Salina Tax Service, Inc. Taxes and Accounting "1040 Reasons to Call"

Due Diligence Organizer

The organizer is needed <u>before</u> we are able to start your tax return. <u>Please check the appropriate box and include all necessary details and documentation.</u>

All Taxpayer with Dependents

•	Are you Married? Yes No
•	Have you ever been disallowed the Earned Income Tax Credit, the Additional Child Tax Credit, or the Child Tax Credit?
•	_ Yes _ No If so, when?
•	Did you live in the United States all year? _ Yes _ No
•	If you are a single parent, where is the other parents of your child/children?
•	What is the name of the other parent(s)
•	Why is the other parent not claiming the child?
•	Explain why the dependents have a different last name than the taxpayer
•	If you are divorced or separated, when did you last live in the same home?
•	Who is the residential parent of your child/children?
•	How long did the child live in your home during the tax year? (in months)
•	How long did your child/children live in the other parent's home during the tax year? (in months)
•	How much income did the other parent provide during the tax year?
•	Do you have a signed Form 8332 granting the right to claim the child/children from the residential parent? Yes No
•	Did anyone else live in the home that provides financial support for your child/children? _ Yes _ No
•	If yes, what is their name and how much do they pay?
•	Do you have full custody of your child/children? _ Yes _ No
•	res No Is this your biological dependent?
	Yes No

•	How old were you when your oldest child that is listed on your tax return was born?			
•	If you were under the age of 18, explain circumstances and who/how the child was cared for until the taxpayer was old enough to support and care for their own child?			
•	Can you or could anyone else be eligible to claim this dependent on their tax return? _ Yes _ No			
•	Is your dependent married? _ Yes _ No			
•	If you live alone, who babysits while you work? (For children 12 and under)			
•	Did you receive any type of supplemental, nontaxable income such as child support, welfare benefits, social security, etc? _ Yes _ No			
•	If so, how much and what kind?			
Not y	our Biological Child If this is not your biological child, what is your relationship to this dependent?			
•	Did the dependent live in your home for more than 6 months? _ Yes _ No			
•	Do you have custody?			
•	_ Yes _ No If so, through what court or agency?			
•	Who are the biological parents?			
•	Where do the biological parents live?			
•	What are the circumstances leading to the dependents being placed in your home?			
•	Do you receive any financial aid for the child/children such as WIC, Medicaid, SNAP? If so, which ones?			
•	Are you listed as the guardian for the dependent(s) on school records, medical records, daycare records, or place of worship? _ Yes _ No			

0-1		0	-1:4-
CO	leae	∟ re	aits

•	Name of the student(s)			
•	Name of the college attended			
•	Did all students attend at least half time? _ Yes _ No			
•	Are they seeking a degree? _ Yes _ No			
•	Did this student receive a tuition statement from the school? _ Yes _ No			
•	How much money was spent on other books or materials in relation to college?			
•	Did the student/students work during school? _ Yes _ No			
•	If so, how much did they earn?			
•	How many tax years have you claimed the American Opportunity Tax Credit?			
•	Was the student ever convicted with drug related felonies? _ Yes _ No			
<u> Disab</u>	led Dependents at Any Age			
•	If your child is over the age of 18 and disabled, what is the nature of the disability?			
•	Has the child been declared disabled by a physician? Yes No			
•	If so, can you provide documentation if asked by the IRS? _ Yes _ No			
•	Does this dependent receive social security/disability benefits? _ Yes _ No			
•	If so, how much do they receive?			
•	Are you listed as the Social Security Representative payee for this dependent? _ Yes _ No			
•	Is this dependent expected to recover in the next year? _ Yes _ No			
•	If this is not your biological child, why is this child living with you?			
•	Where are the biological parents of your disabled dependents?			

	Can you, the taxpayer, provide school/medical/daycare/place of worship/birth certificates upon request from the government? _ Yes _ No
LŞ	<u>Status</u>
	What filing status do you usually file on your taxes? _ Single _ Married Filing Joint _ Married filing Separate _ Head of Household Are there other people living in the home not reported on the tax return? If so, what are their name and how much do they earn?
	Is/Are these people listed above related to your dependents? What it their relationship to the dependents?
	Why is the above named relative not claiming the dependents on their tax return?
0	of Household
	What is your total monthly income including wages, child support and other nontaxable income?
	How much did you pay in property taxes? (monthly)
	How much did you pay for rent? (monthly)
	How much did you pay in mortgage interest? (monthly)
	How much did you pay for utilities? (monthly)
	How much did you pay for upkeep and repairs? (monthly)
	How much did you pay for renters or property insurance? (monthly)
	How much were your food costs? (monthly)
	How much were your other household expenses? (monthly)
	Were there any of the expenses listed above that you did not pay half of the total cost for? _Yes _No If so, which ones?