Crawford, Merritt and Company

Certified Public Accountants

Personal Returns

Attached is your **2020** tax organizer. Please use this Organizer in any way that is of benefit to you. To avoid any omissions, we strongly recommend reviewing it, making any corrections, or including any additional information. **Visit our website for additional important and helpful tax information.**

Please let us know any changes to your address, mailing address or email addresses. If we are missing email or phone numbers, please provide them along with the best way to contact you. Please verify or provide your direct deposit information on your tax organizer. Otherwise, a check will be mailed to you by the IRS/State for any refunds. We will need to review the following documents:

- W2
- 1099Misc
- 1099R
- Social Security Earnings statements
- 1098 (Mortgage Interest)
- 1098-T (Tuition Payment Statement)
- 1098-E (student loan interest)
- 1095-A or 8962 (Healthcare)
- K-1s and any other IRS/State forms

We encourage you to use our online portal system, SmartVault to scan & upload your information to us. Your documents will remain in SmartVault and be a convenient, secure place for you to reference them if you need them later. If signing into SmartVault with your portable electronic device like a phone, you can easily snap pictures & upload your information to us.

Due Dates:

	Information Due to us by:	Original Tax due date:	Extended Information due to us by:	Extended due date:
Business Returns	February 28	March 15	August 31	September 15
Personal Returns	March 30	April 15	September 30	October 15

Any changes to due dates which may occur during 2021 will be updated on our website

If you want us to file an extension of time to file your returns for you, please e-mail your request to us with your business name by February 28 for business tax returns and your name by March 30 for personal tax returns.

Remember, an extension of time to file extends the due date to September 15th for Business Returns and until October 15th for Individual Returns; **these extensions are only extensions of time to file, not time to pay. Interest and penalties will be added to the taxes owed if they are paid after April 15th. If you anticipate owing taxes, an estimate of the amount owed should be paid with your extension, before April 15th.**

A 25% additional fee will be assessed for Business Returns received to be completed from September 1st to September 15th and for Individual Returns from October 1st to October 15th.

The Tax Forms and Information page on our website, cmccpas.com has additional useful information on topics such as:

- How returns are processed through our offices
- How to pay your taxes online
- How to check the status of your refunds

Fees:

All tax preparation fees are due when tax returns are completed and before returns are electronically filed. Invoices are e-mailed to you soon after the returns are placed in SmartVault.

Children's Returns

Children under 24 who worked and will be filing a return should not prepare their own returns. The processing of your returns could be greatly negatively affected and significantly delay the processing of your returns if your children file their own returns and claim themselves.

IRS PINs and Direct Deposit Information

If you, your spouse or your children have been issued an IRS PIN, we must have that PIN to e-file your returns. Please include a copy of the current year PIN Notification letter with your tax documents. Your returns must be mailed if we do not have your current year PIN.

IRS or State Notices

If you receive a notice from the IRS or a state, please send a copy via Smartvault as soon as you receive it. We will need to see all pages of the notice to respond or advise you of what actions to take, if any.

Reminders:

If you receive email messages that appear to come from the IRS (often with subjects such as "Tax Payment Rejected", "Official Inquiry", "Fraud Investigation", and other topics that sound "official"), the IRS does not communicate via email or phone. These emails are SPAM or phishing attempts to gain private information from you. It is best to not open these emails, answer these calls or return any messages left, but instead delete them immediately. These are phishing scams trying to get you to provide personal information when you contact or call them back. too. If you are ever in doubt, call us before you provide anyone with any personal information.

Business Returns

We need from you:

- purchase documents for vehicles or equipment that was purchased/financed
- year-end loan statements to show balance due and total interest paid
- December bank and credit card statements
- W-3 and W-2 forms for the tax year
- 1099-MISC or 1099-NEC statements issued and received

If you are not using QuickBooks Online, we will need a backup of your QB file downloaded through our website. Our email and SmartVault is limited on the size of files that can be emailed. We ask that you use our website's "Upload a File" option for All QuickBooks files/backups due to their size.

W-2 and 1099 Forms:

These forms must be provided to employees, contractors and the IRS by January 31, 2021. Visit our website for information needed to complete these forms.

We have attached our engagement letter for your review.

We look forward to working with you this year!

Diana Crawford, CPA

Teresa Merritt, CPA

Crawford, Merritt and Company

Certified Public Accountants

Engagement Letter

This letter is to confirm and specify the terms of our engagement with you and to clarify the nature and extent of the services we will provide.

We will prepare your individual or joint Federal and/or State Income Tax Returns, (collectively, the "returns"). This engagement pertains only to the Federal and State Income Taxes and our responsibilities do not include preparation of any other tax returns that may be due to any taxing authority.

We must have your signed e-file authorization forms and your payment for the preparation of your tax returns before we e-file your tax returns. The tax preparation fee is solely for the service of preparing your tax returns.

Your returns may be selected for review by one or more than one taxing authority such as IRS and/or State notice or audit. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such government tax examination, we will be available to represent you during the examination and/or during any appeal. Any such representation will be the subject of, and governed by, a separate engagement letter and fees.

We will prepare the returns from information which you will furnish to us. It is your responsibility to provide all the information required for the preparation of complete and accurate returns. We will furnish you with a tax organizer to guide you in gathering the necessary information. Any omissions from you will prompt an IRS and/or State notice and will be subject to our fee for reviewing and/or responding to such Government offices on your behalf.

We will not audit or otherwise verify the data you submit. Accordingly, our engagement cannot be relied upon to disclose errors, fraud, or other illegal acts that may exist. However, it may be necessary to ask you for clarification of some of the information you provide, and we will inform you of any material errors, fraud or other illegal acts that come to our attention.

You are responsible for maintaining an adequate and efficient accounting system, for safeguarding assets, for authorizing transactions, and for retaining supporting documentation for those transactions, all of which will, among other things, help assure the preparation of proper returns. Furthermore, you are responsible for evaluating the adequacy and results of the services we provide.

The law provides various penalties and interest that may be imposed when taxpayers underestimate their tax liability. You acknowledge that any such understated tax, and any imposed interest and penalties, are your responsibility, and that we have no responsibility in that regard. If you would like information on the amount or circumstances of these penalties, please contact us.

We may encounter instances where the tax law is unclear, or where there may be conflicts between the taxing authorities' interpretations of the law and other supportable positions. In those instances, we will outline for you each of the reasonable alternative courses of action, including the risks and consequences of each such alternative. In the end, we will adopt, on your behalf, the alternative which you select after having considered the information provided by us.

Without disclosure in the return itself of the specific position taken on a given issue, we must have a reasonable belief that it is more likely than not that the position will be held to be the correct position upon examination by taxing authorities. If we do not have that reasonable belief, we must be satisfied that there is at least a reasonable basis for the position, and in such a case the position must be formally disclosed on Form 8275 or 8275-R, which form would be filed as part of the return. If we do not believe there is a reasonable basis for the position, either the position cannot be taken or we cannot sign the return. In order for us to make these determinations, we must rely on the accuracy and completeness of the relevant information you provide to us, and, in the event we and/or you are assessed penalties due to our reliance on inaccurate, incomplete, or misleading information you supplied to us (with or without your knowledge or intent), you will indemnify us, defend us and hold us harmless as to those penalties.

Our fees for this engagement are not contingent on the results of our services. Rather, our fees for this engagement, including tax planning, preparation of your returns, and any representation of your interests during an examination by a taxing authority and/or any subsequent appeal, will be based on our standard hourly rates. You should retain all the documents, canceled checks and other data that form the basis of income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the income tax returns and, therefore, you should review them carefully before you sign the e-file authorization forms.

In connection with this engagement, we may communicate with you or others via email transmission. As emails can be intercepted and read, disclosed, or otherwise used or communicated by an unintended third party, or may not be delivered to each of the parties to whom they are directed and only to such parties, we cannot guarantee or warrant that emails from us will be properly delivered and read only by the addressee. Therefore, we specifically disclaim and waive any liability or responsibility whatsoever for interception or unintentional disclosure of emails transmitted by us in connection with the performance of this engagement. In that regard, you agree that we shall have no liability for any loss or damage to any person or entity resulting from the use of email transmissions, including any consequential, incidental, direct, indirect, or special damages, such as loss of revenues or anticipated profits, or disclosure or communication of confidential or proprietary information.

It is our policy to retain engagement documentation for a period of three years, after which time we will commence the process of destroying the contents of our engagement files. To the extent we accumulate any of your original records during the engagement, those documents will be returned to you promptly upon completion of the engagement. The balance of our engagement file, other than a copy of your income tax return, which we will provide to you at the conclusion of the engagement, is our work product.

If the income tax returns we are to prepare in connection with this engagement are joint returns, and because, if they are joint returns, you will each sign those returns, you are each our client. You each acknowledge that there is no expectation of privacy from the other concerning our services in connection with this engagement, and we are at liberty to share with either of you, without the prior consent of the other, any and all documents and other information concerning preparation of your returns. You also acknowledge that unless we are notified otherwise in advance and in writing, we may construe an instruction from either of you to be an instruction on your joint behalf.

This engagement letter is contractual in nature and includes all of the relevant terms that will govern the engagement for which it has been prepared. The terms of this letter supersede any prior oral or written representations or commitments by or between the parties. Any material changes or additions to the terms set forth in this letter will only become effective if evidenced by a written amendment to this letter, signed by all of the parties.

If, after full consideration and consultation with counsel if so desired, you agree to authorize us to prepare your personal income tax returns pursuant to the terms set forth above, please execute this letter on the line below designated for your signature, and return the original of this executed letter to this office along with a completed copy of the enclosed tax organizer and the supporting documentation requested therein. You should keep a copy of this fully executed letter for your records. If this firm does not receive from you the original of this letter, in fully executed form, but receives from you a completed copy of the enclosed tax organizer and/or supporting documentation requested therein, then such receipt by this office shall be deemed to evidence your acceptance of all of the terms set forth above. If, however, this office receives from you no response to this letter, then this office will not proceed to provide you with any professional services and will not prepare your income tax returns. **Please note that we must have your signed e-file authorization filing forms and our payment for your tax preparation before we can e-file your returns.**

______________________________	______________________________
Taxpayer Signature	Spouse Signature
______________________________	______________________________
Print Name Date	Print Name Date

Crawford, Merritt and Company

Certified Public Accountants

Privacy Policy of Crawford, Merritt & Company

To Our Clients:

Your privacy is important to us, and maintaining your trust and confidence is one of our highest priorities. We respect your right to keep your personal information confidential and understand your desire to avoid unwanted solicitations. A recent law change requires us (along with banks, brokerage houses, and other financial institutions) to disclose our Privacy Policy to you – which we are more than happy to do. We hope that by taking a few minutes to read it, you will have a better understanding of what we do with the information you provide us and how we keep it private and secure.

A. Types of Information We Collect

We collect certain personal information about you – but only when that information is provided by you or is obtained by us with your authorization. We use that information to prepare your personal income tax returns and may also provide various tax and financial planning services to you at your request.

Examples of sources from which we collect information include:

- interviews and phone calls with you,
- letters or e-mails from you,
- tax return or financial planning organizers, and
- financial history questionnaires.

B. Parties to Whom We Disclose Information

As a general rule, we do not disclose personal information about our clients or former clients to anyone. However, to the extent permitted by law and any applicable state Code of Professional Conduct, certain nonpublic information about you may be disclosed in the following situations:

- To comply with a validly issued and enforceable subpoena or summons.
- In the course of a review of our firm's practices under the authorization of a state or national licensing board, or as necessary to properly respond to an inquiry or complaint from such a licensing board of organization.

In conjunction with a prospective purchase, sale, or merger of all or part of our practice, provided that we take appropriate precautions (for example, through a written confidentiality agreement) so the prospective purchaser or merger partner does not disclose information obtained in the course of the review.

- As a part of any actual or threatened legal proceedings or alternative dispute resolution proceedings either initiated by or against us, provided we disclose only the information necessary to file, pursue, or defend against the lawsuit and take reasonable precautions to ensure that the information disclosed does not become a matter of public record.
- To provide information to affiliates of the firm and nonaffiliated third parties who perform services or functions for us in conjunction with our services to you, but only if we have a contractual agreement with the other party which prohibits them from disclosing or using the information other than for the purposes for which it was disclosed. (Examples of such disclosures include using an outside service bureau to process tax returns or engaging a records-retention agency to store prior year records.)

C. Authorization for Direct Disclosure to Third Parties

We often receive requests to supply your personal data to third parties. To protect the confidentiality of your data, we require a specific authorization from you to release that data. Authorization must come in writing on paper, or by email. Documents related to your personal file must be given release directly from that individual.

D. Confidentiality and Security of Nonpublic Personal Information

Except as otherwise described in this notice, we restrict access to nonpublic personal information about you to employees of our firm and other parties who must use that information to provide services to you. Their right to further disclose and use the information is limited by the policies of our firm, applicable law, our Code of Professional Conduct, and nondisclosure agreements where appropriate. We also maintain physical, electronic, and procedural safeguards in compliance with applicable laws and regulations to guard your personal information from unauthorized access, alteration, or premature destruction.

Thank you for allowing us to serve your accounting, tax, and financial planning needs. We value your business and are committed to protecting your privacy. We hope you view our firm as your most trusted advisor, and we will work to continue earning your trust. Please call us if you have any questions or if we can be of further service.

Best regards,

Crawford, Merritt & Company

CRAWFORD MERRITT AND COMPANY PC
3100 FIVE FORKS TRICKUM RD SW STE 401
LILBURN, GA 30047
Telephone: (770)972-6393 Fax: (770)972-4463
E-mail: dcrawford@cmccpas.com

2020 TAX ORGANIZER

Taxpayer Information

Last name .... ______
First name .... ______
Middle Initial.............. ______ Suffix......... ______
Social security number......................... ______
Occupation .... ______
Work phone .... ______ Ext ... ______
Cell phone .... ______
E-mail address........... ______
Date of birth.. ______

Spouse Information

Last name................... ______
First name .... ______
Middle Initial .... ______ Suffix......... ______
Social security number .... ______
Occupation.................. ______
Work phone................. ______ Ext ... ______
Cell phone .... ______
E-mail address .... ______
Date of birth .... ______

Address .... ______ Apartment number....... ______
City .... ______ State........... ______ ZIP Code....... ______
Home phone........ ______ Fax number .... ______

Dependent Information

First name / Last name	MI / Suffix	Social Security Number / Relationship	Date of Birth	Months Lived with Taxpayer	Child Care Expense

Child and Dependent Care Provider Expenses

Name	Address	ID Number	Amount Paid

Education Tuition and Fees

Attach all Form 1098-Ts and a list of your qualified education expenses.

Student Loan Interest Paid

Enter total 2020 qualified student loan interest.. ______

*If you are a new client, referred by: ______

Relationship, if any (friend, mother, father, etc.):______

*New clients only: please provide a copy of your last year's tax returns to us - personal and/or business.

Attach Form(s) W-2 — Wages, Salaries, Tips and Other Compensation

Employer Name	2019 Amount

Attach Form(s) 1099-R — Distributions from Pensions, Annuities, Retirement, Profit-Sharing, IRAs, etc

1099-R Payer Name	2019 Amount

Attach Form(s) SSA-1099 — Social Security/Railroad Benefits

	Taxpayer	Spouse
Social Security Benefits from Form SSA-1099		
Railroad Retirement Benefits from Form RRB-1099		
Medicare B premiums withheld		
Medicare C premiums withheld		
Medicare D premiums withheld		

Attach Form(s) 1099-MISC — Miscellaneous Income and 1099-NEC

1099-MISC Payer Name and 1099-NEC Payer Name

Attach Form(s) 1099-INT — Interest Income

1099-INT Payer Name	2019 Amount

Attach Form(s) 1099-DIV — Dividend Income

1099-DIV Payer Name	2019 Amount

Attach Form(s) 1099-B, 1099-S – Sales of Stocks, Bonds, Real Estate, etc

Attach all stock sale transaction information, including initial cost information.

Other Government Forms to attach:

Form(s) 1099-G — Certain Government Payments, Schedule K-1s — Partnership, S-Corporation, Trust or Estate Income, Form(s) W-2G — Gambling or Lottery Winnings, Form(s) 1099-Q — Payments from Qualified Education Programs

Other Income:

Alimony, jury duty, unreported tips, disability income, etc. Business, rentals, farms: Attach income and expenses for any business, rental or farm you own. Include a list of all new equipment acquired this year, including date of purchase and cost.

Retirement Plan Contributions

	Taxpayer	Spouse
Traditional IRA contributions made for 2020		
Roth IRA contributions made for 2020		
SEP, Keogh, Individual 401(k) or SIMPLE Contributions		

Medical and Dental Expenses

	2020 Amount	2019 Amount
Prescription medications		
Health insurance premiums		
Doctors, dentists, etc		
Hospitals, clinics, etc		
Eyeglasses and contact lenses		
Miles driven for medical purposes		

Other medical and dental expenses:

Taxes

	2020 Amount	2019 Amount
Real estate taxes paid on principal residence		
Real estate taxes paid on additional homes or land		
Auto license registration fees based on the value of the vehicle		
Other personal property taxes		

Interest Expenses

Home mortgage interest paid — Attach Form(s) 1098.

Lender's Name	2020 Amount	2019 Amount

Points paid on loan to buy, build or improve main home

Lender's Name	2020 Amount

Cash/Check/Credit Contributions

	2020 Amount	2019 Amount

Noncash Charitable Contributions

Attach all receipts with details listing the following information: Donee, donee address, description of donation, date acquired and date contributed, your cost, value at time of donation, and how you acquired the property.

Miscellaneous Deductions

	2020 Amount	2019 Amount
Union and professional dues		
Professional subscriptions, books, supplies		
Uniforms and protective clothing (including cleaning)		
Job search costs		
Taxpayer educator expenses		
Spouse educator expenses		
Tax return preparation fees		
Safe deposit box rental		
Gambling losses (to the extent of gambling income)		

Other expenses (list):

		Yes	No
1	Did you receive an Economic Impact (Stimulus) Payment?	☐	☐
	If yes, how much did you receive?		
2	Did a lender cancel any of your debt in 2020? (Attach any Forms 1099-A or 1099-C)	☐	☐
3	Did you make energy efficient improvements to your home or purchase any energy-saving property during 2020? If **yes,** please attach details	☐	☐
4	Did you purchase a motor vehicle or boat during 2020? If **yes,** attach documentation showing sales tax paid.	☐	☐
5	Did you purchase a hybrid or electric vehicle in 2020? If **yes,** enter year, make, model, and date purchased:	☐	☐
6	Did you donate a vehicle in 2020? If **yes,** attach Form 1098C	☐	☐
7	What was the sales tax rate in your locality in 2020? ______ % State ID ____		
8	Did your marital status change during 2020? If **yes,** explain:	☐	☐
9	Were you or your spouse permanently and totally disabled in 2020?	☐	☐
10	Do you have dependents who must file?	☐	☐
11	Do you have children who are under age 19 or a full time student under age 24 with investment income greater than $2,200?	☐	☐
12	Did you provide over half the support for any other person during 2020?	☐	☐
13	Did you incur adoption expenses during 2020?	☐	☐
14	Did you receive a total distribution from an IRA or other qualified plan that was partially or totally rolled over into another IRA or qualified plan within 60 days of the distribution?	☐	☐
15	Did you receive any disability payments in 2020?	☐	☐
16	Did you receive tip income **not** reported to your employer?	☐	☐
17 a	Did you buy, sell, refinance, foreclose or abandon a principal residence or other real property in 2020? If **yes,** attach closing or escrow statements, 1099-C or 1099-A forms	☐	☐
b	If you sold a home, did you claim the First-Time Homebuyer Credit when you purchased it?	☐	☐
18	Did you incur any casualty or theft losses during 2020?	☐	☐
19	Did you incur any non-business bad debts?	☐	☐
20	Did you pay any individual for domestic services in 2020?	☐	☐
21	Did you take a retirement account distribution related to the corona virus or a natural disaster?	☐	☐
22	Did you buy or sell any stocks or bonds in 2020?	☐	☐
23	Did you use the proceeds from Series EE or I U.S. savings bonds purchased after 1989 to pay for higher education expenses?	☐	☐
24	Did you incur any moving expenses? If **yes,** attach details	☐	☐
25	Did you receive any income not included in this Tax Organizer? If **yes,** please attach information.	☐	☐
26	Do you expect your income and deductions in 2021 to be the same as 2020? If **no,** attach explanation of changes expected.	☐	☐
27	Did you receive Form 1095-A (Health Insurance Marketplace Statement)? If so, please attach	☐	☐
28	At any time during 2020, did you sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?	☐	☐
29	**a** Did you obtain a Paycheck Protection Program (PPP) loan?	☐	☐
	b If yes, has any portion of that loan been forgiven?	☐	☐
30	If you paid any alimony, enter recipient's SSN: ______ Alimony paid: ______		
31	Enter your state of residence **Taxpayer** ______ **Spouse** ______		

Electronic Filing and Direct Deposit of Refund

	Yes	No
If your tax return is eligible for Electronic Filing, would you like to file electronically?	☐	☐
The Internal Revenue Service is able to deposit many refunds directly into taxpayers' accounts. If you receive a refund, would you like direct deposit?	☐	☐

If **yes,** please provide a voided check (not a deposit slip) if your bank account information has changed.

What type of account is this? Checking ☐ Savings ☐

Estimated Tax Paid

Federal		State			Local		
Date	Amount	Date	Amount	ID	Date	Amount	ID

Additional Information (Enter any additional information here and attach any documents.)

Health Insurance Coverage

Preparer note: The fields on this form are non-enterable. This worksheet is meant to gather client data only. This worksheet will not transfer to the ProSeries/1040 product. Data from this worksheet must be manually entered on the appropriate form in ProSeries/1040.

Part 1 **Coverage**

Enter the name, SSN/DOB and health insurance status for each person who will claim on your return in the table below:

					Indicate which months each person was covered by MEC*:											
Name of covered individual(s)	**SSN or DOB**	**Covered 12 mos**	**Exchange Policy**	**Exemption Received**	**Jan**	**Feb**	**Mar**	**Apr**	**May**	**Jun**	**Jul**	**Aug**	**Sep**	**Oct**	**Nov**	**Dec**
1.																
2.																
3.																
4.																
5.																
6.																
7.																
8.																
9.																

*Minimum Essential Coverage (MEC) includes employer-sponsored coverage, health insurance purchased through the Health Insurance Marketplace (Exchange), Medicare, Medicaid, certain VA coverage, Tricare, etc.

For tax year 2020, the Federal ACA tax penalty has been eliminated, however, you may still be subject to a state tax penalty depending on where you live because some states have created their own individual insurance mandates to replace the federal version. These mandates require state residents to have qualifying health coverage or pay a fee with their state taxes.

Use this worksheet to list the names of individuals listed on the income tax return and their health care insurance coverage status. It will help your tax preparer determine who has health insurance coverage.

If you purchased a health insurance policy from an exchange (or Marketplace), check the Exchange Policy box above. You will receive Form 1095-A from the exchange that issued your policy. Please provide this form with your Organizer documents to your tax preparer.

Please call with any questions on this worksheet.

Basic Taxpayer Information

PERSONAL INFORMATION

	TAXPAYER		SPOUSE	
Last name				
First name				
Middle initial and suffix	MI	Suffix	MI	Suffix
Social security number				
Occupation				
Work phone/extension				
Cell phone				
E-mail address				
Driver's License/Id issuing state				
License /Id number				
License/Id issue date				
License/Id expiration date				
Birthdate	MM/DD/YYYY		MM/DD/YYYY	
Blind	**Yes** ☐	**No** ☐	**Yes** ☐	**No** ☐
Contribute to Presidential Election Campaign Fund	**Yes** ☐	**No** ☐	**Yes** ☐	**No** ☐
Eligible to be claimed as a dependent on another return	**Yes** ☐	**No** ☐	**Yes** ☐	**No** ☐

Street address ____ Apartment number ____
City ____ State ____ ZIP code ____
Home phone ____ Foreign country ____
Fax ____ Foreign phone ____

FILING STATUS

☐ **1** Single
☐ **2** Married filing jointly
☐ **3** Married filing separately
Check this box if you **did not** live with spouse at any time during the year ► ☐
Check this box if you are eligible to claim spouse's exemption ► ☐
Check this box if your spouse itemizes deductions ► ☐
☐ **4** Head of household
If the qualifying person is a child but not your dependent, enter
Child's name ____ Child's social security number ____
☐ **5** Qualifying widow(er)
Check the box for the year the spouse died ► 2018 ☐ 2019 ☐

DEPENDENT INFORMATION

Full Name (first name, middle initial, last name, suffix)				Social Security Number / Relationship	**Code / +Months in U.S.	Not qualified credit Other dep	Date of Birth / *Not Citizen	2020 Child Care Expense / 2019 Child Care Expense
						☐	☐	
						☐	☐	
						☐	☐	
						☐	☐	

** For the Dependent Code, enter the following:
L = dependent child who lived with you
N = dependent child who didn't live with you due to divorce or separation
O = other dependent
Q = not a dependent (but is a person who qualifies your client for the earned income credit and/or the credit for child and dependent care expenses)

\+ Enter the number of months dependent lived with you, and/or your spouse if married filing jointly, in the U.S.
* Check this box if dependent child is not a U.S. citizen or resident alien