(Rev. January 2018) Department of the Treasury

Power of Attorney and Declaration of Representative

OMB No. 1545-0150 For IRS Use Only Received by:

nternal Reven	ue Service	▶ 0	to to www.irs.gov/Form	<i>n2848</i> for I	nstructio	is and the latest in	formation.		Name	
Part I		of Attorney	IIE Participant ID						Telephone	
	Caution: A separate Form 2848 must be completed for								Function	
			an representation befo						Date / /	
			er must sign and date th	is form on p	page 2, lin					
Taxpayer name and address						Taxpayer Identification number(s) 187-33-0216				
Irina Tsiryapkina					, and a second	Daytime telephone number Plan number (if applicable)				
c/o Grantax/IIE P.O. Box 20507 DHCC, New York, NY 10017-0005						Daytinte teleprione multiper			aumer (ii sphiicsole)	
			10017-0005 ative(s) as attomey(s)-in-	-fact:						
			anve(s) as anomey(s)-in- id date this form on pag							
		(a) must sign ai	a date this form on pag	o z, raitii.		CAE No.	0312	-03334R	•	
Name and address					CAF No. 0312-03334R PTIN P01882792					
Andy Chen c/o Grantax/IIE P.O. Box 20507 DHCC, New York, NY 10017-0005 Check if to be sent copies of notices and communications					Telephone No. 212-984-5553					
										Check if new: Address 🔲 Telephone No. 🗌 Fax No. 🗌
					lame and a	address				
						CAF NoP00123037				
Wendy Lau c/o Grantax/IIE						Telephone No.				
P.O. Box 20507 DHCC, New York, NY 10017-0005						Fax No.	212-9	984-5553		
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lame and address						CAF No.				
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Mater IDC cando nations and communications to only two convecentatives						Fax No				
(Note: IRS sends notices and communications to only two representatives.) Name and address										
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-			ernal Revenue Service a	•						
			to complete this line 3). V							
			ion and to perform acts tha							
			agreements, consents, or si		ients (see ir I	istructions for line bat	or authorizing :	a represen	tauve to sign a return).	
Description of Matter (Income, Employment, Payroll, Excise, Estate, Gift, Whistleblower, Practitioner Discipline, PLR, FOIA, Civil Penalty, Sec. 5000A Shared Responsibility Payment, Sec. 4980H Shared Responsibility Payment, etc.) (see Instructions)								Period(s) (if applicable ee instructions)		
ndividual Income Tax				1040NR,	1040C, 1040, 1040	x, w4,w7		2019 & 2020		
					W-8BEN	, W-8ECI, 2063, 104	125, 8843			
						1868, 2688 & relate				
4 Spe	ck this box.	ot recorded on See the instruct	Centralized Authorizations for Line 4. Specific	tion File (C Use Not I	CAF). If the Recorded	on CAF	is for a spec	ific use n	ot recorded on CAF,	
inst	Additional acts authorized. In addition to the acts listed on line 3 above, I authorize my representative(s) to perform the following acts (see instructions for line 5a for more information): Access my IRS records via an Intermediate Service Provider;									
(1)	Authorize dis	closure to third	parties;	itute or add	i represen	lative(s); 🗹 Sign a	return;			
										
()	Other acts at	uthorized: The p	ower to receive on bel	half of taxp	oayer all d	orresponding tax (efund checl	ks		
			otion Act Notice see ti		•	Cat No.			Form 2848 (Rev. 1-20	