

Form **4549**
(January 2019)

Department of the Treasury-Internal Revenue Service

Report of Income Tax Examination Changes

Name and address of taxpayer		Taxpayer identification number	Return form number
J.			1040
		Person with whom examination changes were discussed.	Name and title
1. Adjustments to income		Period Ended 12/31/2015	Period Ended Period Ended
a. Nonemployee Compensation		2,100.00	
b. Wages - Tips - Other Compensation		192,309.00	
c. SE AGI Adjustment		(28.00)	
d. Standard Deduction		(6,300.00)	
e. Exemptions		(4,000.00)	
f.			
g.			
h.			
i.			
j.			
k.			
l.			
m.			
n.			
o.			
p.			
2. Total adjustments		184,081.00	
3. Taxable income per return or as previously adjusted		0.00	
4. Corrected taxable income		184,081.00	
Tax method		TAX RATE	
Filing status		Single	
5. Tax		44,614.00	
6. Additional taxes/Alternative minimum tax			
7. Corrected tax liability		44,614.00	
8. Less credits			
a.			
b.			
c.			
d.			
9. Balance (line 7 less lines 8a through 8d)		44,614.00	
10. Plus other taxes			
a. Self Employment Tax		56.00	
b.			
c.			
d.			
11. Total corrected tax liability (line 9 plus lines 10a through 10d)		44,670.00	
12. Total tax shown on return or as previously adjusted		0.00	
13. Adjustments to:			
a.			
b.			
c.			
14. Deficiency-Increase in tax or (overassessment-decrease in tax) (line 11 less line 12 adjusted by lines 13a through 13c)		44,670.00	
15. Adjustments to prepayment credits - increase(decrease) See Other Info Sec		7,293.00	
16. Balance due or (overpayment) - (line 14 adjusted by line 15) (excluding interest and penalties)		37,377.00	

The Internal Revenue Service has agreements with state tax agencies under which information about federal tax, including increases or decreases, is exchanged with the states. If this change affects the amount of your state income tax, you should amend your state return by filing the necessary forms.

You may be subject to backup withholding if you underreport your interest, dividend, or patronage dividend income you earned and do not pay the required tax. The IRS may order backup withholding (withholding of a percentage of your dividend and/or interest payments) if the tax remains unpaid after it has been assessed and four notices have been issued to you over a 120-day period.

Name of taxpayer

Taxpayer identification number

Return form number

Name Of Taxpayer:		09/09/2019
Identification Number:	Total	20,30.00

2015 - Form 6251 - Continuation, Tax Computation Using Maximum Capital Gain Rates

1. Amount from Form 6251 report, line 7 (If FEIT worksheet for AMT was used, enter amount from line 3 of that worksheet instead)	159,576.00
2. Amount from line 6 Qualified Dividends and Capital Gain Tax Worksheet or line 13 Schedule D Tax Worksheet (refigured for AMT)	0.00
3. Amount from Schedule D line 19 (refigured for AMT)	0.00
4. Amount from line 2 if no Schedule D worksheet; otherwise, the smaller of the sum of line 2 and line 3 or Schedule D worksheet line 10 (refigured for AMT)	0.00
5. Smaller of line 1 or line 4	0.00
6. Subtract line 5 from line 1	159,576.00
7. Multiply line 6 by 26% and subtract \$0 from the result	41,490.00
8. Enter amount based on filing status	37,450.00
9. Amount from line 7 Qualified Dividends and Capital Gain Tax Worksheet or amount from line 14 Schedule D Tax Worksheet, whatever applies (as figured for regular tax). If neither worksheet applies, use taxable income (but not less than zero). If Form 2555 was filed, see instructions	184,081.00
10. Subtract line 9 from line 8 (if zero or less, enter zero)	0.00
11. Smaller of line 1 or line 2	0.00
12. Smaller of line 10 or line 11; This amount is taxed at 0%.	0.00
13. Subtract line 12 from line 11	0.00
14. Enter amount based on filing status	413,200.00
15. Amount from line 10	0.00
16. Amount from line 7 Qualified Dividends and Capital Gain Tax Worksheet or amount from line 19 Schedule D Tax Worksheet, whatever applies (as figured for regular tax). If neither worksheet applies, use taxable income (but not less than zero). If Form 2555 was filed, see instructions	184,081.00
17. Add lines 15 and 16	184,081.00
18. Subtract line 17 from line 14 (if zero or less, enter zero)	229,119.00
19. Smaller of line 13 or line 18	0.00
20. Multiply line 19 by 15%	0.00
21. Add lines 12 and 19	0.00
22. Subtract line 21 from line 11	0.00
23. Multiply line 22 by 20%	0.00
24. Add lines 6, 21, and 22	0.00
25. Subtract line 24 from line 1	0.00
26. Multiply line 25 by 25%	0.00
27. Total of lines 7, 20, 23, and 26	41,490.00
28. Multiply line 1 by 26% and subtract \$0 from the result	41,490.00
29. Smaller of line 27 or line 28. Enter here and on line 8 of Form 6251 report	41,490.00

FORM 5564 (Rev. June 1992)	Department of the Treasury --- Internal Revenue Service NOTICE OF DEFICIENCY - WAIVER	Symbols Ogden 4622
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Name and Address of Taxpayer(s) J. %JOHN D FAUCHER 2945 TOWNSGATE RD STE 200 WESTLAKE VILLAGE, CA 91361-5866500	November 12, 2019 i6
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Kind of Tax INDIVIDUAL INCOME	<input checked="" type="checkbox"/> Copy to Authorized Representative JOHN D FAUCHER
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Tax Year Ended DECEMBER 31, 2015	DEFICIENCY		
	Increase in Tax	\$44,670.00	Penalties
	IRC Section 6651(a)(1)		8,409.83
	IRC Section 6654(a)		658.57
	IRC Section 6651(a)(2)		7,662.29



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I consent to the immediate assessment and collection of the deficiencies (increase in tax and penalties) shown above, plus any interest. Also, I waive the requirement under section 6532(a)(1) of the Internal Revenue Code that a notice of claim disallowance be sent to me by certified mail for any overpayment shown on the attached report. I understand that the filing of this waiver is irrevocable and it will begin the 2-year period for filing suit for refund of the claims disallowed as if the notice of disallowance had been sent by certified or registered mail.

Signature		Date
		Date
	By	Title

Note: If you consent to the assessment of the deficiencies shown in this waiver, please sign and return this form to limit the interest charge and expedite our bill to you. Please do not sign and return any prior notices you may have received. Your consent signature is required on this waiver, even if fully paid.

Your consent will not prevent you from filing a claim for refund (after you have paid the tax) if you later believe you are so entitled; nor prevent us from later determining, if necessary, that you owe additional tax; nor extend the time provided by law for such action.

If you later file a claim and the Service disallows it, you may file suit for refund in a District Court or in the United States Claims Court, but you may not file a petition with the United States Tax Court.

Who Must Sign: If you filed jointly, both you and your spouse must sign. Your attorney or agent may sign this waiver provided that action is specifically authorized by a power of attorney which, if not previously filed, must accompany this form.

If this waiver is signed by a person acting in a fiduciary capacity (for example, an executor, administrator, or a trustee), Form 56, Notice Concerning Fiduciary Relationship, should, unless previously filed, accompany this form.

If you agree, please sign and return this form; keep one copy for your records.