

# Form REV185i, Authorization to Release Individual or Sole Proprietor Tax Information

Read instructions before completing this form.

	Taxpayer Name  Street Address or PO Box  Apt. or Suite			Social Security Number or ITIN  Minnesota or Federal Employer Identification Number (FEIN)(Sole Proprieto		
/er						
lavbaycı				Phone Number Fax Number		
	City	State	ZIP Code	Email Address		
	Name of Person to Receive Return Information			Attorney Number, Accountant Number, or PTIN		
	Street Address or PO Box			Phone Number		
	Apt. or Suite			Fax Number		
_	City	State	ZIP Code	Email Address		
	I authorize the person above to rec Type of Tax (Such as Income, Estate, Pro			sue Document Type (Such as re	turns, W-2s, 1099s) Ext	rended Expiration Dat
						/ /
	This authorization is not valid until it Parent, Guardian, Conservator: I certi			this form.	I	/ /
				this form. Address, If Different fr	rom Taxpayer	/ /

Mail: Minnesota Department of Revenue, Mail Station 7703, 600 Robert Street North, St. Paul, MN 5514

Fax: 651-556-5210

Email: MNDOR.POA@state.mn.us

## Form REV185i Instructions

#### **Purpose of This Form**

By signing this form, you authorize the Minnesota Department of Revenue to release private data to the person above.

An authorized recipient may inspect or receive private data, but may not act on your behalf. To grant additional authority, complete Form REV184i, *Individual Power of Attorney*.

### **Business Entities**

To authorize the department to release nonpublic data about a business, complete Form REV185b, *Authorization to Release Business Tax Information*.

#### **Your Signature**

This authorization is not valid until it is signed and dated by someone with legal authority to sign it. For most people, this is the taxpayer whose data is being shared.

If granting authority for a joint return, only one spouse needs to sign. Parents or legal guardians must sign for minors.

For legal guardians, conservators, personal representatives, and others signing on behalf of the taxpayer, we require documents and a photo ID to confirm your legal authority.

We reserve the right to request additional information as needed.

#### **Expiration**

This authorization expires once the data is released. To extend the amount of time this authorization is valid for, indicate when you want it to expire in the Tax Type or Issue section of this form.

#### Questions?

Website: www.revenue.state.mn.us Email: MNDOR.POA@state.mn.us Phone: 651-556-3003 or 1-800-657-3909