

TAX YEAR **2024****Taxpayer Information****www.ez-refund.us**

TAXPAYER NAME: _____ DOB: _____ SS: _____

SPOUSE NAME: _____ DOB: _____ SS: _____

ADDRESS: _____

Ph: _____ Email: _____

FILING STATUS: Single _____ Head H _____ Married Jointly _____ Married S _____ Widow _____

DEPENDENTS:

Fist Name:	Last Name:	Dob:	SS:	Relationship	Lived with you?	Initial:

Child care provider (Form 2441, Pub 503)

I hereby certify under penalty of perjury that the information of my childcare provider is true and that I keep records and/or documents to proof the amount reported.

Yo certifico bajo juramento que la información del personal de cuidado de mi/s dependientes es correcta y que mantengo records y/o documentación para probar la cantidad reportada.

Name: _____ Address: _____ EIN/SSN _____

Phone: _____ Paid: \$ _____ Initial: _____

Itemized Deductions (Sch. A)

Medical Expenses:	\$	New Cars Tax:	\$
Home Mortgage:	\$	Donations:	\$
Personal Property Taxes:	\$	Casualty/Theft losses:	\$
State Tax Sales:	\$		\$
	\$		\$

I/We Certify under penalty of perjury that all my deductions have been verified by me/us and they are true and correct. I also certify that I have all necessary documentation to proof these expenses.

Yo/Nosotros certificamos "under penalty of perjury" (bajo las penalidades de la ley) que los gastos reportados en mis deducciones son correctos y han sido verificados por mi/nosotros. Además certifico tener todos los documentos necesarios para probar los gastos que estamos reclamando.

Education Credit (AOTC & LLC) (Form 1098-T) (8863)

I certify under penalty of perjury that I was taking at least one half the normal full-time workloads for a course of study for at least one academic period beginning this year.

I have not been convicted of a felony for possessing or distributing a controlled substance.

I was enrolled in a program that leads to a degree, certificate, or other recognized educational credential and the hope credit was not claimed for expenses in more than one prior tax year.

Also I certify under penalty of perjury that I have proof for this credit.

Qualify for Student Credit: **Yes/ No** Amount of Qualified Expenses: \$ _____

Self Employed / Cash Income (Sch. C)

I hereby certify under penalty of perjury that I worked as independent contractor and got paid cash. I certify that the amount of Income and Expenses reported was obtain from my own records, and I certify to have the documents to proof this amount and the expenses reported in my Income Tax.

Yo certifico bajo juramento que trabaje como contratista independiente y me pagaron en efectivo, Yo certifico que la cantidad reportada como ingreso y los gastos fueron obtenidos de mis reportes personales y certifico tener la documentación para probar las cantidades reportadas.

	Taxpayer	Spouse
Type of Business		
Income		
Expenses		

Rent income: _____ Dividends: _____ K1 Forms _____ (Sch. E)

Sell or exchange Digital Assets: Y() N() Amount: _____

Estimated Taxes paid 1 _____ 2 _____ 3 _____ 4 _____

I hereby certify under penalty of perjury that all the information completed on this form and provided to the tax preparer/interviewer at the time of the interview is true and correct, under all penalties of the law. I have all the documents necessary, if needed, to proof my identify and relationship to any and all dependents (including identification cards, social security cards and/or birth certificates) also proof of all dependents claimed can be sourced for the time that they have been in my home and/or under my care with all necessary documentation required by law. That I am claiming the correct filing status and I have provided all documentation I believe necessary to comply with the law in reference to all taxable and non-taxable income gained, including any and all w2 forms, 1099 forms military income, unemployment , government housing or assistance and/or any other income and expenses incurred. I understand that with the information provided today on this form and verbally my income Tax will be completed. I hereby release any and all claims against my tax preparer for any incorrect or wrong information provided in this form to complete this year Tax return.

Yo certifico que toda la información completada en esta forma y provista a el preparador de Impuestos en el momento de la entrevista es cierto y correcto; Bajo las penalidades de la ley. Yo tengo en mi poder toda la documentación necesaria, en caso de ser necesitada, para comprobar mi identidad y la identidad y relación de mis dependientes (incluyendo documentos de identificación, seguro social y/o certificado de nacimiento, también podre proveer pruebas de los dependientes reclamados, del tiempo que ellos han estado en mi hogar y/o bajo mi cuidado con toda documentación requerida por la ley. Estoy reclamando el estado civil correcto y que he provisto toda la documentación necesaria y requerida por la ley en referencia a todos los ingresos taxables o no taxables recibidos, incluyendo forma W2, forma 1099, ingresos militares, desempleo. Asistencia del gobierno y/o todos los ingresos y gastos contraídos. Yo entiendo que con la información provista el día de hoy en esta forma y verbalmente, mi reporte de impuestos (Income Tax) van hacer completado. Por lo siguiente libero cualquier cargo o culpa al preparador de mi declaración de impuestos (Income Tax) por toda y cualquier información incorrecta que puede haber completado en esta forma.

Electronic Filing Authorization

I/We authorize **HD TAX** to transmit my taxes electronically. With my/our signature I/We certify under penalty of perjury that I/We have been informed about all the options to file my taxes and their corresponding fee including the option by mail. I/We have been informed that all fees for the preparation and process of my taxes will be deducted from my income tax refund if i/We chose that option. Also I/We been informed that checks receiving dates are not guaranteed.

Yo/nosotros autorizamos **HD TAX** a transmitir mis/nuestros impuestos (Income Tax) de forma electrónica. Con mi/nuestra firma, certificamos "under penalty of perjury" (bajo las penalidades de la ley) que yo/nosotros fuimos informados acerca de todas las opciones para enviar mis impuestos, incluyendo la opción de envío por correo. También fuimos informados que todos los honorarios por la preparación y proceso de la declaración de mis impuestos podrán ser deducidos de mi reembolso en caso de Yo/Nosotros hayamos elegido esa opción. Además, fuimos informados que la fecha de entrega de los cheques no es garantizada.

Signature and Date

Signature and Date

Direct Deposit Routing # _____ Account # _____ Initial: _____

E-File Federal	☐	E-file Federal Aut	☐	Disclosure	☐	Refund Fed	☐	____/____/____
E-File State	☐	Efile State Aut	☐	Documents	☐	Refund State	☐	____/____/____