

Disclosure Authorization Form

Arizona Form 285B

Phone Numbers

For information or help, call one of the numbers listed:

Phoenix (602) 255-3381
From area codes 520 and 928, toll-free (800) 352-4090

Tax forms, instructions, and other tax information

If you need tax forms, instructions, and other tax information, go to the department's website at www.azdor.gov.

Purpose of Form

Form 285B enables any individual, sole proprietorship, corporation, group of consolidated/combined corporations, partnership, estate, trust, governmental agency, or other organization, association, or group thereof ("Taxpayer") to designate a person ("Appointee") to whom the Arizona Department of Revenue can release confidential information, if the release of such information is not otherwise authorized by A.R.S. § 42-2003.

The disclosure of such confidential information may be necessary to fully discuss tax issues with, or respond to tax questions by such Appointee.

How to File

Mail the original or photocopy of the completed form to:

Taxpayer Information and Assistance
Arizona Department of Revenue
P.O. Box 29086
Phoenix, AZ 85038-9086

NOTE: *If you are sending this form at the request of a department employee; instead of sending the completed form to the address listed above, mail the original or a photocopy of the completed form to the address that was provided to you by the employee.*

Instructions

Section 1 - Taxpayer Information

Enter Taxpayer's name and daytime telephone number on the lines provided. If Taxpayer is a consolidated or combined group of corporations, Taxpayer may attach a federal Form 851 or a supplemental sheet, as applicable, containing the names of each member of the consolidated/combined group.

Taxpayer must also provide a Federal Employer Identification Number, an Arizona Withholding Number, or a Transaction Privilege Tax License Number.

Section 2 - Appointee Information

Enter the name of the person you are appointing to be authorized to receive Taxpayer's confidential information.

The Appointee must be an individual. For an Appointee Identification Number, please provide Appointee's Social

Security number, CPA number, State Bar number, Alternative Preparer Tax Identification Number, or any other identification number including one assigned to Appointee by Taxpayer.

Section 3 - Tax Matters

You may use this form to authorize disclosure of confidential information relating to transaction privilege and use tax or to withholding tax. Please check applicable box(es) for which Appointee is authorized to receive Taxpayer's confidential information.

Section 4 - Tax Periods

This authorization form will be effective for all past tax years/periods and for the next four years unless the box is checked and more limited tax years/periods specified.

Section 5 - Signature

| Type of Entity | Who must Sign |
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| Individuals, and Sole Proprietorships | The individual/sole proprietor must sign the authorization. |
| Corporations | A principal corporate officer within the meaning of A.R.S. § 42-2003(A)(2) must sign the authorization. |
| Partnerships, and Limited Partnerships | A partner having authority to act in the name of the partnership must sign the authorization. |
| Trusts | A Trustee must sign the authorization. |
| Limited Liability Companies | A member having authority to act in the name of the company must sign the authorization. |
| Governmental Agencies | An officer having authority to act on behalf of the governmental agency must sign the authorization. |