

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 HYG Real Estate LP 84 NE LOOP 410 STE 242 SAN ANTONIO TX 78216	Taxpayer identification number(s) 32-0673486 Daytime telephone number (210) 728-3834
	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 SARA CRAWFORD 84 NE LOOP 410 STE 252 San Antonio TX 78216 Check if to be sent copies of notices and communications <input type="checkbox"/>	CAF No. _____ PTIN P00249911 Telephone No. (210) 618-5921 Fax No. (888) 811-4355 Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>
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Name and address Check if to be sent copies of notices and communications <input type="checkbox"/>	CAF No. _____ PTIN _____ Telephone No. _____ Fax No. _____ Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>
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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.

(a) Type of Tax Information (Income, Employment, Payroll, Excise, Estate, Gift, Civil Penalty, Sec. 4980H Payments, etc.)	(b) Tax Form Number (1040, 941, 720, etc.)	(c) Year(s) or Period(s)	(d) Specific Tax Matters
INCOME TAX	1065	2022	

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

Carlos Garza

3/31/2023

Signature

Date

CEGH

Print Name

Title (if applicable)

eSignature - Certificate of Completion

Document id: **DSD58YDL**
Signatures: **1**
Initials: **1**
Signature originator: **Dulce Valadez (dulce@correacrawford.com)**
Originator IP address: **24.153.153.250**
Time zone: **UTC**
Document pages: **1**

Signers

Signer:	carlosegarza@gmail.com carlosegarza@gmail.com	Signature Carlos Garza <i>Carlos Garza</i>
IP address:	177.240.145.118	
User id:	FWST1MB8V	Initials CEGH <i>CEGH</i>
Timestamp:	Sent - 29/03/2023 05:59 PM Opened - 31/03/2023 02:44 PM Signed - 31/03/2023 02:45 PM	