner of the Internal Revenue Service, and to Whom it may be concern:

I am hereby filing the income tax return corresponding to the calendar year ending on December 31, 2015.

Enclosed are the following documents:

- 1) IRS FORM 1040 for 2015, 2 pages 1&2.
- 2) 1 FORM 4852 for employer ID# 47-3976170.
- 3) 1 correct Representation of form W-2, 2015 from employer ID 47-3976170, with the required sworn statement showing the corrected information.
- 4) 1 form 4852 for employer ID# 75-3024492.
- 5) 1 correct representation of form W-2, 2015 from employer ID# 75-3024492, with the required sworn statement showing the corrected information.
- 6) 1 correcting representation of form 1099-MISC 2015 from employer ID# 81-0574157 with the required sworn statement showing the corrected information.
- 7) 1 correcting representation of form 1099-MISC 2015 from employer ID# 47-2433545 with the required sworn statement showing the corrected information.
- 8) 1 correcting representation of form 1099-MISC 2015 from employer ID# 20-4914309 with the required sworn statement showing the corrected information.
- 9) 1 page identified as exhibit A
- 10) 1 page identified as exhibit B.

11) EXHIBIT C, 6 pages

In addition to all the above, I am also including true copies of my returns for the years 2013 with 9 pages, and 2014, with 10 pages as they were sent previously certified mail return receipt and which until today you have chosen to ignore.

Also, please, find enclosed herein, a 60 Days letter which will be triggered starting on the day you have received these documents, should you decide to just ignore my lawful request as have been your habit.

Therefore, I expect a full and complete refund within 30 days, of all moneys owed to me since 2013, as they have been withheld from my earnings through willful or accidental misapplication of the laws, and as per 26 USC. Sec 6402(a), sec 6401(b)(c).

Respectfully,

Elias Agredo-Narvaez

Elias Agredo-Narvaez
C/O 1080-B East veterans highway
Jackson, New Jersey
[08527]

April 26, 2016

Department of the Treasury Certified Mail RR 7015 1730 0002 3740 3287
Internal Revenue Service
Office of the Commissioner
1111 Constitution Avenue
NW, Washington, DC
20224-0002

Christine L. Davis Certified Mail RR 7015 1730 0002 3740 3294
Program Manager RICS/IVO
Internal Revenue Service
OSC
Ogden UT
84201-0021

Jacob Joseph "Jack" Lew Certified Mail RR 7015 1730 0002 3740 3300
Secretary of the Treasury
1500 Pennsylvania Avenue, NW
Washington, D.C. 20220

Re: Your notices CP15 (copies included herein)
Tax Year 2013, 2014, 2015
SS# [REDACTED] used by the IRS to maintain and identify its system of records.
Caller ID 586538

Attention: IRS, IRS employees, commissioner, secretary, any and all interested parties.

THIS IS A CONTINUING ATTEMPT TO VALIDATE ADEBT.
Spears vs. Brennan.

Under the Federal debt collection Practices Act, I, now continue to exercise my legal right to VALIDATE the validity of this debt that your collection agency claims I owe you.

Be advise that this is not a refusal to pay, but a notice sent pursuant to the fair debt collection Practices act, 15 USC 1692g.

Also, be reminded that your agency had already tried to unlawfully collect a lawfully disputed alleged debt and after almost a year has passed, and without said validation you have resumed your threats.

You may be in violation of IRC §6304(c) and subject to civil damages for certain unauthorized collection actions under IRC §7433 in an amount equal to the lesser of \$1,000,000 (\$1000,000 in the case of negligence)

53 Dear Sir or Madam:

54 1. Cease attempts to contact third parties [15 U.S.C. Fair Debt Collection Practices Act §1692c(b)]

55 2. Cease communication with the Requester [15 U.S.C. Fair Debt Collection Practices Act §1692c(c)]

56 3. **Cease false or misleading representations** in order to disgrace or attempt to obtain information [15 U.S.C. Fair
57 Debt Collection Practices Act §1692e(7) & (10)]

58 4. **Cease Furnishing Deceptive forms to create the false belief a debt is owed** [15 U.S.C. Fair Debt Collection
59 Practices Act §1692j]

60 For the record, let's correctly refer to the above-named natural person as the Requester, since 26 U.S.C.
61 §7701(a)(14) defines the word 'taxpayer' as a person **subject to** any measurable tax derived from a **taxable source**
62 (activities, events, commodities). Documents I've received from FOIA Requests clearly state no lawful, valid
63 assessment for a tax liability has ever been imposed upon the Requester. Absent a valid, procedurally lawful in full
64 compliance with 26 C.F.R. 301.6203-1, no tax is owing. Therefore the Requester is not a 'taxpayer' either by proof
65 or appointment.

66 The Requester absolutely refuses to give his consent to communicate with third parties. Without the prior consent
67 of the Requester given directly to the Service, or the express permission of a court **of competent jurisdiction**, or as
68 reasonably necessary to effectuate a post-judgment judicial remedy, the IRS MAY NOT communicate, in
69 connection with the collection of an alleged debt, with any person other than the Requester.

70 You and the Service lack lawful authority to interfere with the peace and privacy of a natural, private American
71 who is not subject to your jurisdiction and has no tax liability.

72 If you have already contacted third parties regarding the Requester without my written consent, please send me a
73 complete list together with whatever information you compiled as a result of the contact. As stated before, you
74 may be in violation of IRC §6304(c) and subject to civil damages for certain unauthorized collection actions under
75 IRC §7433 in an amount equal to the lesser of \$1,000,000 (\$1000,000 in the case of negligence) or other sums as
76 noted.

77 In Radinsky v. United States 622 F. Supp. 412 (D.C. Colo. 1985) the Court stated, "....that the plaintiffs are not
78 'taxpayers' **because not tax has been assessed**." Radinsky distinguishes with specificity and particularity that the
79 terms 'tax', 'penalty' or 'sum' are not analogous.

80 Only 'taxpayers' are subject to or liable for a tax measured upon income derived from a taxable source as imposed
81 by the Code. Only 'taxpayers' are under the jurisdiction of the IRS. There is no law requiring the lawful duty to file a
82 return, **unless liable for a tax imposed by the code**. The Requester has no federal tax liability. The Requester is
83 outside your venue and you lack subject matter jurisdiction of the Requester.

84 Therefore you lack lawful authority to impose any 'discovery' proceedings pursuant to Subtitle F Procedure and
85 Administration Chapter 78 Discovery of Liability and Enforcement of 26 USC §7602(c)(1) Examination of books and
86 witnesses. You also lack lawful authority to impose any right to ask for 'disclosure' information pursuant to Subtitle
87 F Procedure and Administration; Chapter 61 Information and Returns; Subchapter A. Returns and Records; Part 1
88 Records, Statements, and Special Returns § 6001, 6011 and 6012(a).

The Service does not authorize you to contact other people to obtain or verify information for persons not under your jurisdiction. For you to do otherwise, you are deliberately acting outside the law and invading the privacy of the Requester and dis-interested third parties, giving the erroneous impression the Requester owes a debt or may be in trouble with federal authorities, thus possibly damaging the reputation and credibility of the Requester, clearly in violation of 15 USC 1692b of the Fair Debt Collection Practices Act and IRC §6304.

I, hereby; **FOR THE RECORD:** once again, demand further documentation attesting to the validity of your claim. Pursuant to **26 USC §6751** please provide documentation attesting to the validity of your claim in the form of: a **certification from the officer, having proper delegation of authority, responsible for making the assessment that purports to establish this claim.**

Therefore, I specifically request that you send me a **certified photocopy of the record of assessment, so that I may establish the existence of the assessment and determine that it is in complete compliance with all related provisions of applicable law and that it contains documented evidence that sufficiently establishes any/my PERSONAL LIABILITY.**

As I do take my/any legal and financial responsibilities very seriously, I look forward to receiving this documentation as soon as possible so that we may resolve this situation without any further delay.

However, this request is not to be considered or construed as and is **not** an admission of **"TAXPAYER"** STATUS or of liability for any **TAX OR PENALTY**. Furthermore, your refusal to comply with this lawful request **SHALL** be recognized before any court of the United States or any administrative process, as an acknowledgement that **I am NOT in fact**, liable for the tax or penalty alleged to be due and owing **or otherwise collectible in any manner.**

Until such documentation is provided, any attempt to act upon this claim cannot and will not be honored.

The Requester declares to the best of his knowledge and belief the above facts to be true and correct.

This is an attempt to validate the validity of your claim and any information obtained will be used for that purpose.

Respectfully,



april, 28, 2016

Elias Agredo-Narvaez, Attorney in fact for
ELIAS AGREDO-NARVAEZ.

124

125

126

127

128 State of New Jersey)

129) ss.

130 County of Ocean)

131 On April 28th, 2016, before me, Sunny Patel, Notary Public, personally appeared
132 Elias Agredo Narvaez, personally known to me (or proved to me on the bases of
133 satisfactory evidence) to be the USER of the name ELIAS AGREDO-NARVAEZ, and acknowledged to me that s/he
134 executed the same in his authorized capacity, and that by his autograph on the instrument the person, or the
135 entity upon behalf of which the person acted, executed the instrument. WITNESS my hand and official seal.

136

137 Sunny Patel, Notary Public My commission expires _____.



1 **To whom it may concern:**

2
3 I do not believe that the vague assertions made on the unsigned notices styled as a **Notices CP15** sent to
4 me allegedly on May, 2nd, 2016 but which I received on April, 25, 2016 (copies attached) amount to
5 sufficiently formal controversion of the testimony on my returns as to merit specific response. For one
6 thing, your notice/s fail/s to identify any actual flaw in any of my returns.

7
8 Further, while you make unspecific assertions that “what [I] submitted is based on positions that fall
9 under one or both of [either a “position” identified as “frivolous” under section 6702 (a)(c) or reflective of
10 a desire to delay or impede the administration of federal tax laws]”, you fail to also allege (vaguely or
11 otherwise) that “my submission/s” either do/es not contain information on which the substantial
12 correctness of the self-assessment/s can be judged or contain/s information that on its/their face indicate/s
13 that the self-assessment is/are substantially incorrect. One or the other of the latter characteristics must be
14 true for a return to actually qualify as “frivolous” under the statute you cite.

15
16 Further still, your notice/s previously offered/s an opportunity for me to withdraw and replace my
17 return/s with one more to your [unspecified] preferences within 30 days without suffering the harm you
18 threaten if I stick by the testimony to which I have already sworn, and herein also attest by affidavit
19 (**included as exhibit**) but which you appear to find inconvenient. However, according to the statute your
20 notice purports to enforce, it is only certain requests for hearings and applications for payment and
21 compromise agreements and “taxpayer assistance orders” that qualify as “frivolous” and subject to
22 penalty merely for suffering one of the two flaws to which you vaguely refer, and not also one or the
23 other of the two I reference above of which you make no mention. Notably, it is also only such
24 submissions—and NOT returns—that can be afforded the “withdraw and replace” consideration you
25 generously propose. See 26 USC 6702(b).

26
27 It can only be assumed that you are seriously confused or have mistaken my return/s for someone else’s
28 “submission”. In the alternative, you may be simply trying to operate outside your authority **in making**
29 **these extortionate threats.**

30
31 Please also note that **per 26 CFR 301.6020-1**, when a return has actually been “determined” to be
32 “frivolous” by someone in your agency, you are **required** to prepare and sign a substitute return:
33 *“If any person required by the Internal Revenue Code or by the regulations to make a return... makes,*
34 *willfully or otherwise, a false, fraudulent or frivolous return, the Commissioner or other authorized*
35 *Internal Revenue Officer or employee shall make such return from his own knowledge and from such*
36 *information as he can obtain through testimony or otherwise.” 26 CFR 301.6020-1.*

37
38 There is no indication that such a substitute return has been made. Had one been made, the allegation that
39 my return is “frivolous” would still be unproven, of course, but at least the signature of your officer on the
40 substitute, accepting the legal risks for producing it, would evince good-faith in making the accusation.
41 But no substitute return has been made, and this is additional evidence that your notice is simply **a**
42 **deliberate fraudulent effort at witness-tampering and extortion.** (Or perhaps you would argue that this
43 provision doesn’t apply, because I am not “a person required by the Internal Revenue Code or by the
44 regulations to make a return”? That is an argument I will readily endorse, but not one that will help your

case much, I think... Plus, your other problems of no actual "frivolous" aspect to my return/s, and the inapplicable and overdue 30-day thing remain for you to stumble over...)

In sum, your notice/s is/are incomprehensible, contradicted by the evidence, obviously made in bad-faith and apparently unrelated to any actual authority concerning "**frivolous returns**".

Nonetheless, my previous experience in dealing with your agency has taught me that you are reflexively devious and exploitive. Even though your "**NOTICES OF PENALTY CHARGES**" is/are on its/their face meaningless, I will operate on the presumption that it/they is/are sent as a pretext on the basis of which you will imagine some further actions to be legitimized should I fail to rebut, which you should know by now that you will have no chances.

Therefore, you will find attached as stated before a sworn affidavit directed at each element of fact involved in the penalty with which you threaten me. In the absence of contradictory evidence of comparable focus and competence (**and your continued failure to meet the relevant requirements imposed on you by United States statutes and regulations**, some of which are discussed above and before), you are entirely lacking any legal grounds to proceed with your threats, in my own opinion.

In any event, you bear the burden of proving your allegations, a burden which is NOT met by simply making vague assertions and threats. I suggest you seek competent legal advice.

By the way, nothing I have done or do now by making this response or otherwise is to be construed as a waiver of any of my rights; further, I particularly demand and insist upon every due process protection relevant to this matter under the common law, state of New Jersey law and federal law.

As is usually required by law and demanded by the subscriber, this letter and its attachments will become part of the formal record of our correspondences and notices I have made to you, for use in all future legal proceedings.

Without prejudice



04/26/2016

Elias Agredo-Narvaez

Attachments:

"COPIES OF YOUR NOTICES CP15 2013, 2014, 2015"

Affidavit.

Reference copy of previously-submitted tax return concerning the period/s 2013, 2014, and 2015.

EXHIBIT**AFFIDAVIT**

I, Elias Agredo Narvaez being of sound mind and upon my oath, depose and state as follows:

1. The tax returns I completed and submitted concerning the years 2013, 2014 and 2015 (copies attached) contain entries declaring total (gross) income receipts and adjusted gross and net income receipts computed according to the instructions provided; a self-assessment of tax due upon the computed "net income" per the tax table provided; and an unaltered signed affirmation regarding the truth, completeness and correctness of these entries and assessment.

To the best of my knowledge and belief, the above-listed entries comprise information by which the substantial correctness of the self-assessment on the return can be judged.

2. Aside from identifying information, address, signature and date, the Forms 1040 I completed and submitted concerning the years 2013, 2014 and 2015 contain nothing from my hand but:
 - * numeric entries;
 - * a correction of a preprinted declaratory statement concerning the notification of the Internal Revenue Service of my rebuttal of a W-2 submitted by another from "have" to "hereby";
 - * the answer to a question posed by the Secretary concerning what efforts were made to secure a correct W-2 from the payer listed on the form: "[whatever it is]"; and
 - * the answer to a question posed by the secretary for an explanation of how I determined what amounts to report various lines of the form: "[whatever it is]".

To the best of my knowledge and belief, nothing on the return constitutes information that on its face indicates that the self-assessment is substantially incorrect.

3. The information on the tax returns I completed and submitted concerning the years 2013, 2014 and 2015 is not based on, nor reflective of, any "position" identified by the Secretary of the Treasury or his delegates as "frivolous" and published as such pursuant to 6702(c).

- 38 4 The content of the tax returns I completed and submitted concerning the years 2013,
39 2014 and 2015, and the act of their completion and submission, are not intended,
40 expected or desired to impede or delay the administration of any federal tax law.

41
42 On the contrary, the returns I completed and submitted concerning the years
43 2013, 2014 and 2015 is good faith proof of my best effort to fully comply with all legal
44 obligations to which I am subject to the best of my understanding of those obligations,
45 and to conform with all relevant provisions of law as best I understand those provisions.
46 It is my sincere hope and intent that the returns contribute to and are met with the
47 smooth, speedy and proper administration of the federal tax laws.

- 48
49 5. I am not an officer or employee of a corporation or member or employee of a
50 partnership, who as such officer, member or employee is under any duty whatsoever
51 concerning tax forms, reports or tax-related matters of any kind. Nor am I a member of
52 any class illustrated or defined by the foregoing enumerated examples.
53
54 6. I have never knowingly and intentionally created, acknowledged or supported any
55 relationship or presumption of a relationship between me and the United States under
56 auspices or by virtue of which the United States is authorized to seize property from me
57 or subject me to fines or penalties other than by making a formal complaint and proving
58 its claims to the satisfaction of an impartial judicial tribunal as Plaintiff in an adversarial
59 proceeding in which I enjoy the benefit of all presumptions, and which conforms to the
60 specifications of the Seventh Article of Amendment to the United States Constitution.

61
62
63 I affirm under penalty of perjury under the laws of the United States of America that
64 the foregoing is true and correct to the best of my current knowledge and information.

65
66
67 Executed May, 26, 2016.

68 

69
70
71  USA

72
73 Elias Agredo-Narvaez

ELIAS AGUEDO-NARVAEZ
C/O ELIAS AGUEDO-NARVAEZ
1080-B East veterans highway
Jackson, New Jersey
[08527-9998]

7025 1730



5471

MAIL



0002 3740 3300



1000



20220

U.S. POSTAGE
PAID
WEST ORANGE, NJ
07062
APR 28 16
AMOUNT
\$8.20
R2305K133556-02

Jacob Joseph Lew
Secretary of the Treasury
1500 Pennsylvania Ave
NW, Washington, DC
20220

MAY 03 2016

485

✓ #046

QC✓ #028

Assessment and Abatement of Miscellaneous Civil Penalties

1. Name of Taxpayer AGREDO-NARVAEZ, ELIAS		5. Year (mandatory) (yyyymm) 201512	6. Statute Date (mandatory) (mmddyyyy) N/A
2. Address 1080B E VETERANS HWY JACKSON NJ 08527-2934		7. Identifying number (SSN (XXX-XX-XXXX) or EIN (XX-XXXXXXX))	
3. MFT (Check one) <input checked="" type="checkbox"/> IMF 55 <input type="checkbox"/> BMF 13	4. Check if no ASED: <input type="checkbox"/>	8. Function (Check one) <input type="checkbox"/> LMSB <input type="checkbox"/> SB/SE <input checked="" type="checkbox"/> W&I <input type="checkbox"/> TE/GE <input type="checkbox"/> Appeals	

Reminders: ✓ Manager's signature is required in block 11a to meet the provisions of Internal Revenue Code (IRC) section 6751.

- ✓ Prepare a separate Form 8278 for each period penalties are warranted.
- ✓ If the Penalty Reference Number (PRN) is not listed, enter all information in the blank line provided at the bottom of each section.
- ✓ At the conclusion of the penalty investigation, provide the taxpayer a computation of the penalty with a copy of a detailed calculation worksheet.

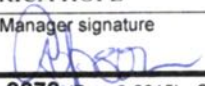
9. I. Miscellaneous Penalties (IRM 20.1.10) Note: Miscellaneous Penalties are continued on the next page.

(a) Penalty Code Section	Penalty Description	(b) Penalty Reference Number	(c) Number of Violations	(d) Amount Assessed	(e) Amount Abated	(f) Pen. Rea: Cor
6652(j)	Failure to file certification with respect to certain residential rental projects required under section 142(d)(7)	587				
6652(k)	Failure to make reports required under sec. 1202	588				
6652(l)	Failure to file Form 8806-IRC sec 6043(c)	649				
6653	Willful failure to pay, evade or defeat stamp tax	574				
6673 (a)	Sanctions and costs awarded by Tax Court	643				
6673 (b)	Sanctions and costs awarded by other courts	644				
6674	Fraudulent statement or willful failure to furnish statement to employee-IRC sec. 6051 or 6053(b)	575				
6682	False Information on Forms W-4 / W-9	616				
6697	Penalty with respect to tax liability of regulated investment company	582				
6702(a)	Frivolous tax return - Form 1040 Dated 02222016	666	1	\$5,000.00	0	
6702(b)	Penalty for specified frivolous submissions	543				

Remarks:

ARG 44. straight to Penalty

Signature Date 02/14/2016

10a. Originator signature JERRICA HOPE	10b. Date submitted 7/22/2016	10c. Phone (801) 620-2133	10d. Organization Code
11a. Manager signature 	11b. Date signed 7-26-16	12a. Terminal operator	12b. Date input