HEAD OF HOUSEHOLD DECLARATION

And Statutory Tax Return Amendment Form

TAX YEAR: 20___

SECTION 1: PRIMARY TAXPAYER INFORMATION

First Name and Middle Initial _____

Last Name _____

Social Security Number (SSN) _____

Date of Birth (MM/DD/YYYY) _____

Home Address (Number and Street) _____

City _____

State _____

ZIP Code _____

SECTION 2: FILING STATUS QUALIFICATION CHECKLIST

To qualify for the Head of Household filing status, you must meet the statutory requirements. Please confirm the following conditions by checking the boxes:

- ☐ I was unmarried, legally separated, or lived apart from my spouse for the last 6 months of the tax year.
- ☐ I paid more than half the cost of keeping up my home for the tax year.
- ☐ A qualifying person lived with me in my home for more than half the year (except for temporary absences or a dependent parent).

SECTION 3: QUALIFYING PERSON / DEPENDENT DETAILS

First & Last Name of Qualifying Person	Social Security Number	Relationship to Taxpayer	Number of Months Lived in Home

SECTION 4: HOUSEHOLD COST DETERMINATION WORKSHEET

Enter the amount spent during the tax year for maintaining the home. "Amount Paid by You" must exceed 50% of the "Total Cost" to support the Head of Household status.

Expense Category	Total Cost Paid (A)	Amount Paid by You (B)
Rent, Mortgage Interest, and Real Estate Taxes		
Property Insurance		
Utilities (Gas, Electric, Water, Trash)		
Upkeep, Maintenance, and Repairs		
Food Consumed on Premises		

Expense Category	Total Cost Paid (A)	Amount Paid by You (B)
TOTALS		

SECTION 5: DECLARATION & ATTESTATION

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your Signature

Date (MM/DD/YYYY)

Paid Preparer's Signature (if applicable)

PTIN / EIN