



**CONSENT TO DISCLOSE
TAX RETURN INFORMATION**

1040 1041 1065 1120 1120S Other: _____

The purpose of this document is to obtain your consent to allow CarlsonSV to disclose information regarding your federal tax return (s) to a third party or parties. By signing this document, you authorize CarlsonSV to disclose your federal tax return (s) as described below. Your authorization will apply to your entire federal tax return for the year (s) identified below unless you specify otherwise.

Applicable Tax Year (s): _____ Disclosure Limitations: _____

Reason for Disclosure: _____

Recipient (s) of Tax Return Information: _____

Contact Name: _____ Contact Email: _____

Federal law requires this consent form to be provided to you. Unless authorized by law, CarlsonSV cannot disclose, without your consent, your tax return information to third parties for purposes other than the preparation and filing of your tax return. If you consent to disclosure of your tax return information, Federal law may not protect your tax return information from further use or distribution.

You are not required to complete this form. If CarlsonSV obtains your signature on this form by conditioning our services on your consent, your consent will not be valid. If you agree to the disclosure of your tax return information, your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year.

Duration of Consent (check appropriate box):

- Specify duration: _____
- Consent will remain in effect during the time in which you retain CarlsonSV to provide services. You may terminate this consent at any time by providing written notice to CarlsonSV.

CONSENT:

Client Signature

___/___/___
Date

Print Name

Business Name (s)

Spouse Signature

___/___/___
Date

Print Name

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email at complaints@tigta.treas.gov.