Form **211-A** (April 2024)

Department of the Treasury - Internal Revenue Service State or Local Law Enforcement Application for Reimbursement for Original Information

Requesting agency name					
2. Address (number, street, and room or suite number)		City	State	ZIP code	
3. Contact person name	4. Contact person title 5		5. Telepho	5. Telephone number	
Individual Involved in Illegal Drug Rela	⊥ ated Activities <i>(or N</i>	Money Laundering in	n Connection with	such Activities)	
6. Name		7. SSN (las	7. SSN (last 4 digits) (if known)		
8. Address (number, street, and room or suite number)	City	State	ZIP code		
9. Summary of information provided to the IR	S (attach additional shee	 ts, if necessary)			
 Summary of costs incurred in your investi sheets if necessary) 	gation (including but not	limited to reasonable expo	enses, per diem, and ove	rtime) (attach additional	
11. Have any other reimbursements been red (2) above under any other program or arr laws, i.e., Federal and state equitable sha	angement including, bu				
Yes (if yes, attach copies of DAG-71, IRS Fo	rm 9061 or other claim fo	r an equitable share of ass	set forfeitures)		
12. Name of IRS employee to whom violation	was reported				
13. Title 14. Date violation reported (Month Day, Year					
14. Certification: The requesting certifies that	the above information	is true and accurate			
Signature	Title			Date	
The following	is to be completed	by the Internal Rev	venue Service		
Allowance of Reimbursement					
District	Sum recovered Amount of reimbur		Amount of reimburser	ment	
In consideration of the original information that revenue laws and which led to the collection payment of a reimbursement in the amount s	of taxes, penalties, and				
Signature of Service Center Director				Date	

Instructions for Form 211-A, State or Local Law Enforcement Application for Reimbursement for Original Information

General Information

- 1. This application is voluntary and the information requested enables us to determine and pay reimbursements.
- 2. Not providing the information requested may result in the suspension of the processing of this application.
- 3. Our authority for asking for the information on this form is derived from 26 U.S.C. 7624.
- 4. No reimbursement shall be paid to you in any case where the taxes recovered total less than \$50,000.
- 5. The term "taxes recovered" means additional taxes, penalties, and additions to tax collected with respect to illegal drug-related activities (or money laundering in connection with such activities), but not additional interest or criminal fines that may be collected.
- 6. The amount of the reimbursement payable is at the discretion of the IRS District Director or Service Center Director and shall be equal to the cost incurred in your investigation of the taxpayer (including but not limited to reasonable expenses, per diem, salary, and overtime) but not to exceed 10 percent of the sum recovered.
- 7. No reimbursement will be made for expenses incurred in the investigation of a taxpayer which have been reimbursed under any other program or arrangement including, but not limited to, Federal or state equitable sharing arrangements.
- 8. The reimbursement will be paid after collection from the taxpayer and after the expiration of the applicable period of limitations for filing a claim for refund by the taxpayer, unless adequate indemnification is provided.

Instructions

- 1. Submit this application to the Chief, Criminal Investigation Division of the Internal Revenue Service District in which the taxpayer is located as soon as practicable after submitting the information but not later than 30 days after the Service notifies you of the amount of taxes recovered as a result of the information submitted.
- 2. Include all of the information which you provided to the IRS. For an agency to be eligible for a reimbursement, the information provided must have substantially contributed to the recovery of the tax.