

Department of the Treasury — Internal Revenue Service  
**COOPERATIVE AGREEMENT**

**IRS Volunteer Income Tax Preparation and Outreach Programs Privacy Act Notice**

**Privacy Act Notice**— The Privacy Act of 1974 requires that when we ask for information we tell you our legal right to ask for the information, why we are asking for it, and how it will be used. We must also tell you what could happen if we do not receive it, and whether your response is voluntary, required to obtain a benefit, or mandatory. Our legal right to ask for information is 5 U.S.C. 301. We are asking for this information to assist us in contacting you relative to your interest and/or participation in the IRS volunteer income tax preparation and outreach programs. The information you provide may be furnished to others who coordinate activities and staffing at volunteer return preparation sites or outreach activities. The information may also be used to establish effective controls, send correspondence and recognize volunteers. Your response is voluntary. However, if you do not provide the requested information, the IRS may not be able to use your assistance in these programs.

This **Cooperative Agreement** is entered into by the Internal Revenue Service, Department of the Treasury, United States of America, hereinafter referred to as IRS, and

\_\_\_\_\_  
*Name of Applicant*

hereinafter referred to as sponsor/agreement. This agreement is conditioned upon the appropriation of funds by Congress for the Tax Counseling for the Elderly Program (TCE).

The sponsor agrees to operate a Tax Counseling for the Elderly Program in conformity with the following:

1. Proposed Program Plan;
2. Program Requirements (Chapter IV of the Application Package);
3. Standard Form 424;
4. Assurances and Certifications;
5. Section 163 of the Revenue Act of 1978, Public Law No. 95-600, 92 Stat. 2810, November 6, 1978;
6. The regulations published in the Federal Register at (44 F.R. 72113, December 13, 1979) adding a new subchapter H to the Internal Revenue Service's Statement of Procedural Rules (26 C.F.R. Part 601);
7. Office of Management and Budget Circular No. A-110 (64 F.R. 54926, September 30, 1999) and subsequent amendments, revisions, and replacement documents, and OMB proposed Circular No. A-133;
8. All additional applicable statutory requirements, and all additional applicable requirements in Office of Management and Budget Circulars, Department of the Treasury Circulars and Federal Management Circulars;
9. The common rule on nonprocurement debarment and suspension, adopted by the Department of the Treasury (31 C.F.R. Part 19);
10. The common rule on government-wide requirements for Drug-Free Workplace (Grants), as published in the Federal Register (54 F.R. 4946, January 31, 1989) and adopted by the Department of the Treasury (31 C.F.R. Part 19, Sections 19.600 *et seq.*).

**Cooperative Agreement Period:** The Cooperative Agreement covers the period from October 1, 2008, to September 30, 2009, pending approval of the above named sponsor's proposal.

NOTE: If expenses are incurred prior to approval, and the grant is later denied, all costs incurred will be the responsibility of the Sponsor.

**Maximum Amount of Funds Available from Internal Revenue Service for Expense Reimbursement:**

The Maximum amount of funds available from the Internal Revenue Service under the Cooperative Agreement is \_\_\_\_\_ . The availability of funds is conditional upon the appropriation of funds by Congress. This amount may be increased in writing only by the Internal Revenue Service, SPEC, 5000 Ellin Road, SE:W:CAR:SPEC:FO:OA, C4-168 NCFB, Lanham, MD 20706. No additional expense reimbursements or other payments shall be made by the Internal Revenue Service unless the maximum amount of funds set forth above has been increased in writing by the Director, Field Operations, Stakeholder Partnerships, Education and Communication, Wage and Investment Division.

**Approved by an Authorized Representative of the Program Sponsor by:**

**Approved for the Internal Revenue Service by:**

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Leslye Baronich

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Title (Please Print)

\_\_\_\_\_  
Director, Field Operations

\_\_\_\_\_  
Stakeholder Partnerships, Education and Communication

\_\_\_\_\_  
Title (Please Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date