

Due Diligence Questionnaire

General Questions

How many people live with you? How many: Adults _____ Children _____ How many work? _____

List Relationships:

Does anyone above make more than you? Yes No How Much? \$ _____ Are expenses shared? (groceries, rent, insurance, etc.) Yes No

If AGI is less than \$ 15,000

How are you paying for rent, utilities, food, etc?

Are you getting assistance from:

The County State Other How Much? \$ _____

Does anyone give you funds to live on? Yes No

Who? How Much? \$ _____

If you live with your parents...

Who pays:

Rent: Me Parents Other How Much? \$ _____

Insurance: Me Parents Other How Much? \$ _____

Medical: Me Parents Other How Much? \$ _____

Entertainment: Me Parents Other How Much? \$ _____

Utilities / Food: Me Parents Other How Much? \$ _____

Single Parent

Does other parent make enough to support child? Yes No How Much? \$ _____

Where is the child's other parent?

Why isn't other parent claiming child?

How often does child stay with parent?

What school does child attend?

Year Round? Yes No

Who:

Carries health insurance? Me Other Parent Other How Much? \$ _____

Pays other medical expenses? Me Other Parent Other How Much? \$ _____

Pays for activities & essentials? Me Other Parent Other How Much? \$ _____
(clothes, lunch, sports, etc.)

Watches children while at work? Me Other Parent Other How Much? \$ _____

Pays for day care? Me Other Parent Other How Much? \$ _____

Working parent with no child care expenses...

Does a family member watch child?

Yes No

Do they live with you?

Yes No

Do they file a tax return?

Yes No

If male and claiming a young child as a dependent...

Where is the child's mother?

Who watches child while you are at work?

Does mother make more the you?

Yes No

Why is she not claiming the child?

Why didn't you report day care expenses?

How Much?
\$ _____

If family member cares for child, do they live with you?

Yes No

Do they file a tax return?

Yes No

Can / does someone claim caregiver as a dependent?

Yes No

If your child is in college:

What school?

How long?

Who Pays:

Room & Board? Me Other Parent Other

Tuition? Me Other Parent Other

Entertainment? Me Other Parent Other

Cell phone? Me Other Parent Other

Internet? Me Other Parent Other

If someone helped you pay for student costs, why didn't they claim student?

How Much? \$ _____

Do you have proof child attended?

Yes No

Does student live at home?

Yes No

Where does the other payee live?

Are you less than 15 years older than your son / daughter: Yes No

Is this child really your child? Yes No

Did you adopt the child? Yes No

Do you have legal proof of the adoption? Yes No

Are they really your sibling, not your child? Yes No

Why aren't the child's parents claiming them?

Where do they live?

Why are they not filing their own return?

Can someone else claim the child? Yes No **Who?**

You listed a child with the same last name as the above adult, what is their relationship to each other?

Non-Standard Dependents (Grandchild, niece, nephew, stepchild, foster child, etc.):

Other adults in your home who are related to the child:

Why aren't the child's parents claiming the child?

Where are the parents?

How long have you had the child?

Did the parent work and / or collect unemployment? Yes No

How Much? \$ _____

Did parents send any funds to help care for the child? Yes No

Do you receive any support for the child? Yes No

How did you end up caring for this child?

When? / /

Do you have: Court documentation of custody? Yes No

Documents proving relationship to this child? Yes No

Adult Dependents

Who is this person?

Where do they live?

Are they disabled? Yes No

Why are they not filing their own return?

Can someone else claim them? Yes No

You listed a child with the same last name as this adult, what is their relationship?

By signing below, I hereby certify the information given above is true and accurate to the best of my knowledge.

Client Signature _____ Date: _____