

**Tax Filing Questions**

**Is anyone in the household required to file a federal income tax return?**      Yes  No

If yes, list names of individuals: \_\_\_\_\_

**Does anyone in the household plan to file a federal income tax return next year?**      Yes  No

If yes, list names of individuals: \_\_\_\_\_

**Will any of the individuals listed file jointly with a spouse?**      Yes  No

If yes, list names of individuals filing jointly: \_\_\_\_\_

**Do both individuals live in the same household?**      Yes  No

**Do any of the tax filers claim dependents on their tax return?**      Yes  No

If yes, list the name of the tax filer, their dependents, and if they live in the household with the tax filer:

Tax Filer: \_\_\_\_\_ Dependents in the home: \_\_\_\_\_

Tax Filer: \_\_\_\_\_ Dependents out of the home: \_\_\_\_\_

Tax Filer: \_\_\_\_\_ Dependents in the home: \_\_\_\_\_

Tax Filer: \_\_\_\_\_ Dependents out of the home: \_\_\_\_\_

**Will anyone in the household be claimed as a dependent on someone's tax return?**      Yes  No

If yes, list dependent name, name of tax filer, and their relationship:

Dependent: \_\_\_\_\_ Name of tax filer: \_\_\_\_\_ Relationship: \_\_\_\_\_

Dependent: \_\_\_\_\_ Name of tax filer: \_\_\_\_\_ Relationship: \_\_\_\_\_

Dependent: \_\_\_\_\_ Name of tax filer: \_\_\_\_\_ Relationship: \_\_\_\_\_

Dependent: \_\_\_\_\_ Name of tax filer: \_\_\_\_\_ Relationship: \_\_\_\_\_

Dependent: \_\_\_\_\_ Name of tax filer: \_\_\_\_\_ Relationship: \_\_\_\_\_

Sign: \_\_\_\_\_ Date: \_\_\_\_\_