## EARNED INCOME CREDIT ADDITIONAL DOCUMENTATION

Complete the following questions, as applicable.

The information supplied by the taxpaye consistent, complete and reasonable.  Tax Preparer's signature	er and their answers to additional inquiries appears to be correct,  Date
6. If the <b>taxpayer</b> is under age 19, expla	nin how he or she is not a qualifying child of another person.
5. In cases where there is a seemingl dependent, explain.	ly unreasonable age difference between the taxpayer and the
	e child/children lived with the taxpayer for more than six months. cal records, rent/lease contracts, or letters from a professional)
3. If the dependent is disabled, list the disability.	documents from authorized medical/government sources proving
*	n the ages of 19 and 24, enter documents available to prove the school for at least five months of the tax year.
	y the parents cannot claim this dependent.
1	hild, enter documents available to prove relationship (credentials option records, foster care papers or marriage certificates as

## **INTERVIEW SHEET**

SOCIAL SECURITY #   I.Filing Status   Single   MFJ   MFS   HOH   Widow (re)   Widow (re)    Number of Exemptions   Can you be claimed as a dependent of another person's tax return?   Yes   NO    Number of Exemptions   Can you be claimed as a dependent of another person's tax return?   Yes   NO    Refuse   Mailing Address   Rent   Own     HOME PHONE #   CELL PHONE #   WORK #    CITY/STATE/ZIP     Are you or a member of your household in the military? Yes   NO    Refund Options   fees deducted from refund cheek   Rent   Refund Cheek in 2 weeks   Diffect DEPOSIT   Refund Cheek by Mail Real   Refund Cheek in 2 weeks   Diffect DEPOSIT   Refund Cheek by Mail Real   Refund Cheek in 2 weeks   Diffect DEPOSIT   Refund Cheek by Mail Real   Refund Cheek in 2 weeks   Diffect DEPOSIT   Refund Cheek by Mail    SPOUSE INFORMATION   If filing a MFJ or MFS or Qualifying Widower, you must complete the following:  SPOUSE'S ADDRESS   DATE OF BIRTH   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF BIRTH   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-2 forms from different employers   DATE OF DEATH    # Of W-	TAXPAYER INFORMATION						Re	v. 11/20
Number of Exemptions	SOCIAL SECURITY #	1.Filing Status			Date (	Of Birth (	DOB)	
Capacitation   Complete Content of Spouse of Income (1999 sets)		Single MFJ	MFS HOH	Widow	(er)			
Mailing Address   Rent   Own     HOME PHONE #   CELL PHONE #   WORK #	Number of Exemptions	Can you be claimed	l as a dependent	on anoth	er person's t	ax return	? Yes	NO
Mailing Address   Rent   Own     HOME PHONE #   CELL PHONE #   WORK #	(Taypayar-1 Spayar-1 and Dapandant-1)							
Mailing Address Rent Own   HOME PHONE # CELL PHONE # WORK #    CITY/STATE/ZIP   Are you or a member of your household in the military? Yes NO    Refund Options – fees deducted from refund check   Alternative Refund Option – payment in advance require DIRECT DEPOSIT RAL RT with Direct Deposit		LAST NAME				OCC	UPATION	
Are you or a member of your household in the military? Yes NO  Refund Options – fees deducted from refund check RAL Refund Check in 2 weeks DIRECT DEPOSIT RAL REfund Check by Mail Direct Deposit Elec file for a Paper Check or Mail  SPOUSE'S NAME  SOCIAL SECURITY NUMBER OCCUPATION  SPOUSE'S ADDRESS  DATE OF BIRTH  DATE OF DEATH  Yes NO You paid college expenses for you or your dependent  Yes NO You have deductions to itemize Yes NO You paid child care for a dependent  Complete ONLY if you are filing Head of House The IRS could require additional information/documentation if you are divorced, legally separated, or married and did not reside with your spouse the last 6 months of the year to determine if you qualify for the head of household filing status.  Never married Divorced Married but lived apart from spouse during the last 6 months of the year.  If you are divorced or legally separated, can you provide the IRS with any of the following documents?  Divorce decree Separate maintenance agreement or separation agreement?  If you are married but did not reside with your spouse for the last 6 months of the tax year, can you provide the IRS with any of the supporting documents verifying that your spouse did not live with you?  Lease agreement Letter from a clergy member Letter from a clergy member Letter from a clergy member Can you provide the IRS with treetips and bills substantiating that you paid more than half the cost of maintaining the home?  Documentation that the IRS requires to substantiate the cost of maintaining the home?  Other supporting documentation?  A Can you receive any non-taxable support/income? Food Stamps Child Support								
Refund Options – fees deducted from refund check RAL Refund Check in 2 weeks DIRECT DEPOSIT RAL REfund Check in 2 weeks DIRECT DEPOSIT RAL REfund Check in 2 weeks DIRECT DEPOSIT DIRECT DEPOSIT REfund Check by Mail DIRECT DEPOSIT REfund Check by Mail DIRECT DEPOSIT DIRECT DIR	Mailing Address Rent Own	HOME PHON	OME PHONE # CELL PH		ONE # WORK #			
RAL Refund Check in 2 weeks DIRECT DEPOSIT RY with Direct Deposit Direct Deposit Elec file for a Paper Check or Mail:  SPOUSE INFORMATION If filing a MFI or MFS, or Qualifying Widower, you must complete the following:  SPOUSE'S NAME  SOCIAL SECURITY NUMBER  OCCUPATION  DATE OF BIRTH  DATE OF DEATH  # Of W-2 forms from different employers  Yes NO You have other sources of income (1099's,etc) Yes NO You have other sources of income (1099's,etc) Yes NO You paid child care for a dependent  Yes NO You paid child care for a dependent  Complete ONLY if you are fling Head of House The IRS could require additional information/documentation if you are divorced, legally separated; or married and did not reside with your spouse the last 6 months of the year to determine if you qualify for the head of household filing status.  I. Marital Status:  Never married  Spouse deceased  Married but lived apart from spouse during the last 6 months of the year to determine if you qualify for the head of household filing status.  If you are divorced or legally separated, can you provide the IRS with any of the following documents?  Divorce decree  Separate maintenance agreement or separation agreement or separat	CITY/STATE/ZIP	Are you or a	1 7					
RAL Refund Check in 2 weeks DIRECT DEPOSIT RY with Direct Deposit Direct Deposit Elec file for a Paper Check or Mail:  SPOUSE INFORMATION If filing a MFI or MFS, or Qualifying Widower, you must complete the following:  SPOUSE'S NAME  SOCIAL SECURITY NUMBER  OCCUPATION  DATE OF BIRTH  DATE OF DEATH  # Of W-2 forms from different employers  Yes NO You have other sources of income (1099's,etc) Yes NO You have other sources of income (1099's,etc) Yes NO You paid child care for a dependent  Yes NO You paid child care for a dependent  Complete ONLY if you are fling Head of House The IRS could require additional information/documentation if you are divorced, legally separated; or married and did not reside with your spouse the last 6 months of the year to determine if you qualify for the head of household filing status.  I. Marital Status:  Never married  Spouse deceased  Married but lived apart from spouse during the last 6 months of the year to determine if you qualify for the head of household filing status.  If you are divorced or legally separated, can you provide the IRS with any of the following documents?  Divorce decree  Separate maintenance agreement or separation agreement or separat	<b>Refund Options</b> – fees deducted from	refund check		Alterna	tive Refund	Option – 1	payment in advance	e require
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Family support Child care assistance Food Stamps Child Support	• •							
Food Stamps Child Support			care assistance					
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6. Does any other person living with you in your home earn an income? Yes NO If YES, list who they are and how much they earn a year:

DEPENDENT INFORMATION Complete for each dependent.

FIRST NAME	LAST NAME	SOCIAL SECURITY NUMBER	BIRTHDATE	RELATIONSHIP	# OF MONTHS LIVED WITH TAXPAYER	AGE OF CHILD	PAID CHILD CARE FOR

Can you provide any of the following documentation to prove that your child lived with you for more than half of the year? More than one type of documentation may be required by the IRS.

School Records Social service records
Medical Records Day Care Records

Letter (This letter must be on official letterhead from one of the following: school, medical provider, social service agency, place of worship, or other acceptable entity. The letter must include the name of the child, name of the child's parent or guardian, child's address and dates during the year child lived with taxnaver)

address and dates during the year child lived with taxpayer)	-,	
During 2010, where was the dependent's mother?		
During 2010, how many months did this dependent live with this parent?		
During 2010, where was the dependent's father?		
During 2010, how many months did this dependent live with this parent?		
If the child has a different last name than the taxpayer, explain		
If the dependent is not your natural child, answer the relative questions for  1. Brother, sister, niece, nephew, or grandchild  Can you provide birth certificates that verify your relationship to the child?  2. Step-children or descendent of them, or Step-grandchildren  Can you provide birth certificates & marriage certificates verifying that relationship to the child?	Yes Yes	No No
<ul> <li>3. Adopted Children <ul> <li>a. Is the adoption final or pending?</li> <li>b. If pending, do you have a letter from an authorized adoption agency?</li> </ul> </li> <li>4. Foster Children <ul> <li>Do you have a letter from the authorized placement agency or other court documents?</li> </ul> </li> </ul>	Final Yes Yes	Pending No No
If the child is under age 14, who watched the child while the taxpayer was at work?		
For tax years beginning after December 31, 2008, a taxpayer other than the parents of a qualif the adjusted gross income (AGI) of the taxpayer is higher than the AGI of any parent of the qualifying child, is your AGI higher than any parent of the child?		
Dependent's Mother Yes No Dependent's Father Yes I	No	
Child who is a student over age 18  What School does the child attend?  Can you provide documentation showing that the child was a full-time student for at least 5 dates of attendance. The months do not need to be consecutive.  Yes No	months?	The school records need to show the
Child with a permanent and total disability		
How long has the child been disabled? What is the disability?  Can the child perform any gainful employment or work? Yes No  Do you have a letter from the child's doctor, other healthcare provider or any social service permanently and totally disabled? Yes No  Does the child receive SSI or other disability payment? Yes No If Yes, I		or agency verifying that the child is h per month?
Signature of taxpayer Signature of Preparer		Date
	No No	