(December 2018)

Partnership Representative Revocation, Designation, and Resignation

OMB No. 1545-0123

Departmen	t of the Treasury									
Internal Re	venue Service	► Go to www	.irs.gov/Form8979 for	instructions a	nd the latest	information	on.			
	Name of Partne	ership					Employer idea	ntification number		
Туре										
Number, street, and room or suite no. If a P.O. box, see instructions.						Tax Year Ending				
Print	City or town, state, and ZIP code. If a foreign address, enter city, province or state, postal code, and country. Follow						/ /			
	City or town, sta	ate, and ZIP code. If a foreign a	laaress, enter city, province	or state, postal co	ode, and country	. Follow the (country's practice	for entering the postal code.		
Check	here if this fo	orm is being filed with a	an Administrative Adj	ustment Requ	uest (Form 8	082 or Fo	orm 1065X)	▶ 🗆		
Part I	Reason	for Filing								
		this form affirmatively		applicable b	oxes):					
1		rship is revoking (checl								
		entity partnership re	•							
	i	□ Designating an en Part II, Section A ar	n tity partnership re and Part III, Section A.			nting a	designated	<i>individual.</i> Complete		
	ii	Designating an <i>ind</i>Sign Part IV, Section		representati	ve. Complet	te Part II,	Section A a	nd Part III, Section B.		
	b \square The	individual partnershi		d (check box	1b(i) or 1b(ii)):				
	i	Designating an ent	-	resentative a	ınd appointii	-	ignated indiv	vidual. Complete Part		
	ii	☐ Designating an <i>ind</i> Sign Part IV, Section	ividual partnership			te Part II,	Section B a	nd Part III, Section B.		
		designated individua	al and appointing a	successor d	esignated i	ndividual	. Complete I	Part II, Section A and		
	_	t III, Section A. Sign Pa								
2 _	-	rship representative is		•	. 5			n.		
		entity partnership re	_				_			
• -		individual partnershi	-		•		_	Part IV, Section C.		
3 [_	ated individual is resign			_					
4 _		partnership representa	_		-	-				
		signating an entity pa etion A and sign Part IV		tative and a	ppointing a	designa	ted individua	al. Complete Part III,		
	b Des	signating an <i>individual</i>	partnership represe	entative. Com	nplete Part II	I, Section	B and sign F	Part IV, Section E.		
Part II	Revoca	tions or Resignation	าร							
Sectio	n A-Revo	cation or Resignation	on of an Entity Par	rtnership Re	presentat	ive or Do	esignated I	ndividual		
	If the	entity partnership rep	resentative or the	designated i	ndividual is	being re	evoked or is	resigning,		
	compl	lete this entire section	n.							
Name of 6	entity partnership	representative					Taxpayer ider	ntification number		
Street add	dress									
City or To			Ctata au Duavinas	Caustin (Cada	ZID av Da	stal Code	Avec seds and	I talambana mumbar		
City or To	own		State or Province	Country Code	ZIP or Po	ostal Code	Area code and	I telephone number		
Last Nam	e of Designated I	ndividual	First Name		Middle Initial	Suffix	Taxpayer ider	ntification number		
Street add	dress									
City or To	own		State or Province	Country Code	ZIP or Po	ostal Code	Area code and	I telephone number		

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Part II Revocations or Resignation			D. 1						
Section B—Revocation or Resignatio							amploto th	is section	
If the individual partnership Last Name of individual partnership representative	First Name				<u> </u>				
Last Name of individual partnership representative	I list Name	First Name		IVIIGGI	Middle Initial Suffix		Taxpayer identification number		
Street address									
y or Town State or Pro		nce Country Code		Z	ZIP or Postal Code		Area code a	nd telephone numbe	r
Part III Designations and/or Appoir	ntment								
(Both the successor partners	hip represe	ntative	and the app	ointe	d desig	gnated i	ndividual	must have	
substantial presence in the U	nited State	s. See ii	nstructions).						
Section A-Designation of Entity Part	nership R	epreser	ntative and/	or Ap	point	ment o	f a Desigr	nated Individu	al
If an entity partnership repr		is being	designated	or a	design	ated inc	dividual is l	being appointe	d,
complete this entire section Name of partnership representative	1.						Taypayor id	lentification number	
Name of partnership representative						Taxpayerio	lenuncation number		
U.S. Street address									
City or Town		State		Z	ZIP Code		U.S. Area code and telephone number		umber
•							·		
Last Name of Designated individual	First Name	First Name		Middl	iddle Initial Suffix		Taxpayer identification number		
U.S. Street address							1		
City or Town			ZIP Code			U.S. Area code and telephone number		ımber	
Section B—Designation of an Individu	ual Partnei	ship Re	epresentativ	ve					
If the partnership represent		designa	ated is an inc						
Last Name of partnership representative	First Name			Middle Initial		Suffix	Taxpayer identification number		•
U.S. Street address							1		
City or Town			State		ZIP Code		U.S. Area code and telephone number		
Part IV Signature Section									
Section A—Signature for Revocation	-		-						
If this form is being filed to			•	epres	entativ	e or the	e designate	ed individual ar	nd to
designate/appoint a succes		ete this	section.						
The undersigned declares under penalties of perjury 1 am duly authorized by the partnership or LLC to (1)		ianation of	the partnership	ranraca	ontativo (or the ann	nintment of th	e designated individ	dual and
(2) make a designation of a successor partnership rep									uai ai i
successor designated individual.	,	• • •	ŭ		,		,		
X								, ,	
Signature of authorized person								Date (mm/dd/yyyy)	
Print/Type name of authorized person									
Maharahana ing manahanan ing m								-	
If the above name is an entity, print/type name of a	uthorized perso	n and title							

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Pai	t IV Signature Section (continued)	
Se	ction B—Signature for Resigning Entity Partnership Representative	
	If this form is being filed by a designated individual for the resignation of the entity part	nership
	representative, complete this section.	
N.		1 1
•	Signature of designated individual	Date (mm/dd/yyyy)
	Print/Type name of designated individual	
	Print/Type name of resigning entity partnership representative	
Se	ction C—Signature for Resigning Individual Partnership Representative	
	If this form is being filed by an individual partnership representative to resign, complete	this section.
	, , , , , , , , , , , , , , , , , , , ,	
,		/ /
•	Signature of resigning individual partnership representative	Date (mm/dd/yyyy)
	Print/Type name of resigning individual partnership representative	
Se	ction D—Signature for Resigning Designated Individual	
	If this form is being filed by a designated individual to resign, complete this section.	
	<u> </u>	
k		/ /
•	Signature of resigning designated individual	Date (mm/dd/yyyy)
	Print/Type name of resigning designated individual	
Se	ction E—Signature for Designation of a Partnership Representative Without Revocation	
	If this form is being filed to designate a partnership representative (and appoint a designate a desig	nated individual, if
	applicable) because no partnership representative designation is in effect, complete the	is section.
	der penalties of perjury I declare that I am duly authorized by the partnership or LLC to make this designation of the partnersh	nip representative (and
app	pointment of a designated individual, if applicable).	
, k		1 1
•	Signature of authorized person	Date (mm/dd/yyyy)
	Print/Type name of authorized person	
	If the above name is an entity, print/type name of authorized person and title	-

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