



Reporting Agent Authorization (State Limited Power of Attorney & Tax Information Authorization)

Table with 3 columns: 1 Co/Code, 2 Branch, 3 Federal ID Number

4 If you are a seasonal employer, check here []

5 TAXPAYER LEGAL NAME (Use all capital letters. Include spaces, ampersands, and hyphens. Do not enter any other punctuation.)

6 DBA NAME (Use all capital letters. Include spaces, ampersands, and hyphens. Do not enter any other punctuation.)

7 Address (number, street, and room or suite no.) City or town, state, and ZIP code

REPORTING AGENT: ADP Tax Services, 400 West Covina Boulevard, San Dimas, CA 91773, ID # 22-3006057, 800/235-7212

Authorization of Reporting Agent to Sign and File Returns

8 Use the entry lines below to indicate the tax return(s) to be filed by the Reporting Agent. Enter the beginning year for annual tax returns or beginning quarter for quarterly tax returns.

940 Tax Year, 941 Qtr / Yr, 940-PR Tax Year, 941-PR Qtr / Yr, 941-SS Qtr / Yr, 943 Tax Year, 943-PR Tax Year, 944 Tax Year, 944-PR Tax Year, 945 Tax Year

Authorization of Reporting Agent to Make Deposits and Payments

9 Use the entry lines below to enter the starting date (the first month and year) for any tax return(s) for which the Reporting Agent is authorized to make deposits or payments.

940 Mo / Yr, 941 Mo / Yr, 943 Mo / Yr, 944 Mo / Yr, 945 Mo / Yr

Disclosure of Information to Reporting Agent

- 10a Check here to authorize the Reporting Agent to receive or request duplicate copies of tax information, notices, and other communications from the IRS, related to the authorization granted on Line 8 and/or Line 9 [X]
10b Check here if the reporting agent also wants to receive copies of notices from the IRS [X]

Form W-2 Series or Form 1099 Series Disclosure Authorization

11 The Reporting Agent is authorized to exchange otherwise confidential taxpayer information with the IRS, including responding to certain IRS notices relating to the Form W-2/1099 series information returns. This authority is effective for calendar years beginning:

W-2 Tax Year, 1099 Tax Year

State and Local Authorization

12 By checking the box to the right and signing in Box 13 below, the taxpayer identified above hereby appoints ADP as Reporting Agent and grants ADP a limited power of attorney with the authority to sign and file employment tax returns and make deposits electronically, on magnetic media, or on paper for all state and local jurisdictions in which the taxpayer is required to file tax returns and make tax deposits. [X]

This authorization shall include all applicable state and local forms and shall commence with the tax period indicated and shall remain in effect through all subsequent periods until either revoked by the taxpayer or terminated by ADP. Unless the taxpayer is required to file or deposit electronically, ADP will, in its discretion, file and make deposits on the taxpayer's behalf in one of the filing methods: electronic, magnetic media, or paper. / Qtr / Yr

Authorization Agreement

I understand that this agreement does not relieve me, as the taxpayer, of the responsibility to ensure that all tax returns are filed and that all deposits and payments are made. If Line 8 is completed, the Reporting Agent named above is authorized to sign and file the return indicated, beginning with the quarter or year indicated. If any starting dates on line 9 are completed, the Reporting Agent named above is authorized to make deposits and payments beginning with the period indicated. Any authorization granted remains in effect until it is revoked by the taxpayer or Reporting Agent. I am authorizing the IRS to disclose otherwise confidential tax information to the reporting agent relating to the authority granted on Line 8 and/or Line 9 including disclosure required to process Form 8655. Disclosure authority is effective upon signature of the taxpayer and IRS receipt of Form 8655. The authority granted on Form 8655 will not revoke any Power of Attorney (Form 2848) or Tax Information Authorization (Form 8821) in effect.

13 Signature of Taxpayer or Authorized Representative

I certify that I have the authority to execute this form and authorize disclosure of otherwise confidential information on behalf of the taxpayer.

Name (Required), Title, Signature (Required), Date (Required)

INSTRUCTIONS: Only one Limited Power of Attorney (LPOA) per federal ID number is required. Do not submit multiple LPOAs for a federal ID number. However, if the taxpayer uses more than one federal ID number, a separate LPOA must be submitted for each.

1. **Company Code:** Enter the client's three-or four-character company code.
2. **Branch:** Enter the client's two-character region branch code.
3. **Federal ID Number:** Enter the nine-digit Employer Identification Number (EIN) issued by the IRS to each employer. The number provided by the client must be verified against one of the following sources, in order of priority: 1) Form 941 original or copy with pre-printed name and address; 2) CP129, EFTPS "Mandate Letter"; 3) CP575 Verification of an EIN; 4) Internet SS-4 IRS screen print of issued EIN; 5) CP148 Notice of Name and/or Address change; 6) CP136 or 137, Frequency Notification; 7) Pre-printed Form 9779, Business Enrollment Form (for EFTPS); 8) FTD Coupon, (Form 8109), or FTD Address Change (Form 8109C) with a revision date of 01-94 or later.
4. **Seasonal Employer:** Mark this box if this client is a seasonal employer. (Seasonal is defined as less than four 941s per year.)
5. **Taxpayer Legal Name:** Enter the client's legal name in ALL CAPITAL LETTERS. This must match the name on the IRS file. The first name line on an IRS source document listed in #3 above must be entered on the LPOA form. Only the first 35 characters of the first name line are used. Include spaces, ampersands, and hyphens; do not include other punctuation such as slashes, commas, or periods. Do not use the word THE as the first word unless it is followed by only one other word. Include legal/formal suffixes with individual names (MD, PHD, CPA, JR, SR, III, etc.), but *do not* include general/informal titles such as owner, accountant, attorney, etc. See examples below.
6. **DBA Name:** Enter the taxpayer's Doing Business As (DBA) or Trading As (TA) name, if one is used. Follow the same instructions as shown in #5 above, and see examples below. *Do not* enter DBA or TA on this line; show the *name only*.

Master's Plumbing and Air Conditioning Service

M A S T E R S P L U M B I N G A N D A I R C O N D I T I O N I N G

A&J Construction Co.

A & J C O N S T R U C T I O N C O

Sandra J. White, MD

Family Health Care

S A N D R A J W H I T E M D

Mary Smith-Bennett, Owner

DBA Mary's Bike Shop

M A R Y S M I T H - B E N N E T T

Murphy/Mason Realty, Inc.

M U R P H Y M A S O N R E A L T Y I N C

The Linden Co.

L I N D E N C O

The Linden

T H E L I N D E N

7. **Address:** Enter client's primary business location.
8. **Authorization of Reporting Agent to Sign and File Returns:** For 940, 940-PR, 943, 943-PR, 944, 944-PR, and 945, enter the first tax year (2007, 2008, etc.) ADP will start the annual filing. For forms 941, 941-PR and 941-SS, enter the quarter and year (4/07, 1/08, etc.). ADP will file this return for the first time.
9. **Authorization of Reporting Agent to Make Deposits and Payments:** For deposits, enter the first month of the quarter and year (1/06, 4/06, 7/06, and 10/06) ADP will make any deposit, regardless of the tax type provided.
- 10a. **Disclosure of Information to Reporting Agent:** These premarked boxes will allow ADP to receive a copy of notices and other communication from the IRS related to the authorization granted on Line 8 and/or Line 9. It also allows ADP to obtain verification of client name and/or FEIN by calling the IRS Practitioner Priority Services line (PPS) at (866) 860-4259.
- 10b.
11. **Form W-2 Series or Form 1099 Series Disclosure Authorization:** For W-2/1099, enter the first year ADP is authorized to discuss the W-2/1099 information with the IRS. (This includes Form 1099R and Form 1099-MISC.)
12. **State and Local Authorization:** Enter the quarter and year (4/07, 1/08, etc.), ADP will file this return for the first time.
13. **Signature of Taxpayer or Authorized Representative:** After reading the Authorization Agreement, an officer of the company must enter his/her name and title as appropriate and then sign and date the LPOA. (The sole proprietor of a business or the member of a partnership will not have a title to show here.) *The name, signature, and date must be entered.*

Federal Forms

- 940 Employer's Annual Federal Unemployment (FUTA)
- 940-PR Employer's Annual Federal Unemployment (FUTA) – Puerto Rico
- *941 Employer's Quarterly Federal Tax Return
- 941-SS Employer's Quarterly Federal Tax Return for American Samoa, Guam, Northern Mariana, and Virgin Islands
- 943 Employer's Annual Federal Tax Return for Agricultural Employees
- 943-PR Employer's Annual Federal Tax Return for Agricultural Employees – Puerto Rico
- *944 Employer's Annual Federal Tax Return
- *944-PR Employer's Annual Federal Tax Return – Puerto Rico
- 945 Employer's Quarterly Federal Tax Return for NW2 Employees

*Recommend marking both 941 and 944 for new and small employers.