**Form AS 2909.1**
Rev. Mar 4 16

COMMONWEALTH OF PUERTO RICO
DEPARTAMENT OF THE TREASURY

# TAX RETURN SPECIALISTS AUTHORIZATION FOR THE ELECTRONIC FILING AND DIGITAL SIGNATURE OF THE INDIVIDUAL INCOME TAX RETURN

Section 1061.01 of the Puerto Rico Internal Revenue Code of 2011, as amended, establishes the obligation to file an Individual Income Tax Return and allows it to be authenticated by digital signature. The taxpayer who wants to appoint a Tax Returns, Statements or Refund Claims Specialist (Specialist) to sign the return in digital form on his/her behalf shall complete this form and provide it to the Specialist along with copy of his/her driver's license or passport.

## Part I - Taxpayer's Information (If married filing jointly, you must complete the spouse's information)

| Taxpayer's Name | Initial | Last Name | Second Last Name | Taxpayer's Social Security Number |
|---|---|---|---|---|
| Spouse's Name | Initial | Last Name | Second Last Name | Spouse's Social Security Number |

| Address | E-mail address | Telephone |
|---|---|---|
| | | |

## Part II - Individual Income Tax Return Information

| | |
|---|---|
| 1. Taxable Year | |
| 2. Adjusted Gross Income (Page 2, Part 1, line 5 of the return) | $ |
| 3. Total Tax Determined (Page 2, Part 3, line 19 of the return) | $ |
| 4. Total Tax Withheld, Paid and Reimbursable Credit (Page 2, Part 3, line 23 E of the return) | $ |
| 5. Amount to be Refunded (Page 1, line 1D of the return) | $ |
| 6. Balance of tax Due (Page 1, line 4 of the return) | $ |

## Part III - Designated Specialist

| Specialist's Name (Print) | Social Security Number or Employer Identification Number | |
|---|---|---|
| Firm's Name | Registration Number | |
| Postal Address | E-mail Address | Telephone |

**Authorized Acts -** The Specialist is authorized to file by electronic means and sign using the digital signature the taxpayer's Individual Income Tax Return for the taxable year _____.

## Part IV - Taxpayer's Signature - If married filing jointly, both, the taxpayer and spouse shall sign this Authorization.

I hereby declare under penalty of perjury that I have examined the electronic copy of my Individual Income Tax Return, schedules and other documents attached to it for the taxable year _____ , and it is true, correct and complete. I hereby declare that the amounts reported in Part II, as shown above, are the same as the ones included in the electronic copy of my Individual Income Tax Return. I authorize the Specialist to file, by electronic means and sign using the digital signature, my Individual Income Tax Return for the taxable year indicated above in this Authorization.

| Taxpayer's Signature | Name (Print) | Date |
|---|---|---|
| Spouse's Signature | Name (Print) | Date |

**This Authorization will not be valid if it is not signed and dated.**

Retention Period: Ten (10) years.