



# Income Tax Return Form

**1. Personal Information:**

**Name:**

**Social Security Number:**

**Date of Birth:**

**Address:**

**2. Income Sources:** Please provide details of your income sources below:

**1. Salary/Wages:**

**2. Interest Income:**

**3. Dividend Income:**

**3. Deductions:** Please indicate any deductions you are claiming:

[ width=0.5em,height = 0.5em]**Retirement Contributions:**

[ width=0.5em,height = 0.5em]**Health Savings Account Contributions:**

[ width=0.5em,height = 0.5em]**Education Expenses:**

**4. Tax Credits:** Please indicate any tax credits you are claiming:

[ width=0.5em,height = 0.5em]**Child Tax Credit:**

[ width=0.5em,height = 0.5em]**Earned Income Tax Credit:**

**5. Tax Payment:** Please indicate your tax payment method:

**Tax Withheld:**

**Estimated Tax Payments:**

**6. Declaration:** By submitting this form, I declare that the information provided above is true and correct to the best of my knowledge.

**I agree to the declaration above.**