Form **8821**

(Rev. February 2020)

Department of the Treasury Internal Revenue Service

Tax Information Authorization

► Go to www.irs.gov/Form8821 for instructions and the latest information.

▶ Don't sign this form unless all applicable lines have been completed.
 ▶ Don't use Form 8821 to request copies of your tax returns or to authorize someone to represent you.

C	MB No. 1545-1165				
For IRS Use Only					
Received	by:				
Name					
Telephon	e				
Function					
Date					

					Duic			
1	Taxpayer information. Taxpaye	er must sign and date this form o	on line 7.		•			
Taxpayer name and address			Tax	Taxpayer identification number(s)				
			Day	rtime telephone numbei	Plan number (if applicable)			
2	2 Appointee. If you wish to name more than one appointee, attach a list to this form. Check here if a list of additional appointees is attached ▶ □							
Name and address			CAF No.					
			PIIN					
			reiephone No.					
			Fax No Check if new: Address ☐ Telephone No. ☐ Fax No. ☐					
			1					
3	Tax Information. Appointee is a periods, and specific matters yo			itial tax information for 1	the type of tax, forms,			
	☐ By checking here, I authorize	access to my IRS records via a	ın Intermedia	ate Service Provider.				
Emr	(a) Type of Tax Information (Income, coloyment, Payroll, Excise, Estate, Gift,	(b) Tax Form Number (1040, 941, 720, etc.)	Year	(c) (s) or Period(s)	(d) Specific Tax Matters			
CIVI	Penalty, Sec. 4980H Payments, etc.)							
4	Specific use not recorded on use not recorded on CAF, check							
	Disclosure of tax information (a If you want copies of tax information) basis, check this box Note: Appointees will no longer	mation, notices, and other writ	ten commun	ications sent to the ap	opointee on an ongoing ▶ □			
ŀ	s If you don't want any copies of r							
6	6 Retention/revocation of prior tax information authorizations. If the line 4 box is checked, skip this line. If the line 4 box isn't checked, the IRS will automatically revoke all prior Tax Information Authorizations on file unless you check the line 6 box and attach a copy of the Tax Information Authorization(s) that you want to retain							
7	7 Signature of taxpayer. If signed by a corporate officer, partner, guardian, partnership representative (or designated individual, if applicable), executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the legal authority to execute this form with respect to the tax matters and tax periods shown on line 3 above.							
	► IF NOT COMPLETE, SIGNED), AND DATED, THIS TAX INFO	DRMATION A	AUTHORIZATION WIL	L BE RETURNED.			
	▶ DON'T SIGN THIS FORM IF IT IS BLANK OR INCOMPLETE.							
	Signature Date							
Print Name					Title (if applicable)			