Form 8821				
(Rev. January 2018)				
Department of the Treasury Internal Revenue Service				

Taxpayer name and address

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
Date

1 Taxpay	er information.	Taxpayer	must sign	and date	e this	form	on line	7
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Taxpayer identification number(s)				
Daytime telephone number	Plan number (if applicable)			

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 ad	dress
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CAF No.
PTIN
Telephone No.
Fax No.
Check if new: Address 🗌 Telephone No. 🗌 Fax No. 🗌

3 Tax Information. Appointee is authorized to inspect and/or receive confidential tax information for the type of tax, forms, periods, and specific matters you list below. See the line 3 instructions.

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			
4 Specific use not recorded on use not recorded on CAF, check		(CAF). If the tax information au f you check this box, skip lines 5				
5 Disclosure of tax information (you must check a box on line 5a	a or 5b unless the box on line 4 is	s checked):			
a If you want copies of tax inform basis, check this box			🕨 🔲			
b If you don't want any copies of r		other related materials with the r to your appointee, check this bo				
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.						
To revoke a prior tax information	authorization(s) without submitt	ting a new authorization, see the	line 6 instructions.			
7 Signature of taxpayer. If signed administrator, trustee, or party o the tax matters and tax periods	ther than the taxpayer, I certify t	guardian, partnership representa hat I have the authority to execut				
▶ IF NOT COMPLETE, SIGNED, AND DATED, THIS TAX INFORMATION AUTHORIZATION WILL BE RETURNED.						
► DON'T SIGN THIS FORM IF IT IS BLANK OR INCOMPLETE.						
Signature		Dat	e			
Print Name		Title	(if applicable)			