

**SCHEDULE
DS & HOF 2024**
(Form 40 or 40NR)



Alabama Department of Revenue
Dependents Schedule

NAME(S) AS SHOWN ON TAX RETURN

PRIMARY'S SOCIAL SECURITY NUMBER SPOUSE'S SOCIAL SECURITY NUMBER

Schedule DS – Dependents Schedule

See instructions for definition of a dependent. **NOTE:** If you checked filing status 3 (Married filing separate), you may claim **only** the dependent(s) for whom you **separately** furnished over 50% of the total support.

1a Dependents. Do not include yourself or your spouse. (See Instructions)

| First Name | Last Name | • Dependent's Social Security Number | Dependent's Relationship to you | Did you provide more than one-half dependent's support? |
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1b Total number of dependents claimed above. Enter total here and on Form 40, Page 2, Part III, line 1 or Form 40NR, Page 2, Part V, line 1 **• 1b**



NAME(S) as shown on tax return (Do not enter name and social security number if shown on other side)

PRIMARY SOCIAL SECURITY NUMBER _____ SPOUSE SOCIAL SECURITY NUMBER _____

Schedule HOF – Head of Family Schedule

Complete the following information:

Enter the dependent/qualifying person's name here: _____

Dependents/qualifying person's Social Security Number: _____

What is the dependent's/qualifying person's relationship to you: _____

Do you rent or own the home maintained for the dependent/qualifying person? Rent Own

Are you married, divorced, or legally separated? Yes No

If you answered yes, please provide the following information:

Date of Marriage? _____

Date of Divorce? _____

Date of Legal Separation? _____

Did the dependent(s)/ qualifying person(s) reside with you in your home? Yes No

Did you pay more than 50% of the dependent(s)/ qualifying person(s) support? Yes No