Organizer
Dependent

TAXPAYER: _____

TAX YEAR _____

DEPENDENT#1 NAME *(AS IT APPEARS ON SOCIAL SECURITY CARD)*	**LAST:**
	FIRST:
	MIDDLE:
	Social Security #:
BIRTHDATE:	**THIS PERSON IS YOUR:**
Did you incur any expenses for child care, day care, or dependent care for this person?	☐ **YES** | ☐ **NO**
**** If YES, please fill out ORGANIZER: DEPENDENT CARE***	
For child born 2025-2028 - Do you want to elect to open a Trump Account for the child?	☐ **YES** | ☐ **NO**
Trump Accounts are not automatically established/opened; they must be "elected."	

DEPENDENT#2 NAME *(AS IT APPEARS ON SOCIAL SECURITY CARD)*	**LAST:**
	FIRST:
	MIDDLE:
	Social Security #:
BIRTHDATE:	**THIS PERSON IS YOUR:**
Did you incur any expenses for child care, day care, or dependent care for this person?	☐ **YES** | ☐ **NO**
**** If YES, please fill out ORGANIZER: DEPENDENT CARE***	
For child born 2025-2028 - Do you want to elect to open a Trump Account for the child?	☐ **YES** | ☐ **NO**
Trump Accounts are not automatically established/opened; they must be "elected."	

DEPENDENT#3 NAME *(AS IT APPEARS ON SOCIAL SECURITY CARD)*	**LAST:**
	FIRST:
	MIDDLE:
	Social Security #:
BIRTHDATE:	**THIS PERSON IS YOUR:**
Did you incur any expenses for child care, day care, or dependent care for this person?	☐ **YES** | ☐ **NO**
**** If YES, please fill out ORGANIZER: DEPENDENT CARE***	
For child born 2025-2028 - Do you want to elect to open a Trump Account for the child?	☐ **YES** | ☐ **NO**
Trump Accounts are not automatically established/opened; they must be "elected."	

STAFF USE:
Can the dependent(s) be a Qualfiying person for HOH purposes?

NOTE(s): _____

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If you have more than 3 dependents, please use additional worksheet(s)