

IRS Paid Preparer Tax Identification Number (PTIN) Application and Renewal

▶ Go to www.irs.gov/FormW12 for instructions and the latest information.

1 Name and PTIN (Print in ink or Type)	First name	Middle name	Last name
	<input type="checkbox"/> Initial application <input type="checkbox"/> Renewal application (Enter PTIN: P)		
2 Year of Application/ Renewal	If you checked the "Initial application" box and are submitting this form between October 1 and December 31, indicate below whether you want your PTIN to be valid for the current calendar year or the next calendar year. <input type="checkbox"/> Current calendar year <input type="checkbox"/> Next calendar year Prior year(s) (YYYY): Check box(es) below for the prior year(s) you are renewing your PTIN. See line 2 instructions for additional guidance. <input type="checkbox"/> 2015 <input type="checkbox"/> 2016 <input type="checkbox"/> 2017 <input type="checkbox"/> Other prior year(s)		
3 SSN and Date of Birth	SSN - -	Date of birth (MM/DD/YYYY) / /	
4 Personal Mailing Address and Phone Number	Street address. Use a P.O. box number only if the post office does not deliver mail to your street address.		
	City or town, state or province, country, and ZIP or foreign postal code. Do not abbreviate name of country.		
		Phone Number () -	
5a Business Mailing Address and Phone Number	Business address <input type="checkbox"/> Check here if your business address is the same as your personal mailing address. If different, enter it below.		
	City or town, state or province, country, and ZIP or foreign postal code. Do not abbreviate name of country.		
	Domestic business phone number () - EXT.	International business phone number +	
b Business Identification	Are you self-employed or an owner, partner, or officer of a tax return preparation business? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," then complete this line. If "No," go to line 6. Enter the business name.		
	Your CAF Number	EIN -	EFIN
	Website address (optional)		
6 Email Address	Enter the email address that should be used to contact you.		

For Internal Use Only
F: _____
E: _____
A: _____

<p>7 Past Felony Convictions You must check a box. If "Yes," you must provide an explanation.</p>	<p>Have you been convicted of a felony in the past 10 years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <hr/> <p>If "Yes," list the date and the type of felony conviction(s).</p>
--	---

If this is your **initial application** for a PTIN, continue to line 8. If you are renewing your PTIN, go to line 10.

<p>8 Address of Your Last U.S. Individual Income Tax Return Filed</p>	<p>Enter the address used on your last U.S. individual income tax return you filed.</p> <hr/> <hr/> <p><input type="checkbox"/> Check here if you have never filed a U.S. income tax return or do not have a U.S. income tax filing requirement. See line 8 instructions for documents that must be submitted with this form and continue to line 10.</p>
--	---

<p>9 Filing Status and Tax Year on Last U.S. Individual Income Tax Return Filed</p>	<p> <input type="checkbox"/> Single <input type="checkbox"/> Head of Household <input type="checkbox"/> Married filing jointly <input type="checkbox"/> Qualifying widow(er) with dependent child <input type="checkbox"/> Married filing separately Tax Year (YYYY) _____ </p> <p>Note: If your last return was filed more than 4 years ago, see instructions.</p>
--	---

<p>10 Federal Tax Compliance</p>	<p>Are you current on both your individual and business federal taxes, including any corporate and employment tax obligations? Note: If you have never filed a U.S. individual income tax return because you are not required to do so, check the "Yes" box. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <hr/> <p>If "No," provide an explanation.</p>
---	---


11 Professional Credentials

Check all that apply. **Note: DO NOT check any professional credentials that are currently expired or retired.** Enter state abbreviation and appropriate number(s). **If the expiration date is left blank or incomplete, then NO professional credential will be added when the application is processed.**

- Attorney—Licensed in which jurisdiction(s): _____ Number(s): _____ Expiration Date(s): _____
- Certified Public Accountant (CPA)—Licensed in which jurisdiction(s): _____ Number(s): _____ Expiration Date(s): _____
- Enrolled Agent (EA) Number(s): _____ Expiration Date(s): _____
- Enrolled Actuary Number(s): _____ Expiration Date(s): _____
- Enrolled Retirement Plan Agent (ERPA) Number(s): _____ Expiration Date(s): _____
- State Regulated Tax Return Preparer—Licensed in which jurisdiction(s): _____ Number(s): _____ Expiration Date(s): _____
- Certifying Acceptance Agent (CAA) Number: _____
- None

Sign Here

Under penalties of perjury, I declare that I have examined this application and to the best of my knowledge and belief, it is true, correct, and complete. I understand any false or misleading information may result in criminal penalties and/or the denial or termination of a PTIN.


Your signature (Please use blue or black ink)
Date (MM/DD/YYYY)

/ /

How To File

Online. Go to the webpage www.irs.gov/ptin for information. Follow the instructions to submit Form W-12. If you submit your application online, your PTIN generally will be provided to you immediately after you complete the application.

By mail. Complete Form W-12. Send the form to:

IRS Tax Professional PTIN
 Processing Center
 1605 George Dieter PMB 678
 El Paso, TX 79936

Note: Allow 4 to 6 weeks for processing of PTIN applications. For additional information, refer to the separate Instructions for Form W-12.