

Note: The draft you are looking for begins on the next page.

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Most forms and publications have a page on IRS.gov: IRS.gov/Form1040 for Form 1040; IRS.gov/Pub501 for Pub. 501; IRS.gov/W4 for Form W-4; and IRS.gov/ScheduleA for Schedule A (Form 1040), for example, and similarly for other forms, pubs, and schedules for Form 1040. When typing in a link, type it into the address bar of your browser, not a Search box on IRS.gov.

If you wish, you can submit comments to the IRS about draft or final forms, instructions, or pubs at IRS.gov/FormsComments. Include "NTF" followed by the form or pub number (for example, "NTF1040", "NTFW4", "NTF501", etc.) in the body of the message to route your message properly. We cannot respond to all comments due to the high volume we receive and may not be able to consider many suggestions until the subsequent revision of the product, but we will review each "NTF" message. If you have comments on reducing paperwork and respondent (filer) burden, with respect to draft or final forms, please respond to the relevant information collection through the Federal Register process; for more info, click here.

TREASURY/IRS AND OMB USE ONLY DRAFT

Department of the Treasury Internal Revenue Service

Trump Account Election(s)

Go to www.irs.gov/Form4547 for instructions and the latest information.

OMB No. 1545-XXXX

If you have a child that is eligible for a Trump account, and you want to open a Trump account for that child, complete Form 4547.

• For each child that is eligible and for whom you want to open a Trump account, complete Parts I, II, and IV.

• Fo	r each	child that is eligible to r	eceive	a \$1,000 Pilo	ot Pr	ogram Contribu	tion, check	the box	x in Part III,	line 7, in	order to receiv	e the contribution.	
Part		Parent/Guardian Note: The parent/guar							e responsib	le party	for the Trump a	account.	
First name			Midd	le name			Last name				Social security number		
Home address (number and street). If you have a P.O. box, see instruct					ons. A			Apartment	number	Date of birth			
		ost office. If you have a foreign omplete spaces below.		County			State		ZIP code		Phone no.		
Foreign c	ountry	name		Foreign province/st		tate/county	1	Foreign	postal code		Email address		
Part		Child's Informati		ee instructions	3.								
_						(i) Child 1					(ii) Child 2		
1a <u>l</u>	First name												
b l	Middle	e name											
c l	Last n	ame											
2	Social	security number											
3	Date c	of birth											
4	Relatio	onship											
(Home Address Check here if address is same as Part I. Otherwise, complete lines 5a through 5f. If you have a foreign address, complete lines 5g, 5h, and 5i.												
a	Numb	er and street											
b /	Apartr	nent number											
C	City, to	own, or post office											
-	Count												
-	State												
f	ZIP cc	ode											
-		n country name											
		n province/state/county											
-		n postal code											
6													
Part		Pilot Program Co	n										
For a chi	ild to d	qualify to receive the \$1,	000 P	ilot Program (Conti	ribution to their							
						(i) Child 1				(ii) Child 2			
	Check box if child qualifies for, and you want the child to receive, a Pilot Program Contribution												
Part	V	Consent to Discl	ose	Informatio	n								
child(ren for the e) listed ligible	this form, you authorized on this form. You also child(ren) listed above ton of the Trump account	autho o any	rize the IRS, 1	reas	ury, and their a	gent(s) to c	disclose	the fact that	t a Trum	p account has b	peen established	
Sign Here			ined this form, and to the best of my knowledge and belief, on all information of which preparer has any knowledge.					is true, correct, a	nd complete.				
	_	Your signature								Date			
Paid Preparer Use Only		Print/Type preparer's name			Prepa	arer's signature			Date		Check if self-employed	PTIN	
		Firm's name	-					Firm's EIN					
		Final address								Dhana na			

Firm's address

Phone no.