Unearned income (interest, dividends, etc.) is more than \$350 and total income is more than \$1,100. Unearned income (interest, dividends, etc.) is less than \$350 and total income is more than \$12,950.

B. Johnson & Assoc., Ltd. certified public accountants

Dependent Questionnaire

Dependent Information

Social Security #s are required for all depend	ents.							
Check here if no change from previous	year.							
	Date of		Social	# of months at	Dependents' 2022 Income (Optional)			Do you want us to
<u>Full Name</u>	<u>Birth</u>	Relationship	Security #	home during 2022	<u>Wages</u>	Interest/Divide	nds/Other	prepare their returns?
								YN
								Y N
								Y N
								Y N
								Y N
	-							Y N
			Federal Edu	cation Credits				
College education credits are available for tui	tion and fees paid b	y taxpayers and the	eir dependents. Refer t	o your Client Tax Newsletter fo	r more details.			
	Status (Grade) Tuition and			529 Plan or Education				
Student Name	<u>on Jan 01, 2022</u>	Fees Paid	Cost of Books	IRA Withdrawals	<u>s</u>	cholarships / Grant	<u>s</u>	
		(Attach 1098-T)						
					-		-	
					-		-	
					_		-	
			State Education De	eductions and Credits				
Minnesota allows deductions and/or credits for primary and secondary (grades K - 12) education costs. Minnesota requires itemized cash register receipts.								
	Ctatus (arada)	Tutoring and		Computer	Doolee and	Drivete Cabaal	Dent of Music	
Status (grade) Student Name on Jan 01, 2022			ring and mic Fees	Hardware and Educational Software	Books and Supplies	Private School Tuition Paid	Rent of Music Instruments	Other (Describe)
<u>otadent Name</u>	<u>011 0411 0 1, 2022</u>	Acade	THICT CCS	<u>Ladoational Conward</u>	<u>оприюз</u>	Tultorr ald	<u>III3ti di IICIIt3</u>	Other (Describe)
								
			Chil	d Care				
A credit is available for costs to care for depe	ndents while you ar	e at work. You mus	t report the provider(s)	name, address and social sec	urity # or federal			
identification #. You are required to report this	-				-			
Do you have daycare deducted from your paycheck? YN								Provider
Name of Provider Address						Amount Paid		Social Security # or Federal ID #
				_				