

2020 CTC/ACTC/ODC DUE DILIGENCE REQUIREMENT
CHILD TAX CREDIT / ADDITIONAL CHILD TAX CREDIT / OTHER DEPENDENT CREDIT

NAME OF TAXPAYER & SPOUSE FILING RETURN _____

How to Determine if Your Child is Eligible for the Child Tax Credit, Additional Child Tax Credit or Other Dependent Credit

1. Age Test

To qualify for the "Child Tax Credit" or "Additional Child Tax Credit", a child must have been under age 17 (i.e., 16 years old or younger) at the end of the tax year for which you claim the credit. A "Other Dependent Credit" is also available for certain dependents who meet the definition of a "qualifying child" but is age 17 or older.

2. Relationship Test

The child must be your own child, a stepchild, or a foster child placed with you by a court or authorized agency. An adopted child is always treated as your own child. ("An adopted child" includes a child lawfully placed with you for legal adoption, even if that adoption is not final by the end of the tax year.)

You can also claim your brother or sister, stepbrother, stepsister. And you can claim descendants of any of these qualifying people — such as your nieces, nephews and grandchildren — if they meet all the other tests.

3. Support Test

To qualify, the child cannot have provided more than half of his or her own financial support during the tax year.

4. Dependent Test

You must claim the child as a dependent on your tax return.

Bear in mind that in order for you to claim a child as a dependent, he or she must: 1) be your child (or adoptive or foster child), sibling, niece, nephew or grandchild; 2) be under age 19, or under age 24 and a fulltime student for at least five months of the year; or be permanently disabled, regardless of age; 3) have lived with you for more than half the year; and 4) have provided no more than half his or her own support for the year.

5. Citizenship Test

The child must be a U.S. citizen, a U.S. national or a U.S. resident alien. (For tax purposes, the term "U.S. national" refers to individuals who were born in American Samoa or in the Commonwealth of the Northern Mariana Islands.)

6. Residence Test

The child must have lived with you for more than half of the tax year for which you claim the credit. There are important exceptions, however: A child who was born (or died) during the tax year is considered to have lived with you for the entire year.

Temporary absences by you or the child for special circumstances, such as school, vacation, business, medical care, military services or detention in a juvenile facility, are counted as time the child lived with you.

7. Family Income Test

The child tax credit is reduced if your modified adjusted gross income (MAGI) is above certain amounts, which are determined by your tax-filing status. The phase out threshold is \$55,000 for married couples filing separately; \$75,000 for single, head of household, and qualifying widow or widower filers; and \$110,000 for married couples filing jointly. For each \$1,000 of income above the threshold, your available child tax credit is reduced by \$50.

PART 1 - 2020 PREPARER DUE DILIGENCE - QUALIFYING CHILD

Complete the following attached form for all qualifying children.

2020 Preparer Due Diligence - Qualifying Child

Qualifying Child SSN	1	25	49
Qualifying Child First Name	2	26	50
Qualifying Child Last Name	3	27	51

Age - Qualifying Child (complete this section only if qualifying child is over age 18)

For children over age 18 who are students or permanently and totally disabled, the following additional information and documentation should be available:

1 Children who are students	4	Not a student	28	Not a student	52	Not a student
a What school does the child attend?	5		29		53	
b Can you provide documentation showing that the child was a full-time student for at least 5 months? The school records need to show the dates of attendance. Months don't have to be consecutive	6		30		54	
2 Children with a permanent and total disability	7	Not disabled	31	Not disabled	55	Not disabled
a What type of disability does the child have?	8		32		56	
b Does the child receive SSI or other disability payments?	9		33		57	
c Do you have a letter from the child's doctor, other healthcare provider, or any social service program or agency verifying that the child is permanently and totally disabled?	10		34		58	

Relationship - Qualifying Child (complete only if relationship is other than son or daughter)

For relationships with children other than son or daughter, the following additional information and documentation should be available:

1 If the biological parent is NOT living with the child, where is the parent?	Mother	11	35	59
	Father	12	36	60
2 Adopted children:				
a Is the adoption final or pending?	13	37	61	
b If the adoption is pending, do you have a letter from an authorized adoption agency?	14	38	62	
3 Foster children:				
a Do you have a letter from the authorized placement agency or applicable court document?	15	39	63	
4 Brother, sister, niece, nephew, grandchildren, great-grandchildren:				
a Can you provide a birth certificate that verifies your relationship to the child?	16	40	64	
5 Stepchildren or descendent of them, step-grandchildren, step-great-grandchildren:				
a Can you provide a birth certificate & marriage certificate verifying your relationship to the child?	17	41	65	

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Residency - Qualifying Child

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.

*The 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 taxpayer.

18	School records	42	School records	66	School records
19	Medical records	43	Medical records	67	Medical records
20	Letter*	44	Letter*	68	Letter*
21	Social service records	45	Social service records	69	Social service records
22	Daycare records	46	Daycare records	70	Daycare records
	Daycare provider		Daycare provider		Daycare provider
23		47		71	

Adjusted Gross Income - Qualifying Child

If you are not a parent of the qualifying child, is your AGI higher than any parent of the child?	24	48	72
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PART 2 - COPIES OF DOCUMENTATION REQUIRED

Please provide photocopies of documentaton for each qualifying child 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. Possibilities include school records, medical records, social service records or daycare records. A letter may be provided as well, but it must be on official letterhead from the 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 taxpayer.

PART 3 - COMPLETE THIS QUESTIONNAIRE FOR EACH QUALIFYING CHILD

QUALIFYING CHILD SSN _____

QUALIFYING CHILD FIRST NAME _____

QUALIFYING CHILD LAST NAME _____

1. DOES THE CHILD RESIDE WITH YOU? _____

IF NO, IS THERE AN ACTIVE FORM 8332, RELEASE/REVOCAION OF CLAIM TO EXEMPTION FOR CHILD BY CUSTODIAL PARENT, OR A SIMILAR STATEMENT IN PLACE AND, IF APPLICABLE PLEASE PROVIDE COPY TO THE TAX PREPARER.

2. WHAT SCHOOL DID YOUR CHILD ATTEND? _____

3. WHERE DOES YOUR CHILD LIVE? _____

4. IF YOU ARE NOT MARRIED, DOES THE CHILD LIVE WITH THE OTHER PARENT? _____

5. IF SEPARATED OR DIVORCED, WHAT DOES YOUR SEPARATION/DIVORCE AGREEMENT STATE REGARDING WHO CLAIMS THE CHILD? _____

6. DID THE CHILD PAY FOR HIS/HER OWN SUPPORT DURING THE YEAR, SUCH AS FOOD, RENT, ETC.?

7. WHAT IS THE CHILD'S BIRTHDATE? _____

8. IS YOUR CHILD MARRIED AND FILING JOINT? _____

9. DOES YOUR CHILD HAVE A VALID SOCIAL SECURITY NUMBER? _____

10. IS YOUR CHILD DISABLED? _____

IF YES, WHAT TYPE OF DISABILITY DOES THE CHILD HAVE? _____

IF YES, DOES THE CHILD RECEIVE SSI OR OTHER DISABILITY PAYMENTS? _____

IF YES, DO YOU HAVE A LETTER FROM THE CHILD'S DOCTOR OR HEALTHCARE PROVIDER STATING THAT THE CHILD IS PERMANENTLY AND TOTALLY DISABLED? _____

11. IF THE CHILD IS NOT YOUR SON OR DAUGHTER, DOES THE CHILD'S BIOLOGICAL PARENTS LIVE WITH THE CHILD? IF NO, WHERE ARE THE BIOLOGICAL PARENTS? _____