Form **921-A** (Revised January 2001)

Department of the Treasury - Internal Revenue Service

Consent Fixing Period of Limitation On Assessment of Income and Profits Tax

(S-Corporation, Partnerships, Limited Liability Company, Trusts, Syndicates, Pools, Etc.)
For Allowance of Estimated Future Expense Liabilities Under Contract for Sale of Real Estate

In reply refer to:

Taxpayer Identification Number

profits tax purpose	the tentative allowance, in whole or in part, by es of the estimated cost of future improvements disposed of under contract by		her basis of certain real estate
a	(0.0		, whose address is
	(S-Corporation, Partnership, Limited Liability Company, T	rust, Syndicate, Pool, Etc.)	
	(Number, Street, City or Town, State, ZIP Cod	de)	, the undersigned taxpayer,
а	of the said		
(Shareholder,	Partner, Member,	(S-Corporation, Partnership	
Beneficiary, Ta	ax Matters Partner)	Company, Trust, Syndicate	s, P001, Etc.)
and the Commission	oner of Internal Revenue, hereby consent and	agree as follows:	
That the amount of	f any income or profits tax due under any retur	n or returns made by or or	n behalf of the above-named
taxpayer for the tax	xable year (or years)		
except that if a not then the time for m	s, or under prior revenue acts, may be assesse tice of a deficiency in tax is sent to said taxpay naking any assessment as aforesaid shall be e naking of an assessment is prohibited and for 6	er by certified or registered extended beyond the said of	d mail on or before said date,
YOUR SIGNATURE I	HERE —		(Date signed)
SPOUSE'S SIGNATU	JRE		 (Date signed)
TAXPAYER'S REPRE	ESENTATIVE		
SIGN HERE —			(Date signed)
ENTITY			
NAME —	(S-Corporation, Partnership, Limited	Liability Company, Trust, Syndica	ate, Pool, Etc.)
ENTITY OFFICER(S) SIGN HERE	(Shareholder, Partner, Member, Beneficiary, Tax Matters Partner)	(Title)	(Date signed)
—	(Shareholder, Partner, Member, Beneficiary. Tax Matters Partner)	(Title)	(Date signed)
INTERNAL REVENU	E SERVICE SIGNATURE AND TITLE		
(Division Executive Name - see instructions) (Division Executive Title		Title - see instructions)	
ВҮ			
(Authorized Official Signature and Title - see instructions)			(Date signed)

Instructions

If this consent is executed with respect to a year for which a JOINT RETURN OF A HUSBAND AND WIFE was filed, it must be signed by both unless one, acting under a power of attorney, signs as agent for the other.

If the taxpayer is a corporation, this consent must be signed with the corporate name followed by the signature and title of the officer(s) duly authorized to sign. It is not necessary that the corporate seal be affixed. The space provided for the seal is for the convenience of corporations required by charter or by the laws of the jurisdictions in which they are incorporated to affix their corporate seals in the execution of instruments.

This consent may be executed by the taxpayer's attorney or agent, provided this is specifically authorized by a power of attorney which, if not previously filed, must accompany this form.

Instructions for Internal Revenue Service Employees

Complete the Division Executive's name and title depending upon your division.

If you are in the Small Business /Self-Employed Division, enter the name and title for the appropriate division executive for your business unit (e.g., Area Director for your area; Director, Compliance Policy; Director, Compliance Services).

If you are in the Wage and Investment Division, enter the name and title for the appropriate division executive for your business unit (e.g., Area Director for your area; Director, Field Compliance Services).

If you are in the Large and Mid-Size Business Division, enter the name and title of the Director, Field Operations for your industry.

If you are in the Tax Exempt and Government Entities Division, enter the name and title for the appropriate division executive for your business unit (e.g., Director, Exempt Organizations; Director, Employee Plans; Director, Federal, State and Local Governments; Director, Indian Tribal Governments; Director, Tax Exempt Bonds).

If you are in Appeals, enter the name and title of the appropriate Director, Appeals Operating Unit.

The signature and title line will be signed and dated by the appropriate authorized official within your division.