



**Applications will NOT be accepted by
Mail, Drop Box, or E-Mail**

NOTE: Applications will ONLY be accepted as follows:

- 1) Filed Online at www.myguamtax.com, or
- 2) Filed at Drive Through Drop Off Line at DRT or at the Income Tax Branch at DRT during business hours

You (and your spouse, if filing jointly) are eligible for the All-RISE Program if you were a Guam resident for tax year 2020 AND:

1. You have a validly filed and processed 2020 Guam individual income tax return with adjusted gross income of no more than Forty Thousand Dollars in the case of an individual return or no more than Eighty Thousand Dollars in the case of a joint return, and
2. You certify that your household experienced a negative economic impact from the COVID-19 pandemic, and
3. You elect to receive payments under this program in lieu of any payments that may be available under the RISE Act, Executive Order No. 2021-11, and Bill Nos. 75-36 and 164-36.

I. Filing Status for 2020

Single Head of Household Married but filing Separately Qualifying Widower Married Filing Jointly

If married filing separately, enter

If Married Filing Joint and either taxpayer or spouse is deceased, provide **name** of individual who is deceased and their corresponding **date of death**.

Check only one box. See instructions.

spouse's name and SSN

II. Personal Information (Please refer to the instructions)

a. Your first name and middle initial	Last Name	Date of birth (mm/dd/yyyy)	Your social security number
b. If joint return, spouse's first name and middle initial	Last Name	Date of birth (mm/dd/yyyy)	Spouse's social security number
c. Mailing Address			Apt. No.
d. City, State, and ZIP code.			
e. Home Address (If the same as mailing address above, leave blank)			

III. One-time Payment Information/Election to Be Paid by Direct Deposit

DO NOT ENTER INFORMATION IN THIS SECTION IF YOU WOULD LIKE TO BE PAID BY CHECK

Payment Amount	Adjusted Gross Income (AGI) Threshold	Filing Status
\$800	No more than \$40,000	Single, Head of Household, Qualifying Widow(er), and Married Filing Separate
\$1,600	No more than \$80,000	Married Filing Joint

Payment will be made by check unless you elect to receive payment by direct deposit. To elect to be paid by direct deposit, enter your direct deposit information here. Note that this is **optional** and is **limited to financial institutions on Guam**.

Routing No. Account No.

Type of account Checking Savings



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IV. Required Certification/Election

(Note: The following are required as per EO No. 2021-18. Therefore, ALL REQUIREMENTS must be met to be eligible.)

- | | Yes | No |
|--|--------------------------|--------------------------|
| 1. I (and my spouse, if filing jointly) certify that my household experienced a negative economic impact from the COVID-19 pandemic? <i>Check Yes or No.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. I (and my spouse, if filing jointly) certify that I was a resident of Guam in 2020. <i>Check Yes or No.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. I have attached a completed Form 8821 with all required information for myself. <i>Check Yes or No.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. If my status is married filing jointly , I have attached a completed Form 8821 with all required information for my spouse. <i>Check Yes or No.</i> If not married filing jointly, DO NOT ANSWER. | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. I elect to receive payments under this program in lieu of any payments that may be available under the RISE Act, Executive Order No. 2021-11, and Bill Nos. 75-36 and 164-36. <i>Check Yes or No.</i> | <input type="checkbox"/> | <input type="checkbox"/> |

V. Sign Here

Under penalties of perjury, I declare that I have examined this form, and to the best of my knowledge and belief, they are true, correct and complete.

Your Signature

Date

Spouse's Signature. If a joint return or application, both must sign.

Date

Phone no.:

Email address: