



TENNESSEE STATE BOARD OF ACCOUNTANCY  
 500 JAMES ROBERTSON PARKWAY  
 NASHVILLE, TENNESSEE 37243-1141  
 (615) 741-2550 or 1-(888)-453-6150

Rule 0020-01-.11 requires that each firm (with the exception of sole proprietors with no other CPA employees) disclose the following information upon renewal. Please use supplemental pages as necessary. You may attach the disclosure during the online renewal or submit the form via mail, fax to 615-532-8800, or email to karen.condon@tn.gov. The firm permit renewal will not be complete until this information is received.

Firm Name and Permit Number \_\_\_\_\_

Type of Organization \_\_\_\_\_

Office Physical Address \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

Individuals With an Equity or Voting Interest in the Firm		Percentage of:	
Name	Address	Ownership	Voting Rights

Non-CPA Owners	% of Working Time in Firm

CPA/PA Employees			
Name	Address	License #	State

Resident Manager			
Name	Address	License #	State

Those Responsible for Supervising or Providing Attest Services		
Name	License #	State

Indicate the firm's peer review program status (circle one):    **Enrolled**    **Exempt**

Period ending of last attest engagement \_\_\_\_\_

Year end of the firm's last peer review \_\_\_\_\_

\_\_\_\_\_  
 Resident Manager (Print Name) License #

\_\_\_\_\_  
 Resident Manager Signature Date