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 Taxpayer Information				
Taxpayer's Legal Name (as distinguished from Trade Name	e or D/B/A)			
Taxpayer's Trade Name or D/B/A		Federal Employer Identification Number (FEIN)		
Mailing Address				
Primary Contact Name	Telephone Nun	nber	Email Address	
Section 2 Reporting Agent Information				
Entity Name	ntity Name		Federal Employer Identification Number (FEIN)	
COMPUPAY INC., DBA BENEFITMALL		59-2022495		
Mailing Address				
3450 LAKESIDE DRIVE SUITE 400				
Primary Contact Name	Telephone Number		Email Address	
Sue Larocca	(954) 874-057	0	sue.larocca-tax@benefitmall.com	
Section 3 Authorization of Reporting Agent to	Sign and File	Returns (Caution: See	Authorization Agreement below.)	
Use the lines below to indicate the tax type(s) and per the instructions for how to enter the month and year. O <b>Tax Type:</b> Sales & Use Tax Withhold <b>Tax Period:</b>	Once this author	ity is granted, it is effec	t is authorized to file returns on your behalf. See ctive until revoked by the taxpayer /reporting agent. her Tax Type:	
Section 4 Authorization of Reporting Agent to	Make Deposit	s and Payments (Ca	ution: See Authorization Agreement below.)	
Use the lines below to indicate the tax type(s) and p on your behalf. See the instructions for how to enter taxpayer/reporting agent.				
Tax Type: Sales & Use Tax Withhold	ing IFT.	A/Motor Fuel Oth	ner Tax Type:	
Tax Period:				
Section 5 Disclosure of Information to Report	ing Agents			
Check here to authorize the reporting agent to discus Department of Revenue related to the authorization(s	ss confidential ta s) granted in Se	axpayer information a ection 3 and 4: 🔀	as well as notices and communications from the	
Section 6 Authorization Agreement				
I understand that this agreement does not relieve me deposits and payments are made, and that I may er behalf. I understand that by signing below, I author contact) to take the selected actions on my behalf file the returns indicated, beginning with the period in above is authorized to make deposits and payments	nroll in the Geo ize any employ . If Section 3 is indicated. If any	rgia Tax Center (GT <b>ree of the reporting</b> completed, the report starting dates in Sec	C) to view deposits and payments made on my <b>agent listed in Section 2 (not just the primary</b> ing agent named above is authorized to sign and tion 4 are completed, the reporting agent named	

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:

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; and/or
- Discuss confidential taxpayer information as well as notices and communications from the Department of Revenue related to the authorization(s) granted in Sections 3 and 4. Notices and communications will be sent to the taxpayer, 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 (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 to Sign and File Returns

Enter the tax type(s) and beginning period(s) for which the authorization to sign and file returns on behalf of the taxpayer is being granted. Use the "MM/YYYY" format for monthly or quarterly tax returns, where "MM" is the month, or ending month of the quarter, the named reporting agent is initially authorized to sign and file tax

returns for the taxpayer. For example, enter "09/2014" in the line to indicate you are authorizing the named reporting agent to sign and file returns for the July–September quarter of 2014 and subsequent quarters.

## Section 4 – Authorization of Reporting Agent to Make Deposits and Payments

Enter the tax type(s) and period(s) or year(s) for which the authorization to make deposits and payments on behalf of the taxpayer is being granted. Use the "MM/YYYY" format for monthly or quarterly tax returns, where "MM" is the month or ending month of the quarter the named reporting agent is authorized to make deposits or payments for the taxpayer. For example, enter "09/2014" in the line to indicate you are authorizing the named reporting agent to make deposits or payments for the July–September quarter of 2014 and subsequent quarters.

# Section 5 – Disclosure of Information to Reporting Agents

The Department will only discuss and/or disclose taxpayer information for the tax type(s) and period(s) listed. The Department will not send copies of notices or other communications to the reporting agent. To access copies of taxpayer notices and communications, the reporting agent must have third party access to the taxpayer's account through GTC.

## Section 6 – Authorization Agreement

An authorized representative of the taxpayer must sign in Section 6 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.