GENERAL INFORMATION

Filing (Marital) status code (1 = Single, Mark if you were married but living Social security number First name Last name Occupation Designate \$3.00 to the presidential Mark if legally blind Mark if dependent of another taxpata Taxpayer between 19 and 23, full-ti Date of birth Date of birth Date of death Work/daytime telephone number/educed by another taxpata to you authorize us to discuss your General: 1040, Contact Address Apartment number City/State postal code/Zip code Foreign country name Foreign phone number Home/evening telephone number Taxpayer email address Spouse email address General: 1040	election campa ayer ime student, wi	aign fund? (1 = Yes, 2 = No ith income less than 1,	ark if your nonresident all Taxpayer Do, 3=Blank) All Support? (Y, N) All Initial Address		ave an ITIN
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axpayer email address pouse email address		Dependen	t Information	-	
Spouse email address		Dependen	t Information		
		Dependent	t Information		
General: 1040		Dependent	Information		
First Name Las	st Name	Date of Birth	Social Security No.	Relationship	Months expenses in paid for home dependent
Credits: 2441		Child and Depen	dent Care Expenses	,	
Provider information:					
Business name			-		
First and Last name					
Street address			-		
City, state, and zip code	:-				
Social security number OR Employ					
Tax Exempt or Living Abroad Fore Amount paid to care provider in 2		er (1 = 1E, 2 = LAFCP)			_
Amount paid to care provider in 2	.024			Taynayar -	Cnouse
Employer-provided dependent care	benefits that w	vere forfeited		Taxpayer	Spouse
NOTES/QUESTIONS:					

Form	

Direct Deposit/Electronic Funds Withdrawal Information

3

Per IRS Security Summit requirements, verify the name of financial institution, routing transit number, account number, and type of account below. If you would like to have a refund direct deposited into or a balance due debited from your bank account(s), please enter information in the fields below. Note that electronic funds will be withdrawn only from the primary account listed below.

Mark to verify all accounts listed below have been reviewed, updated as needed, and are correct.				_[1]
Primary account:				
Financial institution routing transit number				[5]
Name of financial institution				[6]
Your account number	_			[7]
Type of account (1 = Savings, 2 = Checking, 3 = IRA*)				_[8]
Mark if married filing jointly and this is a joint account (Both taxpayer and spouse names are on the account)				_[11]
Mark if financial institution is foreign based (Not located in the territorial jurisdiction of the United States)				_[12]
Enter the maximum dollar amount, or percentage of total refund	[13]	or	Percent (xxx.xx)	[14]
Secondary account #1:				
Financial institution routing transit number				[23]
Name of financial institution				[24]
Your account number	_			[25]
Type of account (1 = Savings, 2 = Checking, 3 = IRA*)				_[26]
Mark if married filing jointly and this is a joint account (Both taxpayer and spouse names are on the account)				_[29]
Mark if financial institution is foreign based (Not located in the territorial jurisdiction of the United States)				_[30]
Enter the maximum dollar amount, or percentage of total refund	[15]	or	Percent (xxx.xx)	[16]
Secondary account #2:				
Financial institution routing transit number				[31]
Name of financial institution				[32]
Your account number				[33]
Type of account (1 = Savings, 2 = Checking, 3 = IRA*)				_[34]
Mark if married filing jointly and this is a joint account (Both taxpayer and spouse names are on the account)				_[37]
Mark if financial institution is foreign based (Not located in the territorial jurisdiction of the United States)				_[38]
Enter the maximum dollar amount, or percentage of total refund	[17]	or	Percent (xxx.xx)	[18]
Refunds may only be direct deposited to established traditional, Roth or SEP-IRA accounts. Make sure direct deposits will be accept	ed by the ba	ank o	financial institution	1.

NOTES/QUESTIONS: