Form **12339** (April 2017)

Department of the Treasury - Internal Revenue Service

Internal Revenue Service Advisory Council Membership Application

OMB Number 1545-1791

Complete this application and return it to the address below no later than *Close of Business* on **June 16, 2017**. You may also FAX your application to: 855-811-8021.

Anna Millikan IRS National Public Liaison Office CL:NPL:P - Room 7559 1111 Constitution Ave, NW Washington, DC 20224

PART I – Applicant Information (So	me of the information reques	sted in Part I is requir	ed to perform an FBI	background check)	
Name	Maiden name or oth	Maiden name or other name(s) used		Date(s) 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					
Business address			Job title		
City		State		ZIP Code	
Business telephone number	Business FAX num	ber	Email address		
PART II – Applicant must complete	and submit Form 13775, T	ax Check Waiver, w	rith this form		
PART III – Desired Skills and Qualif	ications				
Submit a brief statement addressing y represent and how such dealings will statement which of the following subg Office of Professional Responsibility, on addition, submit a short (one or two they relate to the following: Applying tax law knowledge in the responsibility and the responsibility. Experience working in a multi-culture in Experience establishing successful Digital industry experience to include experience design Experience working with third particular experience working with Software I relevant Application Program Interform. Ability to examine issues from a "month of the state of	allow you to know the views roups (select only one) your or Small Business/Self-Employage) statement, including resolution of complex tax iss ral/multi-lingual environment strategic partnerships de online services for tax process (i.e., individuals or organizaces (APIs)	or position of that pa skill set best fits: Dig loyed and Wage and recent examples, add ues t ofessionals, financial a zations who interact we oplications, understan	rticular organization of ital Services, Large E Investment. dressing your specific applications, software with the IRS on behall	or group. Also include in the Business & International, as skills and qualifications as a development, user of taxpayers) dusing and/or implementing	

PART IV – Applicant Resume

Attach a copy of your resume, including prior Treasury and/or IRS employment. State position(s), title(s), and dates of employment. Additionally, list professional credentials, membership in professional organizations, and local liaison activities with IRS, if applicable.

PART V - Other IRS Councils/Committees

Have you ever been a member of the Internal Revenue Service Advisory Council (formerly known as Commissioner's Advisory Group), Art Advisory Panel, Electronic Tax Administration Advisory Committee, Tax Exempt Advisory Committee or Information Reporting Program Advisory Committee? If so, include name of the councils/committees and dates of membership.

Council/Committee name	Dates of Membership		
PART VI – Applicant Acknowledgement			
I certify that to the best of my knowledge and belief, all of my stat	ements 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.

Paperwork Reduction Act Notice

We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws and to allow us to figure and collect the right amount of tax. You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103. The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is shown below. The estimated burden for all other taxpayers who file this form is approved under OMB control number 1545-1791.

Preparing, copying, assembling, and sending the form to the IRS 1 hour., 30 mins.

If you have comments concerning the accuracy of these time estimates or suggestions for making this form simpler, we would be happy to hear from you. You can write to: Internal Revenue Service, 1111 Constitution, Ave, NW, Washington, DC 20224. Do not send the form to this address. Instead, see the return address on the form.