		DATE OF SERV:	TAX	MONTH:	TAX PAYMENT AMT: \$		
2290 (HVUT) WORKSHEET	Member #	Date			Tax Year: 2023-2024		
Name-(as listed on the Tax ID Number):		Name must match name on I					
EIN# EIN# must be at least 2 weeks old and this <u>c</u> a	Con annot be social	ntact Name & Phone: _ security #					
Address:		City/State/Zip:					
Send a copy of my Schedule 1 2290 to: Email(Unable to fax. Waterma					ark seal will not show)		
The 2290 tax is based on the vehicles combined: ** IF any vehicles run less than 5000 miles/y ** POWER UNITS ONLY: VIN VIN	vear or (less than	n 7500 miles driven for	agriculture <u>Unit #</u>	during the tax period Purchase Date	d mark "Y" t	to suspend ta	х.
<u>VIN</u>						_ Y	
Are any vehicles listed used exclusively	for Logging? N	I Y If Yes, List U	nit #				
Have any of the above trucks been T raded, S Please provide the name and address of the	•					T S	D

For office use only

An agent will contact you for payment information. OOIDA will accept our service fee and the IRS fee with a credit or debit card. This is the best form of payment so that your filing is not held up. Fees paid by check will delay processing up to 10 business days.

You will receive a copy of your Schedule 1 within 3-5 business days. Filings are processed in the order they are received.

OOIDA FAX: 816-427-4470 EMAIL: oosi_2290@ooida.com