

Alaska Power of Attorney

<input type="checkbox"/> FEIN <input type="checkbox"/> SSN	Telephone Number
Taxpayer Name	Email Address
Mailing Address	City State ZIP Code

- INDIVIDUAL
 PARTNERSHIP
 CORPORATION
 LIMITED LIABILITY COMPANY

OTHER

I hereby appoint: [Enter below the name(s), address (including ZIP code), telephone number and facsimile number of individual appointee(s). Appointee(s) must sign the declaration on page 2.]

Appointee Name			Appointee Name		
Appointee Firm			Appointee Firm		
Appointee Address			Appointee Address		
City	State	ZIP Code	City	State	ZIP Code
Telephone Number	Fax Number		Telephone Number	Fax Number	

as attorney-in-fact to represent the taxpayer with respect to the following Alaska tax matters:

From tax year/period	To tax year/period
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- Check this box for all tax types or check boxes for specific tax types below:
- | | | |
|--|--|---|
| <input type="checkbox"/> Alaska Seafood Marketing | <input type="checkbox"/> Estate | <input type="checkbox"/> Oil and Gas Production |
| <input type="checkbox"/> Alcoholic Beverage | <input type="checkbox"/> Film Production Tax Credits | <input type="checkbox"/> Oil and Gas Property |
| <input type="checkbox"/> Charitable Gaming | <input type="checkbox"/> Fisheries Business | <input type="checkbox"/> Regional Seafood Development |
| <input type="checkbox"/> Commercial Passenger Vessel | <input type="checkbox"/> Fishery Resource Landing | <input type="checkbox"/> Salmon Enhancement |
| <input type="checkbox"/> Common Property Fishery | <input type="checkbox"/> Large Passenger Vessel | <input type="checkbox"/> Tire Fee |
| <input type="checkbox"/> Corporate Income | <input type="checkbox"/> Marijuana | <input type="checkbox"/> Tobacco |
| <input type="checkbox"/> Credit App Submitted on (_____) | <input type="checkbox"/> Mining License | <input type="checkbox"/> Telephone Cooperative |
| <input type="checkbox"/> Dive Fishery Management | <input type="checkbox"/> Motor Fuel | <input type="checkbox"/> Vehicle Rental |
| <input type="checkbox"/> Electric Cooperative | | |

Send a carbon copy of assessments and decisions in proceedings involving the above tax matters to attorney-in-fact.

The attorney-in-fact shall, subject to revocation, have authority to receive confidential information and full power and authority to perform on behalf of the taxpayer all acts with respect to the above tax matters except as follows:

(Check all boxes for powers which **are not** granted.)

- To represent the taxpayer in administrative proceedings.
- To receive, but not to endorse and collect, checks in payment of any refund of Alaska Department of Revenue taxes, penalties, or interest.
- To execute waivers (including offers of waivers) of restrictions on assessment or collection of deficiencies in tax and waivers of notice of disallowance of a claim for credit or refund.
- To execute consents extending the statutory period for assessment or collection of taxes.
- To execute closing agreements and stipulations.
- Other powers not granted: (Specify) _____

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This power of attorney revokes all prior powers of attorney filed with respect to the same matters and years or periods covered by this instrument, except the following: (Specify and attach copies of the powers of attorney)

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Signature of Taxpayer – If signed by a corporate officer, partner, or fiduciary on behalf of the taxpayer, I certify that I have the authority to execute this power of attorney on behalf of the taxpayer.

Signature	Date
Printed Name	Printed Title

DECLARATION OF REPRESENTATIVE

The undersigned representative hereby declares under the penalty of unsworn falsification that he/she is an individual authorized to represent a taxpayer before the Department of Revenue and that he/she is authorized to represent the named taxpayer in this matter.

Signature

Date

Signature

Date

POWER OF ATTORNEY INFORMATION

USE THIS FORM TO GRANT AUTHORITY TO AN INDIVIDUAL TO REPRESENT YOU BEFORE THE DEPARTMENT AND TO RECEIVE TAX INFORMATION.

An individual who is not the taxpayer must be a recognized representative before the individual may represent a taxpayer before the Department of Revenue. A recognized representative is an individual who is appointed as an attorney-in-fact under a power of attorney and who is an attorney in good standing in any state, a certified public accountant licensed in any state, an individual enrolled to practice before the Internal Revenue Service and is in active status, or an individual in a special status with a taxpayer. An individual in a special status with a taxpayer includes an officer or regular full-time employee of a corporation or other organization or employer, or an individual who is a member of the immediate family of the taxpayer. An individual who prepares or signs a return may represent a taxpayer with respect to that return. Upon written application and in the discretion of the department, an individual other than the one described above may represent a taxpayer in a particular matter.

A power of attorney is a document signed by the taxpayer by which another individual is given the authority to appear before the department and act for the taxpayer. An attorney-in-fact is an agent who is authorized by the taxpayer under the power of attorney to act on behalf of the taxpayer. The acts of the attorney-in-fact are binding on the taxpayer. A power of attorney may be general or it may be limited. The department form conveys a general power of attorney; a taxpayer must designate on the form if the powers granted to the representative are limited.

Generally, the power of attorney encompasses all matters relating to a taxpayer's rights, privileges, or liabilities under laws and regulations administered by the department. This includes, for example, such things as the preparation and filing of necessary documents, receipt of otherwise confidential tax particulars, correspondence and communication with department personnel, and representation of a taxpayer at audits, conferences, hearing, and other meetings.

Forms filed through Revenue Online are considered original forms and do not need to be mailed in. The original of this form, if not filed through Revenue Online, must be mailed to the department.