Form 4506

(Novmeber 2021)

Department of the Treasury Internal Revenue Service

Request for Copy of Tax Return

▶ Do not sign this form unless all applicable lines have been completed.

▶ Request may be rejected if the form is incomplete or illegible.

► For more information about Form 4506, visit www.irs.gov/form4506.

OMB No. 1545-0429

Tip: Get faster service: Online at www.irs.gov, Get Your Tax Record (Get Transcript) or by calling 1-800-908-9946 for specialized assistance. We have teams available to assist. Note: Taxpayers may register to use Get Transcript to view, print, or download the following transcript types: Tax Return Transcript (shows most line items including Adjusted Gross Income (AGI) from your original Form 1040-series tax return as filed, along with any forms and schedules), Tax Account Transcript (shows basic data such as return type, marital status, AGI, taxable income and all payment types), Record of Account Transcript (combines the tax return and tax account transcripts into one complete transcript), Wage and Income Transcript (shows data from information returns we receive such as Forms W-2, 1099, 1098 and Form 5498), and Verification of Non-filing Letter (provides proof that the IRS has no record of a filed Form 1040-series tax return for the year you request).

1a	Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
2a	If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return
3 (Current name, address (including apt., room, or suite no.), city, state, and ZIP co	de (see instructions)
4 F	Previous address shown on the last return filed if different from line 3 (see instruc-	itions)
5 1	f the tax return is to be mailed to a third party (such as a mortgage company), ea	nter the third party's name, address, and telephone number.
Courtie	on: If the tax return is being sent to the third party, ensure that lines 5 through 7	are completed before signing (see instructions)
6	Tax return requested. Form 1040, 1120, 941, etc. and all attachments schedules, or amended returns. Copies of Forms 1040, 1040A, and 1040E destroyed by law. Other returns may be available for a longer period of tir type of return, you must complete another Form 4506.	s as originally submitted to the IRS, including Form(s) W-2 are generally available for 7 years from filing before they are
	Note: If the copies must be certified for court or administrative proceedings, c	heck here
7	Year or period requested. Enter the ending date of the tax year or period usin///	g the mm/dd/yyyy format (see instructions).
8	Fee. There is a \$43 fee for each return requested. Full payment must be inc be rejected. Make your check or money order payable to "United States or EIN and "Form 4506 request" on your check or money order.	
а		
b	Number of returns requested on line 7	
c	Total cost. Multiply line 8a by line 8b	
9	If we cannot find the tax return, we will refund the fee. If the refund should go t	o the third party listed on line 5, check here
Signatu request managi	on: Do not sign this form unless all applicable lines have been completed. ure of taxpayer(s). I declare that I am either the taxpayer whose name is shown on lited. If the request applies to a joint return, at least one spouse must sign. If signed by any member, guardian, tax matters partner, executor, receiver, administrator, trustee, a Form 4506 on behalf of the taxpayer. Note: This form must be received by IRS with	a corporate officer, 1 percent or more shareholder, partner, or party other than the taxpayer, I certify that I have the authority to
☐ Sig de	gnatory attests that he/she has read the attestation clause and upoclares that he/she has the authority to sign the Form 4506. See instances	pn so reading ructions. Phone number of taxpayer on line 1a or 2a
Sign	Signature (see instructions)	Date
Here	Print/Type name	Title (if line 1a above is a corporation, partnership, estate, or trust)
	Spouse's signature	Date
	Brint/Tuno namo	

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.

	MB No. 1545-1165
F	or IRS Use Only
Received	by:
Name	
Telephon	0
Function	
Date	

1 Taxpayer information. Taxpaye	er must sign and date this fo	<u>rm o</u>	n line 6.					
Taxpayer name and address				Taxpayer identification number(s)				
				Daytime telephone nu	mber Plan number (if applica	ıble)		
2 Designee(s). If you wish to nam designees is attached ▶ □	e more than two designees,	, atta	ch a list	to this form. Check he	ere if a list of additional			
Name and address				CAF No. 0313-61343R				
Legal-Ease Digital Imaging				PTIN				
P.O. Box 1017				Telephone No. 855-534-4003				
Flint, MI 48501-1017				Fax No. 810-547-4030				
Check if to be sent copies of notices and communications				Check if new: Address				
Name and address				CAF No. PTIN Telephone No. Fax No.				
Check if to be sent copies of notice			Check if new: Address Telephone No. Fax No.					
 Tax information. Each designed periods, and specific matters you By checking here, I authorized 	e is authorized to inspect an ou list below. See the line 3 i	nstru	ictions.			s,		
(a)	(b)		Ι	(c)	(d)			
Type of Tax Information (Income, Employment, Payroll, Excise, Estate, Gift, Civil Penalty, Sec. 4980H Payments, etc.)	Tax Form Number (1040, 941, 720, etc.)		,	Year(s) or Period(s)	Specific Tax Matters			
4 Specific use not recorded or specific use not recorded on CA	n the Centralized Authoria F, check this box. See the i	zatio nstru	n File (outlier)	CAF). If the tax inform f you check this box, s	mation authorization is for a kip line 5	✓		
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								
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, SIGNE	ED, AND DATED, THIS TAX	(INF	ORMAT	ION AUTHORIZATIO	N WILL BE RETURNED.			
► DON'T SIGN THIS FORM IF	IT IS BLANK OR INCOMPL	ETE.						
Signature					Date			
Print Name				Ti	tle (if applicable)			