

ALL RISE PROGRAM ATTACHMENT

Form **8821**  
(Rev. January 2021)  
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. See instructions.

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

1 Taxpayer information. Taxpayer must sign and date this form on line 6.

Taxpayer name and address
Taxpayer identification number(s)
Daytime telephone number
Plan number (if applicable)

2 Designee(s). If you wish to name more than two designees, attach a list to this form. Check here if a list of additional designees is attached

Name and address
Guam Department of Revenue & Taxation
P.O. Box 23607, Barrigada, GU 96921
CAF No.
PTIN
Telephone No. 671-635-1840
Fax No. 671-633-2643
Check if to be sent copies of notices and communications

Name and address
CAF No.
PTIN
Telephone No.
Fax No.
Check if to be sent copies of notices and communications

3 Tax information. Each designee 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.

Table with 4 columns: (a) Type of Tax Information, (b) Tax Form Number, (c) Year(s) or Period(s), (d) Specific Tax Matters. Row 1: Income Tax, 1040/1040SR/1040X, 2020, Income Tax.

4 Specific use not recorded on the Centralized Authorization File (CAF). If the tax information authorization is for a specific use not recorded on CAF, check this box.

5 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 5 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 submitting a new authorization, see the line 5 instructions.

6 Taxpayer signature. If signed by a corporate officer, partner, guardian, partnership representative (or designated individual, if applicable), executor, receiver, administrator, trustee, or individual 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.

IF NOT COMPLETED, SIGNED, AND DATED, THIS TAX INFORMATION AUTHORIZATION WILL BE RETURNED.

DON'T SIGN THIS FORM IF IT IS BLANK OR INCOMPLETE.

Signature line with red arrow pointing to the signature area and Date line.

Print Name line with red arrow pointing to the name area and Title (if applicable) line.