Instructions Form 2587 (Rev. June 2001)

Application for Special Enrollment Examination

General Information

The 2001 Special Enrollment Examination will be held on **Wednesday** and **Thursday**, October 17 and 18, 2001 as follows:

Part	Date	Time
Part 1	October 17, 2001	9:00 a.m.
Part 2	October 17, 2001	1:30 p.m.
Part 3	October 18, 2001	9:00 a.m.
Part 4	October 18, 2001	1:30 p.m.

The **Examination Fee** is \$55 if taking all four parts of the examination or \$45 if taking less than four parts. The fee is not refundable. If you cannot take the examination when scheduled because of illness, accident, or other emergency, the IRS Site Coordinator may authorize the allowance of your fee as a credit toward next year's examination fee.

To qualify for the credit, you must give prompt notice (before the examination, when possible) and give reasons justifying allowance of the credit. When requesting a credit, you should return your examination credential to the coordinator to be endorsed for allowance of the credit if warranted. The site coordinator will return your credential with the endorsement so you can file it with your next application. This credit is good for only 1 year and **may not** be requested again.

You will receive an acknowledgment of our receipt of your application. At the same time, you will receive your Examination Credential which will give you access to the test site, the location of the examination and time to appear for registration. If you have not received it 20 days before the examination, (September 27) notify the Enrolled Practitioner Program Unit at 313-234-1280 or e-mail at EPP@irs.gov.

If you wish to challenge the answers to any of the questions, you must do so no later than March 31, 2002.

You must turn in your answer sheet on time at the end of each test session or your test will not be graded and no credit received. Answers noted in examination booklets will not be graded.

General Instructions

This is a five part form. Type or print your information with a ball point pen. If your information is incomplete or not legible, your application will be returned to you, which could cause you to miss the examination.

Do not bring any books, papers or equipment (including calculators) to the examination room. All necessary materials will be furnished by the Internal Revenue Service.

YOU WILL BE REQUIRED TO PRESENT A PICTURE ID TO ENTER THE EXAMINATION ROOM. YOU WILL BE REQUIRED TO DISPLAY YOUR ID DURING THE EXAMINATION.

Specific Item Instructions

Candidate Number. We will assign and fill in a candidate number for you.

Items 1 and 2- Name and Address. Any future change of name and address should be sent to: Internal Revenue Service, Enrolled Practitioner Program (EPP) Unit, P.O. Box 33968, Detroit, MI 48232.

- As applicable, enter: street number; street; apartment, suite, or box number; city; state, and ZIP code.
- The address you enter will be the mailing address where we will send the acknowledgement of receipt of your application.
- If your mailing address changes, you must promptly send us a written change of address via postal service or e-mail. Your written change of address must include: your name; your old address; your new address; your social security number; the date, and your signature.
- Send your change of address to: IRS Detroit Computing Center, P.O. Box 33968, Detroit, MI 48232, Attn: EPP Unit or e-mail at EPP.irs.gov
- Sending Form 8822, Change of Address, to an Internal Revenue Service Center will not change your mailing address with us (nor
 will sending Form 8822 to us change your address with a service center). If you send Form 8822 to a service center, you may, if
 you choose, send us a copy of Form 8822 as your written change of address.
- Your mailing address is protected as confidential under the Privacy Act. If you choose to check the box agreeing to the Optional
 Privacy Act Consent to Disclosure of Mailing Address, we may disclose, by print or electronic media, your mailing address, with
 your name, in mailing lists requested by individuals or professional organizations seeking to offer you goods or services, including
 those who provide courses to prepare individuals to take the examination.

If you do <u>not</u> check the box agreeing to the Optional Privacy Act Consent to Disclosure of Mailing Address, your mailing address will remain confidential.

Item 3 - Social Security Number. If you filed jointly with your spouse, we also would like the social security number of your spouse. Disclosure is voluntary, but providing it will facilitate the processing of your application for enrollment to practice before the IRS should you be successful on this examination.

Instructions are continued on back

Your Application Will Not Be Accepted Unless You:

- Sign and date it (item 8);
- Include a check or money order for your examination fee payable to Internal Revenue Service (\$55 for all four parts or \$45 if less than four parts);
- Enter parts to be taken (item 6);
- Your application must be postmarked by the U.S.
 Postal Service, or similarly evidenced if a private mailing service is used, no later than July 31,2001

2001 Special Enrollment Examination

Item 5a, 5b and 5c - Preferred Examination Site Location Code. Enter location code for your first, second and third choice of the city and state or country where you prefer to take the examination. We will try to accommodate you on a space available basis.

The list on this page is in alphabetic order by state and provides you with the cities where the examination is given. The location code to be entered is listed opposite the city. This code is necessary because the information in the application is computerized and it allows us to distribute your application to the appropriate IRS office. You may select a city in a state other than the state in which you reside.

Item 6 - Parts to be taken. You must check the appropriate box(es).

You are required to take all four parts of the examination if; (a) you have never taken the examination before; (b) you passed 1, 2, or 3 parts of the 1999 examination but did not achieve a passing score or meet the minimum retention score on all of the parts you were required to take in 2000; (c) you took and failed all four parts of the 2000 examination. The examination fee for taking all parts is \$55.

If you were required to take **less than** all four parts of the 2000 examination and you did not pass all parts you were required to take but did meet the minimum retention score(s) on the part(s) not passed, you need only check the box(es) for the parts on which you did not achieve a passing score. The examination fee in this case is \$45.

If you were required to take **all** four parts of the 2000 examination and passed one or two parts and achieved the minimum retention score on the parts failed, you need only check the boxes for the parts failed. The examination fee in this case is \$45.

IMPORTANT: See Exhibit A for rules for extending credit for passed parts of the examination.

Item 7 - If you have a disability that requires special assistance in order for you to participate in the examination, please let us know what assistance you require. The Service will put forth every effort to accommodate you.

Examination Sites	Location Codes	Examination Sites	Location Codes	Examination Sites	Location Codes	Examination Sites	Location Codes
Alabama		Hawaii		Nebraska		South Dakota	
Birmingham	AL1	Honolulu	HI1	Omaha	NB1	Sioux Falls	SD1
Alaska		Idaho		Nevada		Tennessee	
Anchorage	AK1	Boise	ID1	Las Vegas	NV1	Knoxville	TN1
Arizona		Illinois		New Hampshire		Memphis	TN2
Phoenix	AZ1	Chicago	IL1	Portsmouth	NH1	Nashville Nashville	TN3
Arkansas		Springfield	IL2	New Jersey		Texas	
Little Rock	AR1	Indiana		Caldwell	NJ1	Austin	TX1
California		Indianapolis	IA1	New Mexico		Dallas	TX2
Burbank	CA1	lowa		Albuguergue	NM1	Houston	TX3
Fullerton	CA2	Des Moines	IO1	New York		Lubbock	TX4
Oakland	CA3	Kansas		Albany	NY1	Utah	
Oxnard	CA4	Wichita	KS1	Brooklyn	NY2	Salt Lake City	UT1
Sacramento	CA5	Kentucky		Buffalo	NY3	Vermont	
San Bernardino	CA6	Lexington	KY1	Manhattan	NY4	Burlington	VT1
San Diego	CA7	Louisville	KY2	Svracuse	NY5	Virginia	
San Jose	CA8	Louisiana		North Carolina		Bailey's Crossroads	s VA1
Fresno	CA9	New Orleans	LA1	Charlotte	NC1	Richmond	VA2
Colorado	0, 10	Maine		Greensboro	NC2	Washington	V/ (_
Denver	CO1	Augusta	ME1	Raleigh	NC3	Seattle	WA1
Connecticut	001	Maryland		North Dakota	1100	Spokane	WA2
Hartford	CT1	Baltimore	MD1	Fargo	ND1	Tacoma	WA3
Delaware	011	New Carrollton	MD2	Ohio	1101	West Virginia	***
Wilmington	DE1	Massachusetts		Canton	OH1	Charleston	WV1
Florida	DLI	Boston	MA1	Cincinnati	OH2	Wisconsin	V V V I
Altamonte Springs	s FL1	Michigan		Cleveland	OH3	Milwaukee	WI1
Ft. Lauderdale	FL2	Detroit	MI1	Columbus	OH4	Wyoming	V V I I
Ft. Pierce	FL3	Lansing	MI2	Toledo	OH5	Casper	WY1
Jacksonville	FL4	Minnesota		Oklahoma	0115	International	V V I I
Miami	FL5	St. Paul	MN1	Oklahoma City	OK1	Berlin, Germany	IT1
Niceville	FL6	Mississippi		Tulsa	OK1	London, England	IT2
Tampa	FL7	Jackson	MS1	Oregon	ONZ	Mexico City,	112
Venice	FL7 FL8	Missouri		Medford	OR1	Mexico City,	IT3
	FLO	Kansas City	MO1	Portland	OR1 OR2		113 1T4
Georgia	C A 1	St. Louis	MO2		UR2	Paris, France	
Atlanta	GA1	Montana	WOZ	Pennsylvania	DA4	Rome, Italy	IT5
		Helena	MT1	Philadelphia	PA1 PA2	Singapore	IT6 IT7
		Ticicia	IVIII	Pittsburgh	PA2	Tokyo	117
				Rhode Island	DIA		
				Providence	RI1		
				South Carolina			
				Columbia	SC1		

Form 2587 (Rev. June 2001) Exhibit A

Conditions For Special Enrollment Examination

Candidates must take all four parts of the examination the first year. Candidates who achieve a passing score on **one** or **two** parts of the examination have the following three years in which to pass the part(s) failed, provided they meet the following conditions:

- 1) Candidates must achieve the minimum retention score on EACH part failed in the first year. The minimum retention score is 90 percent of the passing score set for the part(s) failed.
- 2) Candidates MUST take ALL failed parts of the examination in the second year, all remaining parts the third year, all remaining parts the fourth year.
- 3) Candidates must achieve a score no less than 90 percent of the passing score (minimum retention score) for any parts taken in the second and third years in order to remain eligible to try again. That is to say that if you score below the minimum retention score on any part taken in the second or third year, you would be required to retake the examination in its entirety should you wish to continue.
- 4) Candidates who do not pass all four parts of the examination by the end of the fourth year must start over again.
- 5) Candidates who pass three of the four parts the first year do NOT have to achieve the minimum retention score on the part failed. Therefore, they would be required to take only the part failed the following year.

QUESTIONS AND ANSWERS

Question: If an individual is unable to retake the examination in a subsequent year, would he/she lose credit for examination parts passed?

Answer: Yes, in most cases, since the examination assumes continuity. However, if the candidate is able to give compelling reasons for a waiver, e.g. serious illness or a death in the family, it could be granted.

Question: In the above situation, does the candidate still have only four years to complete the examination successfully or is the candidate allowed additional years?

Answer: The years a candidate misses taking the examination under a waiver will not count against the four years. Each waiver would extend the period one year. However, there is a six year limitation. That is, the candidate must complete the examination successfully within six years if granted any waiver, including years for which waivers are granted.

Question: May an individual change the location in which he/she takes the examination from year to year?

Answer: Yes.

Question: Would an individual who passed one or more parts of the examination in the first year and again failed the parts he/she had to take in the second year be able to carry over first year credit?

Answer: Yes. The candidate would retain credit for any part passed in the first year for the remaining three years, provided he/she met the minimum retention score and parts required to be taken. These conditions are stated above.

Question: What if an individual took all four parts of the examination in 2000 and didn't pass any of the four parts?

Answer: The four year requirement does not take effect until the candidate passes at least one part of the examination.

Question: May an individual take one part of the examination each year for four years?

Answer: No. Candidates must take all four parts the first year, all failed parts the second year, all remaining failed parts in the third year, and all remaining failed parts in the fourth year.

Question: How many years may an individual take the examination without passing at least one part?

Answer: There is no limit.

Further questions may be directed to Internal Revenue Service, Enrolled Practitioner Program Unit, P.O. Box 33968, Detroit, MI 48232. The telephone number is (313) 234-1280 or at their e-mail address: EPP@irs.gov.

Part 2

Form 2587 (Rev. June 2001) Preparation for Examination

All questions in the 2001 examination will refer to the Internal Revenue Code as amended through December 31, 2000. Questions for the most part will relate to tax year 2000. It will be so stated if the question refers to a tax year other than 2000.

Request for 2000 Examination Questions and Official Answers

The 2000 Special Enrollment Examination (SEE) questions and answers in paper form are not available at any IRS location. However, you may download the 1999 and 2000 SEE questions and answers from http://www.irs.gov/bus_info/tax_pro/rep-client.html.

If you would like to have a paper copy of the 2000 Special Enrollment Examination guestions and official answers, you may obtain one, free of charge, by contacting one of the following organizations:

National Association of Enrolled Agents 200 Orchard Ridge Dr., Suite 302 Gaithersburg, MD 20878 (301) 212-9608 (301) 990-1611 (Fax)

National Society of Tax Professionals P.O. Box 2575 Vancouver, WA 98668-2575 (360) 695-8309 (360) 695-7115 (Fax) ATTN: EA Exam Department

National Association of Tax Practitioners 720 Association Drive Appleton, WI 54914-1483 1-800-558-3402 (U.S.) 1-800-242-3430 (WI)

National Society of Accountants 1010 North Fairfax Street Alexandria, VA 22314 (703) 549-6400 (703) 549-2984 (Fax)

Zip Code

1-800-747-0001 (Fax)

2001 SEE Kit Study Material Request

You may request the SEE Kit by internet @ http://www.irs.gov/bus info/tax pro/rep-client.html or you may order, free of charge, the d of tudy

addition, IRS produces most of the 1796). Only a few products are r	he information included in the SEE Kit el not included on this CD-ROM, however, v lect either the "PRINTED COPY" version	ectroni	ormation to assist you in preparing for the examination. In cally on "The Federal Tax Products" CD-ROM (Publication supplement the necessary "printed" copy materials neede "ELECTRONIC/CD-ROM" version of the 2001 SEE Kit S
Electronic or CD-ROM included on the CD-RO	•	EE Kit	Study Material (Plus the Printed Copy Version of Items no
☐ Printed Version of the 2☐ Part 1	2001 SEE Kit Study Material (Check the a	appropi Part 4	iate box(es))
-4 Megabytes of	lows95 ntium-based personal computer;		Macintosh -Macintosh 68020-68040: 2 megabytes of application RAM -Power Macintosh: 4.5 Megabytes of application RAM -Apple System Software version 7.5 or later -CD-ROM drive capable of reading ISO 9660 format
your request to: IRS Western	d complete mailing address. Please print Area Distribution Center dova, CA 95743-0001	"SEE"	n the lower left front corner of your envelope and send
DO NOT SEND THIS REQUE	EST FORM WITH YOUR APPLICAT	ION F	ORM 2587
Please expedite shipment of below.	packet(s) of IRS Special Enrollment E	Examin	ation Study Material to the name and address shown
Name			
Street			

City

State

Department of the Treasury Internal Revenue Service Form **2587** (Rev. June 2001)

Application for Special Enrollment Examination

MAIL BY DUE DATE — NO EXTENSIONS GRANTED

OMB	No.	1545-	0949

In accordance with section 10.4(a), Treasury Department Circular No. 230 I apply to take The 2001 Special Enrollment Examination.

Candidate No. (IRS use only)

READ INSTRUCTIONS BEFORE COMPLETING— Please type or print legibly. Mail Part 4 with your fee to the Internal Revenue Service, P.O. Box 845854, Dallas TX 75284-5854. **NOTE:** Mail sent by special courier (Fed Ex, UPS, etc.) MUST be mailed to: Remittance Processing Dept, 5th Floor, LBX 845854, 1401 Elm Street, Dallas, TX 75202. **Your application must be postmarked by the U.S. Postal Service or similarly evidenced if a private mailing service was used, no later than July 31, 2001.**

If you have a fee credit or part(s) credit from the previous year's examination, attach a copy of the written authorization provided you by the IRS. If you have any questions regarding this application, call (313) 234-1280 or e-mail at EPP@irs.gov.

1. Name (Last, First, M.I.)	3. Social Security No.		
		Yours Spouse's	
2. Mailing Address	4. Telephone No. Work		
Optional Consent to Disclosure of Mailing Address - Read By checking this box, I hereby submit my consent under the	E-mail		
Office of Director of Practice to disclose my mailing address.		Fax No.	
 Preferred Examination Site Fill in Location Code below (See instructions) 	6. Parts to be taker	n	
a. First Choice — — —	ALL Parts	Part 1 Part 2	
b. Second Choice		Part 3 Part 4	
c. Third Choice			
7. If you have a disability that requires special assistance, pleas	se explain.		
8.			
Your Signature		Date	

Before you mail Part 4, please make sure you: have signed and dated it; have checked the box(es) showing the part(s) of the exam you are required to take; and have included your examination fee (check or money order made payable to the Internal Revenue Service). Mail to: IRS P.O. Box 845854, Dallas, TX 75284-5854

Back of Part 4

Paperwork Reduction Act Notice:

We ask for the information on this application to carry out the requirements of 31 Code of Federal Regulations Subtitle A, Part 10, Section 10.4(a). We need the information to identify applicants for the Special Enrollment Examination.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number.

The time needed to complete this form will vary depending on individual circumstances. The estimated average time is 6 minutes.

If you have comments concerning the accuracy of this time estimate or suggestions for making this form simpler, we would be happy to hear from you. You can write to the Tax Forms Committee, Western Area Distribution Center, Rancho Cordova, CA 95743-0001. **DO NOT** send the application to this address. Instead, mail the form with your fee to the Internal Revenue Service, PO Box 845854, Dallas, TX 75284-5854.

PRIVACY ACT STATEMENT

Collection of this information is authorized by Section 330 of Title 31, United States Code, and Part 10 of Title 31, Code of Federal Regulations. The primary use of this information is for the Director of Practice to administer a written examination testing for special competence in tax matters. Disclosures of the information may be made to Federal, state, or foreign agencies if relevant for their use in investigations of violations of laws or regulations, for hiring and retaining an individual, or granting a security clearance, license, contract, grant or other benefit. Furnishing the information on this form is voluntary but failure to do so may result in failure to grant you enrollment.

Department of the Treasury Internal Revenue Service Form **2587** (Rev. June 2001)

Application for Special Enrollment Examination

MAIL BY DUE DATE — NO EXTENSIONS GRANTED

OMB No.	1545-0949
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In accordance with section 10.4(a), Treasury Department Circular No. 230 I apply to take The 2001 Special Enrollment Examination.

Candidate No. (IRS use only)

READ INSTRUCTIONS BEFORE COMPLETING— Please type or print legibly. Mail Part 4 with your fee to the Internal Revenue Service, P.O. Box 845854, Dallas TX 75284-5854. **NOTE:** Mail sent by special courier (Fed Ex, UPS, etc.) MUST be mailed to: Remittance Processing Dept, 5th Floor, LBX 845854, 1401 Elm Street, Dallas, TX 75202. **Your application must be postmarked by the U.S. Postal Service or similarly evidenced if a private mailing service was used, no later than July 31, 2001.**

If you have a fee credit or part(s) credit from the previous year's examination, attach a copy of the written authorization provided you by the IRS. If you have any questions regarding this application, call (313) 234-1280 or e-mail at EPP@irs.gov.

1. Name (Last, First, M.I.)	3. Social Security No.		
		Yours Spouse's	
2. Mailing Address	4. Telephone No. Work		
Optional Consent to Disclosure of Mailing Address - Read	E-mail		
By checking this box, \square I hereby submit my consent under the Office of Director of Practice to disclose my mailing address.	Fax No.		
5. Preferred Examination Site	6. Parts to be take	n	
Fill in Location Code below (See instructions)		5	
a. First Choice — — —	ALL Parts	Part 1 Part 2	
b. Second Choice		Part 3 Part 4	
c. Third Choice			
7. If you have a disability that requires special assistance, pleas	se explain.		
8.			
Your Signature		Date	

Before you mail Part 4, please make sure you: have signed and dated it; have checked the box(es) showing the part(s) of the exam you are required to take; and have included your examination fee (check or money order made payable to the Internal Revenue Service). Mail to: IRS P.O. Box 845854, Dallas, TX 75284-5854