Form **774** 

## **Alaska Power of Attorney**

FEIN			Telephone Number				
SSN Faxpayer Name			Email Address				
тахраует магне			Email Address				
Mailing Address			City		State	ZIP Code	
INDIVIDUAL  I hereby appoint: [Enter below		OTHER		IITED LIABIL			
appointee(s). Appointee(s) mu				number and	i iacsiiiile i	iumber of marvidual	
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	1	
as attorney-in-fact to represent the	ne taxpayer v	with respect to the follo	owing Alaska tax matt	ers:	l		
From tax year/period			To tax year/peri	od			
Check this box for all tax ty  Alaska Seafood Marketing Alcoholic Beverage Charitable Gaming Commercial Passenger Ve Common Property Fishery Corporate Income Credit App Submitted on ( Dive Fishery Management Electric Cooperative		Estate Film Produ Fisheries I Fishery Re	uction Tax Credits Business esource Landing esenger Vessel ense	Oil a Regi Saln Tire Toba	non Enhance Fee	perty d Development ement	
Send a carbon copy of ass	essments an	d decisions in procee	dings involving the ab	ove tax matt	ers to attorn	ey-in-fact.	
The attorney-in-fact shall, subjet perform on behalf of the taxpayer (Check all boxes for powers which is to represent the taxpayer is to receive, but not to endour interest.  To execute waivers (include notice of disallowance of a improved to the consents extending to execute closing agreement in the taxpayer is to receive, but not to endour interest.	r all acts with th are not gr n administrat rrse and colled ing offers of claim for cre ding the state	anted.) tive proceedings. ect, checks in paymer waivers) of restriction dit or refund. utory period for asses	tax matters except as	s follows: ska Departm	ent of Reve	nue taxes, penalties,	
	Other powers not granted: (Specify)						

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This power of attorney revokenstrument, except the following:		filed with respect to the same mather than the powers of attorney)	atters and years or periods	covered by this
Signature of Taxpayer – If signed execute this power of attorney of		r, or fiduciary on behalf of the ta	xpayer, I certify that I have t	he authority to
Signature			Date	
Printed Name	Printed Ti	tle		
	DECLARATION	OF REPRESENTATIVE		
The undersigned representative represent a taxpayer before the				
Signature		Date		
Signature				

## 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.