

Consent to Use 1040 Tax Return Information to Receive Advisory Services from Rehmann Financial Group, LLC

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot use your tax return information for purposes other than the preparation and filing of your tax return without your consent.

You are not required to complete this form to engage our tax return preparation services. If we obtain your signature on this form by conditioning our tax return preparation services on your consent, your consent will not be valid. Your consent is valid for the amount of time that you specify. *If you do not specify the duration of your consent, it is valid until you communicate to us in writing that you would like it withdrawn.* Further, you are entitled to provide consent to use less than all of your tax return information, if you prefer.

If you authorize Rehmann Financial Group, LLC to use your **tax return information** for the purposes listed below, please **print your name(s) and sign and date this form. If you have a joint return, both parties must sign the form.**

I (We), _____ and _____,
authorize Rehmann Financial Group, LLC, to use all my (our) tax return information, or if less than all,
only the following: _____,
for tax year _____ and subsequent tax years (if the consent is to exceed more than one year), to:

Provide a holistic planning and advising experience, integrating tax preparation and planning with financial planning and wealth management to identify planning opportunities and anticipate and minimize future tax obligations; this may include evaluating and developing potential tax efficiencies within your investment portfolio.

Rehmann Robson LLC is not allowed by Federal law to use your tax information for any purpose other than to prepare your tax return, unless you permit us by signing this statement. If you approve the use of your tax return information by Rehmann Financial Group, LLC, please complete the fields below.

Taxpayer Signature: _____ Date: _____

Spouse Signature: _____ Date: _____

This consent is valid until withdrawn, or, if less, expires on: _____

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484 or by email to: complaints@tigta.treas.gov

Please retain a signed copy of this use consent for your records.