

CONSENT TO DISCLOSURE OF BUSINESS TAX RETURN INFORMATION

Dear Client:

Your privacy is very important to us at Bredeweg & Zylstra, PLC.

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot disclose your tax return information to third parties for purposes other than the preparation and filing of your tax return without your consent. If you consent to the 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 to engage our tax return preparation services. If we obtain your signature on this form by conditioning our tax return preparation 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 from the date of the signature.

Consents for business tax returns must be signed by a stockholder, designated officer, or partner in the business. We cannot disclose individual Schedule K-1s or any papers in the return that include social security numbers or home addresses unless the consent is signed by the Schedule K-1 recipient. In most cases, financial institutions require all the Schedule K-1s for businesses. We must have every partner or shareholder sign the consent. (Copy and use additional forms as necessary for signatures if K1s are required.)

I understand I have the right to limit the consent to specific information, not just authorize disclosure or use of the entire return. Recognizing that right, I consent to the use of my entire tax return. I authorize Bredeweg & Zylstra, PLC, as preparers of the tax return, to disclose my tax return(s) indicated to the recipient(s) named below via:

Portal Fax

Recipient Name: _____ E-mail address: _____

Purpose of Disclosure: (Required) Business Loan Other _____

Direct or Mobile Number: _____ Fax number: _____

Company Name(s)	Tax Year(s)	K-1 Required (circle one)
		yes no
		yes no

Printed Name: _____ Title: _____

Signature: _____ Date: _____

Duration of consent (if other than one year): _____

For security purposes, please return via portal or email.

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.