Advisory Committee on Tax Exempt and Government Entities Membership Application

OMB Number 1545-1791

Complete this application and return it to the address below no later than Close of Business on <u>December 1, 2011</u>.

Internal Revenue Service

Tax Exempt and Government Entities

SE:T:CL/Penn Bldg Attn: Roberta B. Zarin

1111 Constitution Avenue, NW

Washington DC 20224

You may also FAX your application to	o: 202-283-9956.				
PART I – Applicant Information (Se	ome of the information requ	ested in Part I is requi	red to perform an F	BI background check)	
Name	Maiden name or o	Maiden name or other name(s) used Date(s) n		names were used	
Home street address				Home telephone number	
City		State		ZIP Code	
Date of birth (mm-dd-yyyy)	City of birth		State of birth		
Business name	I				
Business address			Job title		
City		State		ZIP Code	
O.Ly					
Business telephone number	Business FAX nur	nber	Email address	S	
Are you a federally registered lobbyis Yes No PART II – Applicant must complete PART III – Desired Skills and Quali Submit a short (one or two page) state to the following: Applying tax law knowledge related Experience in business management Experience establishing successfues to the following successfues the successfues the following successfues	e and submit Form 13775, ifications tement, including recent except d to employee plans, exemple ent and improvement. I strategic partnerships. hacro" viewpoint, and effective about these issues.	amples, addressing yout organizations, governoted with the second	ur specific skills an	ax exempt bonds.	
Attach a copy of your resume, includ addition, list professional credentials.					
PART V – Other IRS Councils/Com					
Have you ever been a member of the Art Advisory Panel, Electronic Tax A Program Advisory Committee? If so,	dministration Advisory Com	mittee, Tax Exempt Ac	dvisory Committee	or Information Reporting	
Councils/Committee name			Dates of Membership		

PART VI – Applicant Acknowledgement				
I certify that to the best of my knowledge and belief, all of my statements are true, correct, complete, and made in good faith.				
Applicant signature	Date signed			

PRIVACY ACT STATEMENT

The Privacy Act of 1974 requires that when we ask you for information about yourself, we state our legal right to do so, tell you 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 the information is Public Law 92-463 and Executive Order (E.O.) 9397. We are asking for the information in order to perform Federal income tax, FBI, and practitioner checks as required of all members and applicants to the Advisory Council/Committee.

Supplying the information is voluntary and not directly required by law, but facilitates the processing of your application for membership in the IRS Advisory Council/Committee. Requesting your social security number, which is solicited under authority of E.O. 9397, is also voluntary and no right, benefit, or privilege provided by law will be denied as a result of refusal to disclose it. However, not providing all or any part of the information may limit consideration of your application.

www.irs.gov