STATE OF CALIFORNIA

Franchise Tax Board

Power of Attorney Declaration Revocation

CALIFORNIA FORM

3520-RVK

Use this legal document to revoke an existing Power of Attorney (POA) Declaration on file with the Franchise Tax Board (FTB). This form is not used to revoke a representative; it revokes an entire POA Declaration. Generally, a POA Declaration remains valid for **six years** from the POA signature date or until revoked. Form FTB 3520-RVK, Power of Attorney Declaration Revocation, will not revoke a Tax Information Authorization (TIA). To revoke a TIA, use form FTB 3535, Tax Information Authorization Revocation.

Part I – Taxpayer Information	
Provide the information submitted to FTB within Part I of the original Power of Attorney Declaration that you would like	to revoke.
Individual (If a joint tax return is filed, each spouse/Registered Domestic Partner [RDP] must complete their own POA Declaration Revocation) Fiduciary (Estate or Trust - FEIN required) FEIN required) FEIN required) Business Entity (A subsidiary not included with the unitary taxpayer's group return must file its own POA Declaration Revocation)	540NR Group Nonresident Return (If the POA Declaration filed was for matters related to a 540NR Group Nonresident return)
individual (instrume, middle initial, lastriame, sumx), maine of estate of russ, of run regar business name	
CA corporation number CA SOS number (or FTB issued number) FEIN SSN or ITIN	Phone
Street address (number and street) or PO box	Apt. no/ste. no.
City (If you have a foreign address, see instructions)	State ZIP code
Foreign country name Foreign province/state/county	Foreign postal code
Part II - Representative	
Provide the information for one of the representative(s) listed on the original Power of Attorney Declaration. Representative's name (first name, middle initial, and last name)	
	DTIN
CA CPA CA state bar number CTEC Enrolled agent number	PTIN
Street address (number and street) or PO box Apt. no/ste. no.	Phone
City (If the representative has a foreign address, see instructions.) State ZIP code	Fax
Part III – Original Signature Date	
Date the original Power of Attorney Declaration was signedmm/dd/yyy	у

Part IV - Signature Authorizing Power of Attorney Declaration Revocation

Print Name

To learn about your privacy rights, how we may use your information, and the consequences for not providing the requested information, go to **ftb.ca.gov/forms** and search for **1131**. To request this notice by mail, call 800.852.5711.

I am the taxpayer, legal representative, corporate officer, general partner, authorized managing member, tax matter partner, guardian, executor, conservator, receiver, administrator, or trustee on behalf of the taxpayer and I certify I have the legal authority to revoke an existing Power of Attorney Declaration. FTB will not revoke the POA Declaration unless this form is signed and dated by an authorized individual.

Title (required for Fiduciaries, Group Nonresidents, and Business Entities)

Signature Date
x