MICHELE L. PASQUALE 539-66-4035

Part V - Request or Retain MyFTB Full Online Account Access for Tax Professional(s)

You must check either the "Yes" or "No" box below. If you check the "Yes" box, you are requesting to authorize or retain full online account access for your tax professional(s), including the ability to view tax returns and take available actions based upon the year(s) designated on this declaration. If you request full online account access for your tax professional(s) on your POA declaration, a separate notice will be mailed to you with an authorization code and instructions to approve or deny the online account access request. An authorization code will not be sent for tax professional(s) that have existing full online account access.

If you check the "No" box, both the "Yes" and "No" boxes, or do not check any box, we will process the authorization as a "No." In that instance, your tax professional(s) will be granted limited online account access. In addition, any existing relationships with full online account access will be changed to limited online account access. Limited online account access includes viewing notices and most correspondence issued by FTB in the last 12 months.

Note: Tax professional(s) with limited or full online account access may have access to notices and correspondence in MyFTB for any tax year(s). This online account access authorization does not affect your tax professional(s) ability to take actions on your behalf or the information they can receive by phone, chat, correspondence, or in person.

If your POA declaration is rejected, this request for online access will not be processed and no updates will be made to online access levels for any existing relationships.

Part VI – Signature Authorizing Power of Attorney Declaration

Our privacy notice can be found in annual tax booklets or online. Go to **ftb.ca.gov/privacy** to learn about our privacy policy statement, or go to **ftb.ca.gov/forms** and search for **1131** to locate FTB 1131 EN-SP, Franchise Tax Board Privacy Notice on Collection. To request this notice by mail, call 800.338.0505 and enter form code **948** when instructed.

The authority granted to the representative(s) in this POA Declaration will generally expire **six years** from the date this form is signed, or on the date that a POA declaration is revoked, whichever occurs first.

I declare under penalty of perjury under the laws of the State of California that I am the taxpayer listed in Part I and by my signature below, I authorize the representative(s) listed in Part II and Side 4 (if included) to be appointed as my attorney(s)-in-fact.

If signed by a legal representative such as an executor, receiver, administrator, guardian, conservator, or trustee on behalf of the taxpayer, I declare under penalty of perjury under the laws of the State of California that I have the authority to execute this form on behalf of the taxpayer named in Part I and by my signature below, I authorize the representative(s) in Part II and Side 4 (if included) to be appointed as the taxpayer's attorney(s)-in-fact. Supporting document for such authority is attached.

I understand that submitting this POA Declaration will not revoke any previously submitted POA Declarations with overlapping privileges.

FTB will reject this POA Declaration if not signed and dated by an authorized individual.

By signing this POA declaration, I understand that FTB will grant limited online account access to my tax professional representative(s) unless full online account access has been requested in Part V. If you do not want your tax professional representative(s) to have any online access, refer to the Specific Line Instructions for Part V.

| Print name | Title (required for fiduciary signing for trust or estate) |
|---------------------|--|
| MICHELE L. PASQUALE | Taxpayer |
| Signature | Date |
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