

Form **8821-A**

April 2012

Department of the Treasury
Internal Revenue Service**IRS Disclosure Authorization
for Victims of Identity Theft**

For IRS Use Only

Received by _____

Name _____

Telephone _____

Function _____

Date _____

Taxpayer Information

Taxpayer name _____ Social Security Number _____ Daytime telephone number _____

Taxpayer mailing address _____

City _____ State _____ ZIP code _____

Tax year _____

*Enter the tax year for which your return, and any purported return, was filed. If there are additional years, you must complete and submit another Form 8821-A for each year.***Taxpayer Consent**

I, _____, consent for the Internal Revenue Service to disclose to _____

*(Name of taxpayer)**(Name and Title of recipient official)**(Name of State/Local law enforcement agency)**(Phone number)**(Street address of State/Local law enforcement agency (street, city, state, ZIP code))*

any information related to the processing of my return, or any purported return that may have been filed by a third party using my name and/or social security number without my knowledge or consent, for the tax year listed above. This information includes the return I filed, any purported return filed by a third party, communications between myself and IRS personnel and any other information gathered or generated by the IRS in the processing of my return or any purported return, including the IRS's determination that such return was not my return. This information would not include the identity of, or any investigatory information regarding, the person(s) who may have filed the purported return.

I understand that the state or local law enforcement agency designated above may use this information to investigate and/or prosecute any person(s) who may have been involved in the filing of the purported return or other crimes related to the use of my identifying information. I further understand that the state or local law enforcement agency designated above may share this information with other law enforcement agencies directly involved in this or other investigations and/or prosecutions of crimes related to the use of my identifying information by these persons.

Taxpayer Signature

I certify that I am the taxpayer whose name and/or social security number was used to file my return, or any purported return. If signed by a guardian, executor, receiver, administrator, trustee or party other than the taxpayer, I certify that I have the authority to sign this form with respect to this matter.

Note: Do not sign this form if it is blank or incomplete. The IRS will only accept forms with original signatures.

Signature	Print name	Date signed
_____	_____	_____

IRS regulations require that this disclosure authorization be received by the IRS within 120 days of the date that it is signed by the taxpayer.

Privacy Act and Paperwork Reduction Act Notice

We ask for the information on this form to carry out the Internal Revenue laws of the United States. This form authorizes the IRS to disclose your confidential tax information to the person/agency you appoint. This form is provided for your convenience and its use is voluntary. The information is used by the IRS to determine what confidential tax information your appointee can inspect and/or receive. Section 6103(c) and its regulations require you to provide this information if you want to appoint a designee to inspect and/or receive your confidential tax information. Under section 6109, you must disclose your social security or other taxpayer identification number. If you do not provide all the information requested on the form, we may not be able to honor the authorization. Providing false or fraudulent information may subject you to penalties. We may disclose this information to the Department of Justice for civil or criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to Federal and state agencies to enforce Federal non-tax criminal laws, or to Federal law enforcement and intelligence agencies to combat terrorism.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is 9 minutes. If you have comments concerning the accuracy of these time estimates or suggestions for making Form 8821-A simpler, we would be happy to hear from you. You can write to Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:M:S, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Do not send Form 8821-A to this address.