## STATE OF HAWAII—DEPARTMENT OF TAXATION

## **REQUEST FOR COPIES OF HAWAII TAX RETURN**

(NOTE: References to "married", "unmarried", and "spouse" also means "in a civil union", "not in a civil union", and "civil union partner", respectively.)

	Date:
IMPORTANT: Please read the instructions on the rev PLEASE PRINT	
Name of Taxpayer(s) as Shown on Tax Return	Social Security No./Federal Employer Identification No. (See instructions)
Current Name and Address     Check this box if this address is different from your most current tax	4. Spouse's Social Security Number / Hawaii Tax I.D. No. / TMK
	5. Tax form number (Form N-11, N-13, N-15, G-45, TA-1, P-64A, etc.)
Account Number (For office use only)	6. Tax Year or Year-end & Period (Attach add'l Forms L-72 if more than 3)
(A)	(A)
(B)	(B)
(C)	(C)
Telephone Number of Requestor:	
Business: ()	7. (Check One) Regular Copies
Home: ()	Certified Copies
8. If copy of Hawaii tax return is to be mailed to someone else.	anter that person's name and address:
o. Il copy di Flawaii tax feturi is to be mailed to someone else.	, enter that person's hame and address.
	n line 1 or a person authorized to obtain the tax information requested. I am aware that based return requested to the person shown on line 8 (if applicable). The Department of Taxation n.
Signature:	Date:
Print Name:	Title:
GOVE	RNMENT AGENCIES ONLY
Name of Requestor :	(IRS only)
Department of Requestor:	
Mailing Address, if applicable:	
	Supervisory Investigator
Telephone Number:	
Signature Upon Pickup	
(For oth	OFFICE USE ONLY er than government agency requests)
Photocopies	Total Cost:
	<pre>&lt; \$1.00 =</pre>
Number of Certified Copies:  Date Picked Up:	
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## **INSTRUCTIONS**

Use this form to request a copy of a Hawaii tax return or form.

If you are not the taxpayer shown in item 1, you must present documentation, such as a Form N-848, Power of Attorney, or a letter signed by the taxpayer, prior to receiving confidential taxpayer information. If the taxpayer is deceased, you must present enough evidence to establish that you are authorized to act for the taxpayer's estate.

Joint tax returns may be disclosed to either the taxpayer or spouse. Only one signature is required. If your name has changed, sign your name as it appeared on the return requested, and also sign your current name. All requests must be signed by the taxpayer or duly authorized agent.

If you are requesting a copy of a return other than your income tax return, see the **Special Instructions** below.

**Item 3** — For individuals, enter your social security number (e.g., 000-00-0000). For all other entities, enter your federal employer identification number (e.g., 00-000000).

**Item 6** — Enter the year(s) of the tax return you are requesting. If requesting more than three documents, use additional Forms L-72. Returns which were filed before 2005 may not be available for making copies.

**Item 7** — Select either Regular Copies or Certified Copies. For Certified Copies service an additional one dollar (\$1.00) per return is charged, in addition to the Regular Copies charge.

- Regular Copies \$1.00 for each page or side of a page reproduced (e.g., one two-sided document will cost \$1.00 for each side for a total of \$2.00).
- Certified Copies \$1.00 for each return certified (In addition to the Regular Copies charge).

**Item 8** — If you wish to have the requested Hawaii tax return copy sent to someone other than yourself such as your tax return preparer, enter that person's name and mailing address on this line.

**Where to file.** — Send completed Form(s) L-72 to the Hawaii Department of Taxation, P.O. Box 259, Honolulu, HI 96809-0259.

**Note:** Processing of requests for copies of returns normally takes 15 working days. You will be mailed a bill when the copies are ready. The copies will be mailed after payment is received.

## SPECIAL INSTRUCTIONS:

- For General Excise, Withholding, Transient Accommodations, and Rental Motor Vehicle Surcharge Tax Returns enter the taxpayer's name and DBA, if applicable, in box 1, your (requestor's) name and address in box 2, your Hawaii Tax I.D. No. in box 4, and the year, period, and type of return you are requesting in box 6.
- For Conveyance Tax Certificates or Exemptions enter the seller's name in box 1, requestor's name and address in box 2, buyer's name in box 3, the tax map key number in box 4, and the recording date in box 6.
- For **Nonprofit Registration Certificate** enter the nonprofit organization's name in box 1, requestor's name and address in box 2, nonprofit organization's federal employer identification number in box 3, nonprofit organization's Hawaii Tax I.D. No. in box 4, and "Approval Letter" in box 5.