Page 1 Form RD-1063 (Rev. 12/15/21)



# Georgia Department of Revenue

Reporting Agent Authorization
Submit this form through GTC (gtc.dor.ga.gov/) or to the Department Division handling your inquiry.

| Section 1  | Section 1 Taxpayer Information  |                                 |   |                             |  |  |
|--|---|---------------------------------|---|-----------------------------|--|--|
| Taxpayer's Legal   | Name (as distinguished from Trade Name or D   | 0/B/A)                          |   |                             |  |  |
| Taxpayer's Trade Name or D/B/A   |   |                                 | Federal Employer Id                                   | lentification Number (FEIN) |  |  |
| Mailing Address  |   |                                 |   |                             |  |  |
| Primary Contact Name   |   | Telephone Number                |   | Email Address               |  |  |
| Section 2  | Reporting Agent Information   |                                 |   |                             |  |  |
| Entity Name  |   |                                 | Federal Employer lo                                   | dentification Number (FEIN) |  |  |
| Mailing Address  |   |                                 |   |                             |  |  |
| Primary Contact Name   |   | Telephone Number                |   | Email Address               |  |  |
| Section 3  | Authorization of Reporting Agent (C   | <br>aution: See <i>Authoriz</i> | ration Agreement below.)                              |                             |  |  |
| The reporting agent is authorized to represent the taxpayer before the Department for the following tax matters:   |   |                                 |   |                             |  |  |
| Tax Type:  |   |                                 |   |                             |  |  |
| Start Date:  | End Date:   | _ CI                            | Check this box if access will be granted indefinitely |                             |  |  |
| The reporting agent is authorized to perform the following act(s) on behalf of the taxpayer for the tax type(s) and range of tax periods or years above (check all that apply). Once this authority is granted, it is effective until revoked by the taxpayer/reporting agent.   |   |                                 |   |                             |  |  |
| Sign   | and file returns  |                                 |   |                             |  |  |
| _  | Make deposits and payments  |                                 |   |                             |  |  |
| <ul><li>Sign and submit notices, applications, and similar taxpayer documentation relating to the tax matters above</li><li>☐ Receive confidential information on the tax matters above</li></ul>  |   |                                 |   |                             |  |  |
| =  | Discuss confidential information, notices, and communications from the Department relating to the tax matters above |                                 |   |                             |  |  |
| Section 4  | Authorization Agreement   |                                 |   |                             |  |  |
| I understand that this agreement does not relieve me, as the taxpayer, of the responsibility to ensure that all tax returns are filed, that all deposits and payments are made, and that I may enroll in the Georgia Tax Center (GTC) to view deposits and payments made on my behalf. I understand that by signing below, I authorize any employee of the reporting agent listed in Section 2 (not just the primary contact) to take the selected actions on my behalf. I understand that depending on the authority granted in Section 3 of this form, the reporting agent named above may be authorized to sign and file the returns indicated, beginning with the period indicated and may be authorized to make deposits and payments beginning with the period indicated. Any authorization granted remains in effect until it is revoked by the taxpayer or reporting agent. Disclosure authority is effective upon signature of taxpayer and receipt of Form RD-1063 by the Department. If signed by a corporate officer, partner, member, trustee, or executor/executrix on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of the taxpayer. I understand that to willfully prepare or present a document that is fraudulent or false is a felony under O.C.G.A. § 16-10-20. |   |                                 |   |                             |  |  |
| Signature: _   |   | Date:                           |   |                             |  |  |
| Printed Name:  |   | Title:                          |   |                             |  |  |

## Purpose of Form

A taxpayer should use Form RD-1063 to designate a business entity as the taxpayer's reporting agent. The Form RD-1063 authorizes the reporting agent (and any employee of such reporting agent) to:

- Sign and file certain returns;
- Make deposits and payments for certain returns;
- Receive confidential information pertaining to the tax matters; and
- Discuss confidential taxpayer information as well as notices and communications from the Department of Revenue related to the authorization(s) granted in Section 3. Notices and communications are automatically sent to the taxpayer, and not the reporting agent. The reporting agent may access copies of taxpayer notices and communications via third party access to the taxpayer's account through the Georgia Tax Center (GTC).

**Note:** An authorization does not relieve the taxpayer of the responsibility (or from liability for failing) to ensure that all tax returns are filed timely and that all tax deposits and tax payments are made timely.

#### Filing Instructions

Taxpayers should submit Form RD-1063 by uploading through GTC (https://gtc.dor.ga.gov) or by sending to the Department employee handling your inquiry.

To upload to GTC: (1) Login, (2) Under "I Want To" select "See More Links", (3) Select "Submit Power of Attorney", and (4) Follow the prompts to upload the Form RD-1063.

### Revocation

If you have a valid Form RD-1063 on file with the Department, the filing of a new Form RD-1063 revokes the authority of the prior reporting agent beginning with the period indicated on the new Form RD-1063. The prior reporting agent is still an authorized reporting agent and retains any previously granted disclosure authority for the periods prior to the beginning period of the new reporting agent's authorization unless specifically revoked.

If the taxpayer or reporting agent wants to revoke an existing authorization, upload a copy of the previously executed Form RD-1063 to GTC with "REVOKE" clearly written on the top of the form. If you do not have a copy of the authorization you want to revoke, upload a statement of revocation to GTC. The statement of revocation must indicate the name of each reporting agent whose authority is revoked.

## Specific Instructions

## Section 1 – Taxpayer Information

Enter the legal entity name, any trade names or D/B/As, contact information, and the Federal Employer Identification Number (FEIN) of the taxpayer.

#### Section 2 – Reporting Agent Information

Enter the reporting agent entity name, contact information, and the FEIN for the entity. While a business entity should be listed as the reporting agent, a primary contact must be listed for the Department to contact regarding this Form.

#### Section 3 – Authorization of Reporting Agent

Enter the tax type(s) for which the authorization to sign and file returns on behalf of the taxpayer is being

Form RD-1063 (Rev. 12/15/21) Page 3

granted. Using the "MM/YYYY" format, enter the start date for granting authorization to act on behalf of the taxpayer for the identified tax type(s). If an end date is known, enter the end date for authorization on the provided line. If authorization will be granted indefinitely until the form has been revoked by the taxpayer or the reporting agent, leave the end date blank and check the box.

## **Section 4 – Authorization Agreement**

An authorized representative of the taxpayer must sign in Section 4 for Form RD-1063 to be effective. The table below shows who should sign for each type of taxpayer:

| Business Entity             | Who Must Sign  |  |  |
|-----------------------------|--|--|--|
| Sole Proprietorship         | The individual who owns the business.  |  |  |
| Corporations                | A corporate officer with the authority to sign.                                |  |  |
| Partnerships                | A partner having authority to act in the name of the partnership must sign.    |  |  |
| Limited Liability Companies | A member having authority to act in the name of the company must sign.         |  |  |
| Trusts                      | A trustee must sign.   |  |  |
| Estates                     | An executor/ executrix or the personal representative of the estate must sign. |  |  |

Once Form RD-1063 is signed, any authority granted is effective beginning with the period indicated and continues indefinitely unless revoked by the taxpayer or reporting agent. A new authorization must be submitted to the Department for any increase or decrease in the authority of a reporting agent to act for its client. Any authority granted on Form RD-1063 does not revoke and has no effect on any authority granted on any Power of Attorney (Form RD-1061) or Disclosure Authorization (Form RD-1062) filed with the Department.