Application

Fc	orm W-12	IRS Paid Preparer Tax				
Department of the Treasury		Identification Number (PTIN) Registration				
Internal Revenue Service						
1 Name (Print or Type)		Last name First name and initial				
2	Mailing Address	Street address. Use a P.O. box number only if the post office does not deliver mail to your street address.				
		City or town, state/province, and, if outside U.S., country. Include ZIP or postal code where appropriate. In not abbreviate name of country.				
3	SSN and Date of	SSN Date of birth (month, day, year)				
	Birth					
4	Email Address	Enter the email address that should be used to contact you				
5	Address of Your	Street address. Use a P.O. box number only if the post office does not deliver mail to your street address.				
	Last Individual					
	Income Tax	City or town, state/province, and, if outside U.S., country. Include ZIP or postal code where appropriate.				
	Return Filed	not abbreviate name of country.				
6	Federal Tax Compliance	Are you current on both your individual and business federal taxes? Yes No				
	compliance	If no, provide an explanation.				
7	Past Felony Convictions					
		If yes, provide the jurisdiction (state/country) in which you were convicted, and an explanation.				

Business Name	Doing Business As (DBA) EIN	EFIN		
and Identification				
Numbers				
Business	Street address. Do not enter a P.O. box.	<u>^</u>		
Physical				
Address				
	City or town, state/province, and, if outside l not abbreviate name of country.	U.S., country. Include ZIP or postal code where appropriate. D	0	
LO Business Phone	Business phone number (domestic)	Business phone number (international)	v	
Number	() <u> </u> - <u> </u>	+		
11 Business	If you are the owner, corporate officer, or ma	naging member, enter your business website address		
Website Address				
L2 CAF Number	Enter any central authorization file (CAF) nu	mber(s) you may have		
L3 Professional	Check all that apply:			
Certifications		h state(s): BAR Number:	-	
		- Licensed in which state(s):		
	Enrolled Agent-Registration	i Number		
	Enrolled Retirement Plan A	gent		
	 Certified Acceptance Agent 	-		
		er-State(s)License Number(s)		
	□ None		-	
14 Fee		The fee is nonrefundable. Full payment must be included wit your check or money order payable to IRS Tax Pro PTIN Fee \$50+		
	Under penalties of perjury, I declare that I h and belief, it is true, correct, and complete	have examined this application and to the best of my knowledg e. Further, I certify that I will use my preparer tax identificatio claims for refund that I prepare for compensation.		
Sign Here	Your Signature	Date (MM, DD, YYYY)		
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