Taxpayer Name:	Spous	se Name:			
Due	Diligence for EIC, CTC	C, AOTC, HOH			
he PATH Act extends our due diligenc Credit, Head of	e requirements to include return Household filing status and the .	_		edit, Ch	ild Ta
ve) the undersigned affirm that it at the following statements are t	<u>-</u>	bove credits, on th	is current year	tax reti	urn,
 The other dependent or quality My dependents are unmarried. No one else can claim this destricted. I have provided over half of the contribute more than one-haled. I have paid over half the cost of the Qualified education expenses months of the new tax year. I can verify the amounts claim institution such as a Form 10. I certify that I can provide according of the control of th	18 to 24, or lived away at an a ualifying relative or other person ave lived with me the entire y fying relative or other person d (if married, are filing separa ependent(s). The support for the dependents of their support for the year of maintaining a home for me is were paid for the academic med for the AOTC based on do 198-T or other methods of amountate documentation verifying that the dependent lived without a daycare records, or other ords, daycare records, or other	ccredited learning in son, are over age 18 ear. does not have incortely). s listed on this tax re and my dependent period for the curre ocumentation receive ounts paid. ag my relationship to th me for more than	nstitution. and not a full tin me greater than sturn or the child s. nt tax year or the yed from the edu the dependent half of the year,	me stud \$5050. d did no e first 3 ucation	dent t
List dependents YOU Name	Relationship	Date of Birth	Permanently College Disabled?		lege
			Y N	Y	N
			Y N	Y	Ν
			Y N Y N	Y	
					N N N
			YN	Y	N
			Y N Y N	Y	N N

Print Name