J-tax-S Inc.

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Dependent Worksheet

Dependent Information: must provide proof each year for each dependent...We will either need School

Records, Driver License, Daycare Paperwork, Social Security paperwork, 1095B from State, or Doctor Records,

(these documents must be for tax year and state the name and address of each dependent)

Birth Certificate for each dependent may be requested

SS#:
Relationship: Relationship # of months lived with # of months you for the year: you for the Have you ever been notified by the IRS that the E return filed by you was denied or reduced? YESNO Did another resident in the home earn more than YESNO Did anyone else contribute to the support of the YESNO Did the child live with the taxpayer for more than YESNO If no, is there an active Form 8332 – Release/Rev
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provide a copy to us. YES NO Is there a written custody, divorce or separation at the provide a copy to us. YES NO If the child is not your biological child, are/were your yes NO If the biological parents are not living with the chological you have any daycare or preschool expenses

For Adopted Children,	
Did you have any adoption expenses?	
☐ YES ☐ NO	
Did you adopt a child that was special needs?	
☐ YES ☐ NO	
Is the adoption pending or final?	
For Foster Children,	
Do you have a letter from an authorized placement agency or applicable court document?	
☐ YES ☐ NO	
When claiming a Brother, sister, niece, nephew, grandchildren, great-grandchildren, stepchildren or descenda	nt
of them, step-grandchildren, step-great-grandchildren, half-sister, half-brother:	
Can you provide a Birth Certificate that verifies your relationship to the child?	
☐ YES ☐ NO	
Must provide any of the following to prove that your child lived with you in the United States for more	
than half of the year (more than one type may be required by IRS)	
School Records Medical Records	
Social Service records Daycare Records	
☐ Daycare provider Info ☐ Letter (must be on letterhead)	
Is the child permanently and totally disabled (any age)?	
□YES □NO	
What is the child's disability?	
Does the child receive SSI or other disability payments?	
☐ YES ☐ NO	
Do you have a letter from the child's doctor, other healthcare provider or any social service program of	r
agency verifying that the child is permanently and totally disabled?	
☐ YES ☐ NO	
Do you or the taxpayer know of another person who could give similar answers regarding, Relationship, Marita	al
Status, Co-habitation, Age, student, disability status for the child?	
☐ YES ☐ NO	
Child's Relationship to the other person?	
How many days was the child physically present in the United States, if not a full year?	
Was the other dependent a dependent of any other taxpayer for 2023?	
☐ YES ☐ NO	
Did the other dependent have a gross income of less than \$4,700 in 2023. This does not include non-taxable	
income such as welfare benefits, or nontaxable Social Security benefits, or was the person permanently or	
totally disabled?	
YES NO	
Did the taxpayer provide over half of the other dependents support for 2023?	
☐ YES ☐ NO	
By signing below, I verify that the above information is true and correct.	
Taxpayer Signature Date	
Spouse Signature Date	