Form 2678 Employer/Payer Appointment of Agent

(Rev. December 2023) Department of the Treasury - Internal Revenue Service

OMB No. 1545-0748

Use this form if you want to request approval to hav deposits or payments of employment or other with revoke an existing appointment.			S use:
 If you're an employer or payer who wants to req and 2 and sign Part 2. Then give it to the agent. Ha sign it. 			
Note: This appointment isn't effective until we approve for more information.	e your request. See the instru	ctions	
 If you're an employer, payer, or agent who wants to complete all three parts. In this case, only one signatu 		ment,	
Part 1: Why you're filing this form.			
(Check one) You want to appoint an agent for tax reporting, depos You want to revoke an existing appointment. 	iting, and paying.		
Part 2: Employer or Payer Information: Complete t	his part if you want to appoi	nt an agent or re	evoke an appointment.
1 Employer identification number (EIN)			
2 Employer's or payer's name (not your trade name)			
3 Trade name (if any)			
4 Address			
L N	umber Street		Suite or room number
Γ			
L C	ity	J [State ZIP code
Γ			
L. Fo	preign country name For	eign province/county	Foreign postal code
5 Forms for which you want to appoint an agent or appointment to file. (Check all that apply.)	revoke the agent's	For AL employe	
		payees/pay	
Form 940, Employer's Annual Federal Unemployment (Form 941, Employer's QUARTERLY Federal Tax Ret Form 943, Employer's Annual Federal Tax Return for Agr Form 944, Employer's ANNUAL Federal Tax Return Form 945, Annual Return of Withheld Federal Incom Form CT-1, Employer's Annual Railroad Retirement Form CT-2, Employee Representative's Quarterly Ra	urn (all 941 series) icultural Employees (all 943 serie (all 944 series) e Tax Tax Return		
 * Generally, you can't appoint an agent to report, service recipient. Check here if you're a home care service recip for you. See the instructions. 			-
I am authorizing the IRS to disclose otherwise confid appointment, including disclosures required to pre reporting agent or certified public accountant, to pre deposits and payments. Such contract may authoriz agent to such third party. If a third party fails to file payer remain liable.	pcess Form 2678. The agent pare or file the returns covere ze the IRS to disclose confide	t may contract w d by this appoint ntial tax informati	with a third party, such as a ment, or to make any required ion of the employer/payer and
	Print your name here		
Sign your			
name here	Print your title here		

Best daytime phone

Date

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Now give this form to the agent to complete.

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Part 3: Agent Information: If you'll be an agent for an employer or payer, or want to revoke an appointment, complete this part.							
6 Agent's employer identification number (EIN)	<u> </u>						
7 Agent's name (not trade name)							
8 Trade name (if any)							
9 Address							
	Number	Street			Suite or room number		
	City]	State	ZIP code		
	Foreign country nam	e	Foreign province/cou	unty	Foreign postal code		
Check here if the employer is a home care service federal, state, or local government agency.	recipient receivi	ng home ca	re services throug	h a progr	am administered by a		

Under penalties of perjury, I declare that I have examined this form and any attachments, and to the best of my knowledge and belief, they are true, correct, and complete.

Sign your			Print your name here	
name here			Print your title here	
	Date	/ /	Best daytime phone	
				Form 2678 (Rev. 12-2023)