

Dependent Information

Number of Children under 24 years _____

Primary Name _____

Number of Children living at home Under 19 years _____

	Child 1	Child 2	Child 3
Dependent Name	_____	_____	_____
Social Security Number	_____	_____	_____
Date of Birth	_____	_____	_____
Age	_____	_____	_____
Relationship to you	_____	_____	_____
# of months in your home	_____	_____	_____
Did you pay childcare from a qualified childcare provider?	() YES () NO	() YES () NO	() YES () NO
Did your Child have an income?	() YES () NO	() YES () NO	() YES () NO
If so, how much?	_____	_____	_____
Did you claim this child last year?	() YES () NO	() YES () NO	() YES () NO
Can you provide documentation that the Child lived with you more than half the year? (IE. School or Medical records)	() YES () NO	() YES () NO	() YES () NO
Can anyone else claim this child?	() YES () NO	() YES () NO	() YES () NO
If Yes, who?	_____	_____	_____
Is there an active Form 8332 (Release of Claim to Exemption)	() YES () NO	() YES () NO	() YES () NO
Did you provide more than half of their support?	() YES () NO	() YES () NO	() YES () NO
<u>If the child is 19 Yrs.</u> or older: was the child a full time student for at least 5 months or disabled?	() YES () NO	() YES () NO	() YES () NO
<u>If the child is NOT your Biological son/daughter:</u>			
A. Can you provide a birth certificate that verifies your relationship to the child?	() YES () NO	() YES () NO	() YES () NO
B. Did either parent live with you during the year?	() YES () NO	() YES () NO	() YES () NO
C. If the biological parent is NOT living with the Child, where is each biological parent?	MOM _____ DAD _____	MOM _____ DAD _____	MOM _____ DAD _____

College (need 1098T)

If the Child is a full time student, which school _____ are they attending?

How many years have you **previously** claimed the **American Education Credit**? (One, two, three or four years)

How many years in College? _____

Has the child been convicted of a felony? () YES () NO () YES () NO () YES () NO

*****I certify that I would like my taxes prepared according to the information I supplied above.*****

Signature _____

Date _____