US **Dependents** 2024 1040 2

Please add, change or delete information for 2024.

DEPENDENTS

First name Last name. Title/suffix Date of birth (m/d/y). Date of death. Date of adoption. Social security number. Relationship. Months lived at home. Type of dependent (see table). Earned income credit (see table). Claimed by: 1=taxpayer, 2=spouse. IRS theft protection PIN Dependent First name. Last name. Title/suffix Date of birth (m/d/y). Date of death.	Dependent	Type of Dependent 1 = Child living w/taxpayer 2 = Child not living w/taxpayer 3 = Dependent other than child 4 = Head of household or qualifying surviving spouse (QSS) only. not a dependent 5 = Earned income credit only, not a dependent Earned Income Credit 1 = When applicable (default) 2 = Student age 19 to 23 3 = Disabled 4 = Force 5 = Suppress
Title/suffix. Date of birth (m/d/y) Date of death Date of adoption Social security number Relationship. Months lived at home Type of dependent (see table) Earned income credit (see table) Claimed by: 1=taxpayer, 2=spouse IRS theft protection PIN Dependent First name Last name Title/suffix Date of birth (m/d/y) Date of death.	Dependent	1 = Child living w/taxpayer 2 = Child not living w/taxpayer 3 = Dependent other than child 4 = Head of household or qualifying surviving spouse (QSS) only. not a dependent 5 = Earned income credit only, not a dependent Earned Income Credit 1 = When applicable (default) 2 = Student age 19 to 23 3 = Disabled 4 = Force
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Months lived at home	Dependent	not a dependent Earned Income Credit 1 = When applicable (default) 2 = Student age 19 to 23 3 = Disabled 4 = Force
Earned income credit (see table) Claimed by: 1=taxpayer, 2=spouse IRS theft protection PIN Dependent First name Last name Title/suffix Date of birth (m/d/y) Date of death.	Dependent	1 = When applicable (default) 2 = Student age 19 to 23 3 = Disabled 4 = Force
Earned income credit (see table) Claimed by: 1=taxpayer, 2=spouse IRS theft protection PIN Dependent First name Last name Title/suffix Date of birth (m/d/y) Date of death.	Dependent	1 = When applicable (default) 2 = Student age 19 to 23 3 = Disabled 4 = Force
Claimed by: 1=taxpayer, 2=spouse IRS theft protection PIN Dependent First name. Last name. Title/suffix. Date of birth (m/d/y). Date of death.	Dependent	2 = Student age 19 to 23 3 = Disabled 4 = Force
IRS theft protection PIN Dependent First name. Last name. Title/suffix. Date of birth (m/d/y). Date of death.	Dependent	2 = Student age 19 to 23 3 = Disabled 4 = Force
Dependent First name. Last name. Title/suffix. Date of birth (m/d/y). Date of death.	Dependent	3 = Disabled 4 = Force
First name. Last name. Title/suffix. Date of birth (m/d/y). Date of death.		4 = Force
Last name. Title/suffix. Date of birth (m/d/y). Date of death.		5 = Suppress
Title/suffix Date of birth (m/d/y) Date of death		0 0 0 0 pp. 0 0 0
Date of birth (m/d/y)		
Date of death		
		NOTE: If you claim the earned
II)ato ot adoption		income credit, please provide proof that your child is a resident of the U.S. This proof is
Date of adoption		
		typically in the form of:
Relationship.		School records or statement
onths lived at home		 2. Landlord or property management statement
Type of dependent (see table)		3. Health care provider
Earned income credit (see table)		statement 4. Medical records
Claimed by: 1=taxpayer, 2=spouse		5. Child care provider records
IRS theft protection PIN		6. Placement agency statement 7. Social service records or
Dependent	Dependent	statement
First name		8. Place of worship statement 9. Indian tribe office statement
Last name		10. Employer statement
Title/suffix		
Date of birth (m/d/y)		
Date of death		NOTE: If your child is disabled,
Date of adoption		please provide one of the following forms of proof of disability: 1. Doctor statement 2. Other health care provider statement 3. Social services agency or program statement
Social security number		
Relationship		
Months lived at home		
Type of dependent (see table)		
Earned income credit (see table)		
Claimed by: 1=taxpayer, 2=spouse		program statement
IRS theft protection PIN		