Form 8821
(Tax Information Authorization)

1 Taxpayer Information. Taxpayer must sign and date this form on line 7.

- Taxpayer name and address
- 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 address
- CAF No.
- PTIN
- 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.

4 Specific use not recorded on Centralized Authorization File (CAF). If the tax information authorization is for a specific use not recorded on CAF, check this box. See the instructions. If you check this box, skip lines 5 and 6 □

5 Disclosure of tax information (you must check a box on line 5a or 5b unless the box on line 4 is checked):

- If you want copies of tax information, notices, and other written communications sent to the appointee on an ongoing basis, check this box □
- Note: Appointees will no longer receive forms, publications, and other related materials with the notices.
- If you don’t want any copies of notices or communications sent to your appointee, check this box □

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 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.

Signature Date

For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

For IRS Use Only

Received by: Name: Telephone: Function: Date:

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