Form 2848 (Rev. 1-2021) Page **2**

b	Specific acts not authorized. My representative(s) is (are) not authorized to endorse or otherwise negotiate any check (including directing or accepting payment by any means, electronic or otherwise, into an account owned or controlled by the representative(s) or any firm or other entity with whom the representative(s) is (are) associated) issued by the government in respect of a federal tax liability. List any other specific deletions to the acts otherwise authorized in this power of attorney (see instructions for line 5b):					
6	6 Retention/revocation of prior power(s) of attorney. The filing of this power of attorney automatically revokes all earlier power(s) of attorney on fil with the Internal Revenue Service for the same matters and years or periods covered by this form. If you do not want to revoke a prior power attorney, check here					
	YOU MUST ATTACH A COPY OF ANY POW	VER OF ATTORNEY YOU WANT TO REMA	IN IN EFFECT.			
7	even if they are appointing the same representa	tive(s). If signed by a corporate officer, partner, receiver, administrator, trustee, or individual	s filed, each spouse must file a separate power of attorney guardian, tax matters partner, partnership representative other than the taxpayer, I certify I have the legal authority			
	II NOI COMITEILD, SIGNED, AND DATE		TATIONNEL TO THE TAXI ATEN.			
Val	entina N Johnson	2/8/2024				
	Signature	Date	Title (if applicable)			
۷al	entina N Johnson					
	Print name	Print name of ta	expayer from line 1 if other than individual			
Part	II Declaration of Representative					
Under	penalties of perjury, by my signature below I decla	re that:				
• I am n	ot currently suspended or disbarred from practice,	or ineligible for practice, before the Internal Re	venue Service;			
• I am sı	ubject to regulations in Circular 230 (31 CFR, Subtitle	e A, Part 10), as amended, governing practice be	efore the Internal Revenue Service;			
•I am a	uthorized to represent the taxpayer identified in Pa	art I for the matter(s) specified there; and				
· I am o	ne of the following:					
a At	torney—a member in good standing of the bar of t	the highest court of the jurisdiction shown belo	w.			
b Ce	ertified Public Accountant—a holder of an active lic	ense to practice as a certified public accountant	t in the jurisdiction shown below.			
c En	rolled Agent—enrolled as an agent by the IRS per t	the requirements of Circular 230.				
d Of	ficer—a bona fide officer of the taxpayer organizat	ion.				
e Fu	ll-Time Employee—a full-time employee of the tax	payer.				
f Fa	mily Member—a member of the taxpayer's immediate	e family (spouse, parent, child, grandparent, grand	dchild, step-parent, step-child, brother, or sister).			
	rolled Actuary—enrolled as an actuary by the Joint nited by section 10.3(d) of Circular 230).	Board for the Enrollment of Actuaries under 29	9 U.S.C. 1242 (the authority to practice before the IRS is			
	• • • • • • • • • • • • • • • • • • • •	•	eparer may represent, provided the preparer (1) prepared) was eligible to sign the return or claim for refund; (3) has			

- a valid PTIN; and (4) possesses the required Annual Filing Season Program Record of Completion(s). See Special Rules and Requirements for Unenrolled Return Preparers in the instructions for additional information.

 k Qualifying Student or Law Graduate—receives permission to represent taxpayers before the IRS by virtue of his/her status as a law, business, or accounting
- r Enrolled Retirement Plan Agent—enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the Internal Revenue Service is limited by section 10.3(e)).
- FIF THIS DECLARATION OF REPRESENTATIVE IS NOT COMPLETED, SIGNED, AND DATED, THE IRS WILL RETURN THE POWER OF ATTORNEY. REPRESENTATIVES MUST SIGN IN THE ORDER LISTED IN PART I, LINE 2.

Note: For designations d-f, enter your title, position, or relationship to the taxpayer in the "Licensing jurisdiction" column.

student, or law graduate working in a LITC or STCP. See instructions for Part II for additional information and requirements.

Designation— Insert above letter (α–r).	Licensing jurisdiction (State) or other licensing authority (if applicable)	Bar, license, certification, registration, or enrollment number (if applicable)	Signature	Date