

**IRS e-file Signature Authorization**

OMB No. 1545-0074

▶ ERO must obtain and retain completed Form 8879.

▶ Go to [www.irs.gov/Form8879](http://www.irs.gov/Form8879) for the latest information.

Submission Identification Number (SID) ▶

Taxpayer's name

LIDROR P JORDAN

Social security number

423-94-5580

Spouse's name

Spouse's social security number

**Part I Tax Return Information — Tax Year Ending December 31, 2021** (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

**Note:** Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

<b>1</b>	Adjusted gross income	<b>1</b>	26790
<b>2</b>	Total tax	<b>2</b>	
<b>3</b>	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	<b>3</b>	77
<b>4</b>	Amount you want refunded to you	<b>4</b>	4529
<b>5</b>	Amount you owe	<b>5</b>	

**Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)**

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

**Taxpayer's PIN: check one box only**

- ☐ I authorize \_\_\_\_\_ to enter or generate my PIN \_\_\_\_\_ as my  
ERO firm name  
signature on the income tax return (original or amended) I am now authorizing.
- ☒ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only**  
if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III  
below.

Your signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**Spouse's PIN: check one box only**

- ☐ I authorize \_\_\_\_\_ to enter or generate my PIN \_\_\_\_\_ as my  
ERO firm name  
signature on the income tax return (original or amended) I am now authorizing.
- ☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only**  
if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III  
below.

Spouse's signature ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_

**Practitioner PIN Method Returns Only—continue below****Part III Certification and Authentication — Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

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Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ TAXSLAYER

Date ▶ 01/30/2022

**ERO Must Retain This Form — See Instructions**  
**Don't Submit This Form to the IRS Unless Requested To Do So**

**Filing Status** ☐ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☒ Head of household (HOH) ☐ Qualifying widow(er) (QW)  
 Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ▶

Your first name and middle initial <b>LIDROR P</b>		Last name <b>JORDAN</b>		Your social security number <b>423-94-5580</b>		
If joint return, spouse's first name and middle initial		Last name		Spouse's social security number		
Home address (number and street). If you have a P.O. box, see instructions. <b>1206 CARTER HILL ROAD 6112</b>				Apt. no.		
City, town, or post office. If you have a foreign address, also complete spaces below. <b>MONTGOMERY</b>			State <b>AL</b>		ZIP code <b>36106-0112</b>	
Foreign country name		Foreign province/state/county		Foreign postal code		
<b>Presidential Election Campaign</b> Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse						

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? ☐ Yes ☒ No

**Standard Deduction** **Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent  
☐ Spouse itemizes on a separate return or you were a dual-status alien

**Age/Blindness** You: ☐ Were born before January 2, 1957 ☐ Are blind Spouse: ☐ Was born before January 2, 1957 ☐ Is blind

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for (see instructions):	
(1) First name	Last name			Child tax credit	Credit for other dependents
MYLES A	CHATMON	421-55-8480	SON	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ANDREW C	CHATMON	424-49-8605	SON	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

Attach Sch. B if required.	<b>1</b>	Wages, salaries, tips, etc. Attach Form(s) W-2		<b>1</b>	26790
	<b>2a</b>	Tax-exempt interest	<b>2a</b>	<b>2b</b>	
	<b>3a</b>	Qualified dividends	<b>3a</b>	<b>3b</b>	
	<b>4a</b>	IRA distributions	<b>4a</b>	<b>4b</b>	
	<b>5a</b>	Pensions and annuities	<b>5a</b>	<b>5b</b>	
	<b>6a</b>	Social security benefits	<b>6a</b>	<b>6b</b>	
<b>Standard Deduction for—</b> • Single or Married filing separately, \$12,550 • Married filing jointly or Qualifying widow(er), \$25,100 • Head of household, \$18,800 • If you checked any box under <b>Standard Deduction</b> , see instructions.	<b>7</b>	Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>		<b>7</b>	
	<b>8</b>	Other income from Schedule 1, line 10		<b>8</b>	
	<b>9</b>	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>		<b>9</b>	26790
	<b>10</b>	Adjustments to income from Schedule 1, line 26		<b>10</b>	
	<b>11</b>	Subtract line 10 from line 9. This is your <b>adjusted gross income</b>		<b>11</b>	26790
	<b>12a</b>	Standard deduction or itemized deductions (from Schedule A)	<b>12a</b>	18800	
	<b>b</b>	Charitable contributions if you take the standard deduction (see instructions)	<b>12b</b>	250	
	<b>c</b>	Add lines 12a and 12b		<b>12c</b>	19050
	<b>13</b>	Qualified business income deduction from Form 8995 or Form 8995-A		<b>13</b>	
	<b>14</b>	Add lines 12c and 13		<b>14</b>	19050
	<b>15</b>	Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-		<b>15</b>	7740