

Area: SMALL BUSINESS/SELF EMPLOYED AREA #4
 Lien Unit Phone: (800) 913-6050
 Serial Number: 470718108

For Optional Use by Recording Office
 2008 065058
 RECEIVED
 MICHELLE A. STOWN
 RECORDER
 2008 SEP 17 AM 8:59

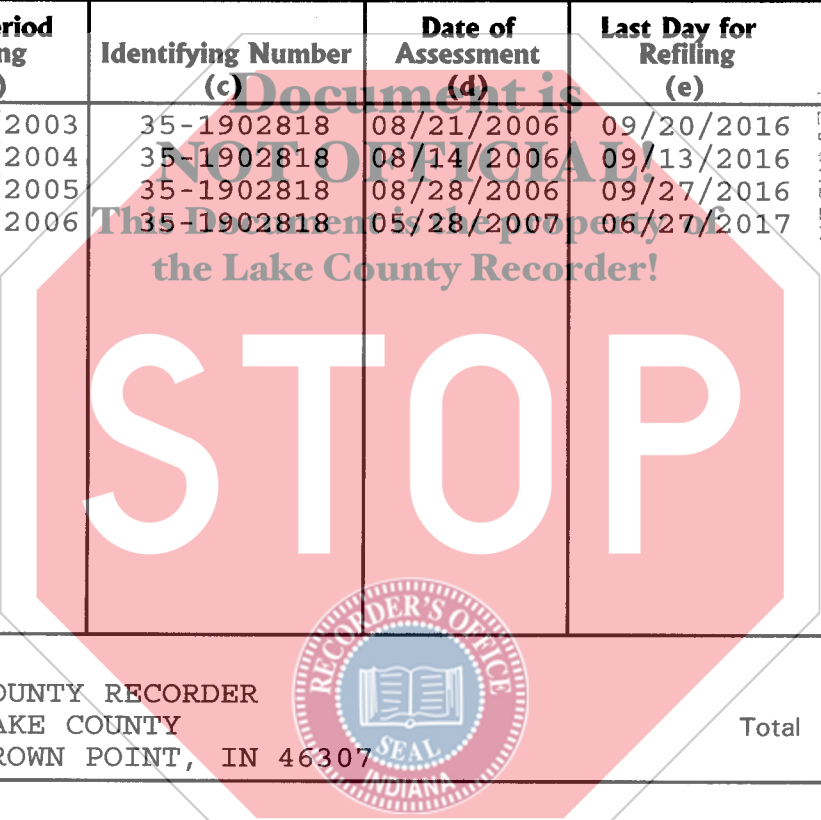
As provided by section 6321, 6322, and 6323 of the Internal Revenue Code, we are giving a notice that taxes (including interest and penalties) have been assessed against the following-named taxpayer. We have made a demand for payment of this liability, but it remains unpaid. Therefore, there is a lien in favor of the United States on all property and rights to property belonging to this taxpayer for the amount of these taxes, and additional penalties, interest, and costs that may accrue.

Name of Taxpayer LAKE COUNTY MINORITY HEALTH COALITION INV

Residence 1614 W 5TH AVE
 GARY, IN 46404-1507

IMPORTANT RELEASE INFORMATION: For each assessment listed below, unless notice of the lien is refiled by the date given in column (e), this notice shall, on the day following such date, operate as a certificate of release as defined in IRC 6325(a).

Kind of Tax (a)	Tax Period Ending (b)	Identifying Number (c)	Date of Assessment (d)	Last Day for Refiling (e)	Unpaid Balance of Assessment (f)	
990	06/30/2003	35-1902818	08/21/2006	09/20/2016	3938.35	
990	06/30/2004	35-1902818	08/14/2006	09/13/2016	4081.05	
990	06/30/2005	35-1902818	08/28/2006	09/27/2016	5720.00	
990	06/30/2006	35-1902818	05/28/2007	06/27/2017	3880.00	
Place of Filing					Total \$	17619.40
COUNTY RECORDER LAKE COUNTY CROWN POINT, IN 46307						



This notice was prepared and signed at CHICAGO, IL, on this, the 05th day of September, 2008.

Signature: *R. A. Mitchell*
 for MS. J M WALKER
 Title: REVENUE OFFICER
 (219) 736-4320
 24-09-1858