

Form **8879-PE**

E-file Authorization for Form 1065

OMB No. 1545-0123

(For return of partnership income or administrative adjustment request)

- ▶ ERO must obtain and retain completed Form 8879-PE.
- ▶ Go to www.irs.gov/Form8879PE for the latest information.

2021

Department of the Treasury
Internal Revenue Service

For calendar year 2021, or tax year beginning _____, 2021, and ending _____, 20____.

Name of partnership _____

Employer identification number _____

Part I Form 1065 Information (Whole dollars only)	
1 Gross receipts or sales less returns and allowances (Form 1065, line 1c)	1
2 Gross profit (Form 1065, line 3)	2
3 Ordinary business income (loss) (Form 1065, line 22)	3
4 Net rental real estate income (loss) (Form 1065, Schedule K, line 2)	4
5 Other net rental income (loss) (Form 1065, Schedule K, line 3c)	5

Part II Declaration and Signature Authorization of Partner or Member or Partnership Representative

I declare under penalties of perjury that:

- 1a. If the Form 1065 is being transmitted as part of a return of partnership income, I am a partner or member of the named partnership.
- b. If the Form 1065 is being transmitted as part of an administrative adjustment request (AAR), I am the partnership representative representative(PR) of the named partnership.
2. I have examined a copy of the partnership's electronic Form 1065 (whether used as return or AAR) and accompanying forms, schedules, and statements, and to the best of my knowledge and belief, it/they is/are true, correct, and complete.
3. I am fully authorized to sign the return or AAR on behalf of the partnership.
4. The amounts shown in Part I above are the amounts shown on the electronic copy of the partnership's Form 1065.
5. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to transmit the partnership's return or AAR to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission and (b) the reason for any delay in processing the return or AAR.
6. I have selected a personal identification number (PIN) as my signature for the partnership's electronic return of partnership income or AAR.

Partner or Member or PR PIN: check one box only

- I authorize _____ to enter my PIN _____ as my signature
ERO firm name Don't enter all zeros
 on the partnership's 2021 electronically filed return of partnership income or AAR.
- As a Partner or Member or PR of the partnership, I will enter my PIN as my signature on the partnership's 2021 electronically filed return of partnership income or AAR.

Partner or Member or PR signature ▶ _____
Title ▶ _____ **Date** ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. _____
Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return of partnership income or AAR for the partnership indicated above. I confirm that I am submitting this return or AAR in accordance with the requirements of **Pub. 3112**, IRS e-file Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ _____

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



ERO MUST RETAIN THIS FORM.
DO NOT SUBMIT THIS FORM TO
 GEORGIA DEPARTMENT OF REVENUE
 UNLESS REQUESTED TO DO SO.

IRS DCN OR SUBMISSION ID

**GA-8453P
 2021**

**GEORGIA PARTNERSHIP TAX RETURN DECLARATION FOR ELECTRONIC FILING
 SUMMARY OF AGREEMENT BETWEEN TAXPAYER AND ERO OR PAID PREPARER**

Beginning _____ 20 _____ , and Ending _____ 20 _____

Original Return Amended Return Amended Due to IRS Audit Name Change Address Change Final Return Composite Return Filed

FEI Number	Name	Number of K-1s	
		Resident	Non-Resident
GA Withholding Tax Acct. Number		Business Address	Country
Payroll WH Number	Nonresident WH Number		
GA Sales Tax Reg. Number	City or Town	State	Zip Code
NAICS Code	Type of Business	Location of Books for Audit (City & State)	

PART I TAX RETURN INFORMATION

1. Total Income for Georgia purposes (Schedule 2, Line 1) 1. _____
2. Total Georgia net income (Schedule 2, Line 7) 2. _____

PART II DECLARATION OF PARTNER

Under the penalty of perjury, I declare that I am a general partner or limited liability company member of the above taxpayer and the information I have provided to my Electronic Return Originator (ERO) and/or Online Service Provider and/or Transmitter and the amounts shown in Part I agree with the amounts shown on the corresponding lines of the electronic portion of my 2021 Georgia Partnership Tax Return. I declare that I have examined my tax return, including accompanying schedules and statements, and to the best of my knowledge and belief, my return is true, correct and complete. I consent that the electronic portion of my return may be sent to the IRS by my ERO/Online Service Provider/Transmitter.

SIGN

HERE _____ Date _____ E-mail Address _____

Signature of Partner or LLC Member

PART III DECLARATION OF ELECTRONIC RETURNS ORIGINATOR AND PAID PREPARER

I DECLARE THAT I HAVE REVIEWED THE ABOVE TAXPAYER'S RETURN AND THAT THE ENTRIES ON THE GA-8453P ARE COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

ERO'S USE ONLY	ERO's Signature _____	Date _____
	Firm's Name _____	Check also if paid preparer <input type="checkbox"/>
	Address _____	FEIN/PTIN _____
	City, State & Zip Code _____	SSN/TIN _____

IF PREPARED BY A PERSON OTHER THAN THE TAXPAYER, THIS DECLARATION IS BASED ON ALL THE INFORMATION OF WHICH THE PREPARER HAS KNOWLEDGE.

PAID PREPARER'S USE ONLY	Paid Preparer's Signature _____	Date _____
	Firm's Name _____	FEIN/PTIN _____
	Address _____	SSN/TIN _____
	City, State & Zip Code _____	

KEEP A COPY WITH YOUR RECORDS