8821

(Rev. January 2018)

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.

	OMB No. 1545-1165 For IRS Use Only			
	Received by:			
	Name			
	Telephone			
	Function			

1 Taxpayer information. Taxpaye	r must sign and date this form	on line 7.		
Taxpayer name and address		Taxpayer identification number(s)		
UN-CHUN CHEN		336-19-0841		
F., NO.120, YANGGUANG ST., NEIHU [DIST., TAIPEI, TAIWAN	Daytime telephone num 0012099477078	nber Plan number (if applicable)	
2 Appointee. If you wish to name appointees is attached ►	more than one appointee, attac	ch a list to this form. Check here	if a list of additional	
lame and address		CAF No.		
		CAF No. PTIN		
		Telephone No.		
		Fax No.		
		Check if new: Address T	elephone No. 🔲 🛮 Fax No. 🗀	
3 Tax Information. Appointee is a periods, and specific matters you			for the type of tax, forms,	
☐ By checking here, I authorize	access to my IRS records via	an Intermediate Service Provider.		
(a) Type of Tax Information (Income, Employment, Payroll, Excise, Estate, Gift, Civil Penalty, Sec. 4980H Payments, etc.)	(b) Tax Form Number (1040, 941, 720, etc.)	(c) Year(s) or Period(s)	(d) Specific Tax Matters	
INDIVIDUAL INCOME TAX	1040, 1040NR, 1040NR-EZ	2019	N/A	
5 Disclosure of tax information (a If you want copies of tax inform basis, check this box Note. Appointees will no longer to b If you don't want any copies of note.	mation, notices, and other writ	ten communications sent to the	e appointee on an ongoing	
6 Retention/revocation of prior t isn't checked, the IRS will autom box and attach a copy of the Tax	natically revoke all prior Tax Info		less you check the line 6	
To revoke a prior tax information	authorization(s) without submi	tting a new authorization, see the	line 6 instructions.	
7 Signature of taxpayer. If signed administrator, trustee, or party of the tax matters and tax periods s	ther than the taxpayer, I certify	, guardian, partnership represent that I have the authority to execu		
► IF NOT COMPLETE, SIGNED	, AND DATED, THIS TAX INFO	ORMATION AUTHORIZATION V	VILL BE RETURNED.	
► DON'T SIGN THIS FORM IF I	T IS BLANK OR INCOMPLET	E.		
\checkmark		~	7 mm/dd/yyyy	
Signature		Da	ate	
7				
✓				
Print Name		Title	e (if applicable)	