IRS PENALTY ENFORCEMENT AGAINST ALES

Understanding IRS Letter 5699, IRS Letter 226J, and IRS Notice 972CG

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In partnership with



Disclaimer

The materials and information contained herein are intended only to provide general information and in no way constitute legal advice. If you have specific questions or concerns, please consult legal counsel.

Finally, this presentation is current as of <u>July 8, 2021</u>, and the information contained herein is subject to change.

What is an ALE and What does ACA Require of ALEs?

Applicable Large Employer (ALE): Single employer or group of related employers who employed an average of at least 50 full-time employees (including FT equivalent employees) in the *prior* calendar year.

Employers who experienced workforce changes due to COVID-19 should revisit this calculation! **Employer Mandate:** Offer health coverage to at least 95% of full-time employees & dependents and offer minimum value/affordable coverage to full-time employees. ALEs who fail to comply risk exposure to employer shared responsibility penalties (Section 4980H).

Health Coverage Reporting: Report compliance (or lack thereof) with the employer mandate by completing Forms 1094-C/1095-C filing and distribution requirements each tax year. ALEs who fail to comply risk exposure to reporting penalties (Sections 6721 & 6722).

Employer Shared Responsibility Penalty Refresher

<u>The A Penalty</u>: ALE fails to offer MEC to 95% of FTEs and dependents, and one FTE enrolls in subsidized Exchange coverage.

2019 A Penalty: **\$2,500 (\$208.33/mo)** x total FTEs – pro rata share of 30 FTEs 2020 A Penalty: **\$2,570 (\$214.17/mo)**

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x total FTEs – pro rata share of 30 FTEs

2021 A Penalty: **<u>\$2,700 (\$225.00/mo)</u>** x total FTEs – pro rata share of 30 FTEs The B Penalty: ALE offers to 95%, but not MV or affordable (EE required contribution exceeds 9.83% of 2021 income), and one FTE enrolls in subsidized Exchange coverage.

2019 B Penalty: <u>\$3,750 (\$312.50/mo)</u> x each FTE receiving subsidy

2020 B Penalty: **<u>\$3,860 (\$321.67/mo)</u>** x each FTE receiving subsidy

2021 B Penalty: **<u>\$4,060 (\$338.33/mo)</u>** x each FTE receiving subsidy

Failure to File or Furnish Penalty Refresher

Example: If an ALE failed to file 1
Form 1094-C and 100 Forms 1095-C
with the IRS and distribute 100
Forms 1095-C to employees, the
total penalty exposure is <u>\$56,280.</u>

<u>\$110</u> if corrected after 30 days but before Aug. 1</u>

<u>\$50</u> if corrected within 30 days

\$280 if no corrections are made

<u>\$560</u> if acted with intentional disregard



Watch out for double penalties – they apply per form filed with the IRS and furnished to individuals. How Does the IRS Enforce ALE Obligations?

- IRS Letter 5699
- IRS Notice 972CG
- IRS Letter 226J

Department of the Treasury Internal Revenue Service

IRS Letter 5699



We think you are an ALE, so where are your forms?

Reporting Penalty Enforcement for Non-Filer ALEs Begins with IRS Letter 5699



Our records show you may have been an Applicable Large Employer (ALE) in 2017 and therefore required to file certain information returns for 2017. We haven't received those returns for the taxpayer ID number shown at the top of this letter.

Internal Revenue Code (IRC) Section 6056 requires employers that are ALEs to file information returns with the IRS and provide statements to their full-time employees relating to the health insurance coverage, if any, the employer offered its full-time employees. ALEs meet these reporting requirements using Form 1094-C, Transmittal of Employer-Provided Health Insurance Offer and Coverage Information Return, and Form 1095-C, Employer-Provided Health Insurance Offer and Coverage.

How to know if you're required to file

In general, an employer is an ALE for a year (and thus subject to the reporting requirements) if it had an average of 50 or more full-time employees (including full-time equivalent employees) during the preceding calendar year. For this purpose, there are specific definitions of full-time employee and full-time equivalent employee, exceptions for certain seasonal workers and employees with TRICARE or Veterans Administration health coverage, and specific rules for employers that are members of an aggregated group under IRC §§ 414(b), (c), (m) or (o). For more information on these rules and other information about how to determine if you were an ALE in 2017, visit the ACA Information Center for Applicable Large Employers (ALEs) at www.irs.gov, keyword "ALEs."

Employers required to file at least 250 Forms 1095-C generally must file electronically. Other employers may file either electronically or on paper. You can find the 2017 Forms 1094-C and 1095-C and Instructions for Forms 1094-C and 1095-C, which includes information on how to file returns with the IRS, at www.irs.gov (at the top of the screen select "Forms & Pubs," under the "Browse" heading choose "List of Prior Year Forms & Pubs," and in the "Find" box enter "1094-C" or "1095-C," a applicable).

What you must do

Check the box below that applies and mail your response to us to the address shown at the top of this letter within 30 days from the date of this letter.

- I was an ALE for calendar year 2017 and already filed Form 1094-C and Forms 1095-C with the IRS using the following name _______ and employer identification number (EIN) ______ on date _______
- □ I was an ALE for calendar year 2017 and have included my Form 1094-C and Forms 1095-C with this letter. (Do not use this box if you are required to file electronically.) (Explain reasons for late filing below under "Other")
- □ I was an ALE for calendar year 2017 and will file my Form 1094-C and Forms 1095-C with the IRS using the following name _______ and EIN

by date ______ (If more than 90 days from the date of this letter, explain below under "Other") (Explain reasons for late filing below under

"Other")

- I was not an ALE for calendar year 2017. Explain reasons below under "Other".
- Other (Indicate below or attach a statement explaining why you haven't filed the required returns and any actions you plan to take.)

IRS Non-Filer Penalty Enforcement Process





ALEs required to file electronically who receive Letter 5699 should ensure they are working with a vendor who can file for prior tax years & does not overreport.

IRS Letter 972CG



We received your forms, but you owe a penalty due to a filing failure.

	HIRS Department of the Treasury Internal Revenue Service PHILADELPHIA, PA 19255-0633	IF YOU WRITE OR CALL US, REFER TO THIS INFORMATION: NOTICE NUMBER: 972CG BOD CODE: SBS	RESPONSE TO PROPOSED PENALTY FOR YOUR TAX YEAR 2017 INFORMATION RETURNS
	000603.637498.272374.23232 2 km 0.428 1 111 1p11116 1 1p1 1 1p1 1 1p1 1 1 1 1 1 1	CODY ON OF	PLEASE CHECK THE BOX THAT APPLIES TO YOU AND RETURN THIS PAGE IN THE ENCLOSED ENVELOPE. PLEASE REMEMBER TO INCLUDE THE APPROPRIATE MAILING STUB AND INSERT IT IN THE ENCLOSED ENVELOPE SO THE ADDRESS APPEARS IN THE ENVELOPE WINDOW.
		FOR INFORMATION, PLEASE CALL: 1-866-455-7438	PLEASE CHECK ONLY ONE BOX:
		FOR YOUR 2017 INFORMATION RETURNS ON REQUIRED	() (A) TOTAL AGREEMENT WITH THE PROPOSED PENALTY - I CONSENT TO THE IMMEDIATE ASSESSMENT AND COLLECTION OF THE PENALTY AMOUNT SHOWN IN THIS NOTICE, PLUS ANY APPLICABLE INTEREST. I HAVE () HAVE NOT () ENCLOSED A PAYMENT.
NEW: IRS USING NOTICE	CHARGED UNTIL AFTER YOU RECEIVE A BI		SIGNATURE DATE .
972CG TO ENFORCE	PLEASE READ THIS NOTICE CAREFUL SHOULD DO IF YOU AGREE OT DISAG IF YOU DON'Y TRESPOND TO THIS NO "EXPLANATION OF PENALTY" SECTIO HOW YOU S	T EXPLAINS THE PROPOSED PENALTY AND WHAT YOU TH THE PROPOSAL. THIS PENALTY WILL BE CHARGED THE PROPOSED PENALTY IS EXPLAINED UNDER THE RESPOND TO THIS NOTICE	
6721/6722 PENALTIES	PLEASE REVIEW YOUR RECORDS RE	TO FILING THE RETURNS LISTED ON PAGE 2. The proposed penalty, do all of the following:	() (B) PARTIAL AGREEMENT WITH THE PROPOSED PENALTY - I AGREE WITH PART OF THE PROPOSED PENALTY SHOWN IN THIS NOTICE. I HAVE ATTACHED A SIGNED STATEMENT
OR LATE FILING, FAILURE	 CHECK BOX (A) ON THE RES SIGN AND DATE THE CONSEN ENCLOSE YOUR PAYMENT IN UNITED STATES TREASURY. ENCLOSE THE APPROPRIATE ENSUPE THE ADPRESS ON TH 	PAGE OF THIS NOTICE. ENALTY ASSESSMENT. Make your check or money order payable to the s stub to indicate whether a payment is included. Appears in the envelope witnow.	AND SUPPORTING DOCUMENTS EXPLAINING WHICH ITEMS I DISAGREE WITH AND WHY I DISAGREE, OR WHY I FEEL YOU SHOULDN'T CHARGE PART OF THE PROPOSED PENALTY. I HAVE () HAVE NOT () ENCLOSED A PAYMENT.
TO FILE ELECTRONICALLY,	IF YOU DON'T AGREE WITH ALL ALL OR PART OF THIS PENALTY 1. CHECK BOX (B) OR (C) ON	T OF OUR FINDINGS OR BELIEVE YOU HAVE A REASON NOT BE CHARGED, DO ALL OF THE FOLLOWING: SPONSE PAGE OF THIS NOTICE.	() (C) TOTAL DISAGREEMENT WITH THE PROPOSED PENALTY - I DISAGREE WITH THE ENTIRE PROPOSED PENALTY SHOWN IN THIS NOTICE. I'VE ATTACHED A SIGNED STATEMENT AND SUPPORTING DOCUMENTS EXPLAINING WHY THE PROPOSED PENALTY IS INCORRECT, OR AN ACCEPTABLE REASON WHY YOU SHOULDN'T CHARGE THIS PROPOSED PENALTY.
AND TIN MISMATCH	 ENCLOSE A SIGNED STATEME INCLUBE ANY SUPPORTING D IF YOU AGREE TO PART OF OR MONEY ORDER PAYABLE T ENCLOSE THE APPROPRIATE RETURN THE RESPONSE PAGE ENCLOSED ENVELOPE CENSUR INCLUBE A TELEPHONE NUMB 	ATNING WHY YOU DISAGREE." TS YOU WISH TD HAVE CONSIDERED. NALTY, ENCLOSE YOUR PAYMENT. MAKE YOUR CHECK UNITED STATES TREASURY. 5 STUB TO INDICATE WHETHER A PAYMENT IS INCLUDED. IS NOTICE WITH YOUR STATEMENT AND DOCUMENTS IN THE ADDRESS APPEARS IN THE ENVELOPE WINDOWS. PLEASE CLUDING THE AREA CODE, AND THE BEST TIME TO CALL.	TELEPHONE NUMBER: () BEST HOURS TO CALL: (INCLUDE AREA CODE)
	IT'S IMPORTANT THAT YOUR COMPLE OF THIS NOTICE. YOU HAVE 60 DA IFNOU DO NOT RESPOND WITHIN. TH FROM THE CHATEE OF THE "NOTICE OF FULL.	PONSE BE RECEIVED WITHIN 45 DAYS FROM THE DATE RESPOND IF YOU LIVE OUVISIDE THE UNITED STATES. IOD, YOU MILL RECEIVE A BILL CALLED "NOTICE OF YOUNSED PERATY. INFREST VILL BE CHARGED YO CHARGE" TO THE DANTE RAYMENT IS RECEIVED IN	
	IF YOU HAVE ANY QUESTIONS ABOUT ON THIS NOTICE. IF YOU PREFER, GENERAL INFORMATION ABOUT THIS THIS NOTICE IS MOST FAMILIAR WI	NOTICE, YOU MAY WRITE TO THE RETURN ADDRESS NY CALL THE TELEPHONE NUMBER SHOWN ABOVE FOR HOWEVER, THE OFFICE AT THE ADDRESS SHOWN ON CASE.	PLEASE DO NOT DETACH

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> \$200k in late filing penalties proposed for 2017 Tax Year, in addition to employer shared responsibility penalties!

IRS Filing Failure Penalty Enforcement Process



Important Tips for Responding to IRS Notice 972CG

- 1. You can request an extension, but employers should avoid if possible.
- 2. Send all correspondence by mailing with tracking to confirm timely delivery.
- 3. Response must address good faith and/or reasonable cause relief regulations.
- 4. For phone calls with IRS, persistence is required and reference "civil penalty".

IRS Letter 226J



We received your forms, but you owe a penalty due to the offer of coverage reported.

Employer Shared Responsibility Penalty Enforcement Begins with IRS Letter 226J



		n orm	ation Reported t	ESRP Summar	yrabic			
Month	a. Form 1094- Part III, Col Minimum essential cove offer indical offered to at 1 95%	C. rage	b. Form 1094-C, Part III, Col (b) Full-time employee count for ALE member	c. Allocated reduction of full- time employee count for IRC Section 4980H(u)	d. Count of assessable full-time employees with a PTC for IRC Section 4980H(a)	e. Count of assessable full- time employees with a PTC for IRC Section 4980H(b)	f. Applicable IRC Section 498014 provision	g. Monthly ESR amount
January	No		349	- 30	4	1	4980H(a)	\$ 60,078.3
February	No		370	.30	5		4980H(a)	\$ 64,033.3
March	No		480	.30	7	12. 12.	4980H(a)	\$ 84,750.0
April	No	-	692	-30	11	-	4980H(a)	\$ 124,676.6
May	No	1	1,051	-30	10		4980H(a)	\$ 192.288.3
June	No	1	1,236	30	11	1	4980H(a)	\$ 227,130.0
July	No	1	1,408	30	12	-	4980H(a)	\$ 259.523.3
August	No		1.504	30	18	-	4980H(a)	\$ 277,603.3
September	No	1	1,727	30	19	10	4980H(a)	\$ 319,601.6
October	No		1,899	30	19		4980H(a)	\$ 351,995.0
November	No		2,027	30	21	4	4980H(a)	\$ 376,101.6
December	No		2,113	30	21	<u> </u>	4980H(a)	\$ 392.298.3
						Total	Proposed ESRP	\$ 2,730.079.9

Form **14765** (November 2020) Department of the Treasury - Internal Revenue Service Employee Premium Tax Credit (PTC) Listing

Any month not highlighted is a month that the employee received a PTC and no safe harbor or other relief from the ESRP was applicable. The employee is an assessable fulltime employee for that month. Any month that shows XF, XG, or XH is due to a determination that you do not qualify for the safe harbor being claimed (2F, 2G, or 2H). If you still think the safe harbor applies, provide your computation with your written request for reconsideration.

Employer name	Emplover ID number	Tax vear

Addressing Affordability in the 226J Response

- If Form 14765 shows XF, XG, or XH, it means the IRS has determined that coverage offered did not meet the affordability safe harbor reported.
- Employers contesting this determination, must show their work!

ESRP Enforcement Process



What is on the horizon for IRS enforcement?





Thank you for joining today's presentation!

Questions? Please visit <u>www.eligibilitytrackingcalculators.com</u> or contact us at <u>counsel@eligibilitytrackingcalculators.com</u>

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