|              |                   | Questionnaire  |
|--------------|-------------------|--|
|              |                   |  |
| Name:        |                   |  |
| Questic      | onnaire           |  |
|              |                   |  |
| Persona      |                   | nation   |
| -            | es No             | Did your marital status change during the year?  |
| L            | ][]               | Did your marital status change during the year?<br>If "Yes," explain   |
| T            | ] []              | Can you or your spouse be claimed as a dependent by someone else?  |
| ſ            | iii               | Did your address change during the year?   |
| ſ            | 111               | Were you, your spouse, or any dependents a victim of identity theft?   |
|              |                   | If "Yes," explain  |
| Į            | 1[]               | Were you, your spouse, or any dependents issued an Identity Protection PIN (IP PIN)?   |
|              |                   | If "Yes," provide Notice CP01A from the IRS.   |
| P            | rovide p          | roof of identity to be eligible to e-file your tax return (driver's license or state-issued photo ID)  |
| Dowowski     | ant Infa          |  |
| Depende<br>Y | ent into<br>es No | maton  |
|              | ][]               | Did you have any changes in dependents during the year?  |
| L            | 1 1 1             | If "Yes," explain  |
| [            | ][]               | Can another person qualify to claim any of your dependents?  |
| ī            | 111               | Did you have any childcare expenses during the year?   |
| [            | ][]               | Did you have any adoption expenses during the year?  |
| [            | ][]               | Did you have any children under age 19 or a full-time student under age 24 with more than \$2200 of  |
|              |                   | unearned income?   |
| P            | rovide d          | ocumentation for proof of dependent related credits (school records, medical records, daycare records, etc.)   |
|              | 10 Impli          |  |
| COVID-1      | es No             | cauons   |
|              | ] []              | Did you receive an Economic Impact Payment?  |
| L            | 111               | If "Yes," provide Notice 1444 from the IRS.  |
| ſ            | 1 [ ]             | Did you or your spouse experience economic loss due to COVID-19 (loss of job, closed business, etc.)?  |
|              | 111               | Were you or your spouse unemployed for any portion of the year due to COVID-19?  |
|              | iii               | Did you or your spouse continue to receive wages from your employer even if you were unable to work?   |
|              | i i i             | Did you or your spouse receive a distribution from a retirement plan (401K, IRA, etc.) due to COVID-19?  |
| Ī            | 111               | If you or your spouse own a farm or business, did you continue to pay any employees while they were not  |
|              |                   | working?   |
| [            | 1[]               | If you or your spouse own a farm or business, did you delay withholding FICA taxes from any employee's   |
|              |                   | pay?   |
| [            | ][]               | If you or your spouse own a farm or business, did you receive a Paycheck Protection Program (PPP) loan?  |
|              |                   | If "Yes," was the loan forgiven or have you applied for forgiveness?   |
| [            | ][]               | If you or your spouse own a farm or business and were unable to work due to COVID-19, would you have   |
|              |                   | qualified for sick or family leave if employed by someone other than yourself?   |
| Health C     | Care Info         | ormation   |
|              | es No             |  |
|              |                   | Did any member of your household have healthcare coverage through the Marketplace?   |
|              |                   | If "Yes," provide copies of Form 1095-A.   |
| ſ            | ][]               | Did you receive any distributions from a Health Savings Account (HSA), Archer MSA, or Medicare Advantage   |
|              |                   | MSA during the year?   |
| Income       | Purcha            | uses, Sales, and Debt Information  |
| meone,       | es No             |  |
| Y            |                   | Did you receive any tips not reported to your employer?  |
|              | 1 [ ]             | Did you receive any lips not reported to your employer?  |
| [            |                   |  |
| [            |                   | Did you receive any lips not reported to your employer?<br>Did you receive any disability income during the year?<br>Did you cash in any U.S. savings bonds during the year? |

|              | Questionnaire  |
|--------------|--|
|              | SSN:   |
| uestionnaire |  |
| [][]         | Did you sell an existing business, rental property, or other property during the year?   |
| [][]         | Did you purchase any business assets or convert any assets to business use?  |
|              | If "Yes," provide the cost of the asset, the date it was placed in service, and business use   |
|              | percentage.  |
| [][]         | Did you purchase any gasoline, diesel, or special fuels for off-road business use?   |
| [][]         | Did you buy or sell any stocks, bonds, or other investments during the year?   |
| [][]         | Did you sell a principal residence during the year?  |
|              | If "Yes," provide closing documentation for the purchase and sale of the home.   |
| [][]         | Did you have a principal residence or a piece of real property foreclosed on during the year?  |
| [][]         | Did you abandon a principal residence or a piece of real property during the year?   |
| [][]         | Did you refinance your principal home or second home or take out a home equity loan during the year?   |
|              | If "Yes," provide all escrow, closing, and other pertinent documentation and information.  |
| [][]         | Did you receive any principal or interest during this year from property sold in prior years?  |
|              | Did you rent out your home or use it for business?   |
|              | Did you sell, exchange, or purchase any real estate during the year?   |
|              | Did you acquire a new or additional interest in a partnership or S corporation?  |
| [][]         | Did you have any debts canceled or forgiven this year?   |
| [][]         | Does anyone owe you money that has become uncollectible?   |
| [][]         | Did you purchase a new hybrid, alternative motor, or electric motor energy-efficient vehicle during the  |
|              | year?  |
|              | If "Yes," provide the year, make, model, VIN, and date the vehicle was placed in service.  |
| [][]         | Did you receive income or incur expenses associated with a fantasy sport league?   |
|              | If "Yes," provide documentation.   |
| [][]         | Did you receive income or incur expenses associated with car sharing (e.g., Lyft or Uber)?   |
|              | If "Yes," attach Form 1099-MISC and Form 1099-K.   |
| [][]         | Did you receive income or incur expenses associated with freelancing (e.g., Upwork or TaskRabbit)?   |
|              | If "Yes," attach Form 1099-K or Form W-2.  |
| [][]         | Did you receive income or incur expenses associated with fashion sharing (e.g., Poshmark or thredUP)?  |
|              | If "Yes," provide documentation.   |
| [][]         | Did you receive income or incur expenses associated with crowdfunding (e.g., Kickstarter or Indiegogo)?  |
|              | If "Yes," attach Form 1099-K.  |
| [][]         | Did you receive income or incur expenses associated with a short-term rental (e.g., Airbnb or HomeAway)?   |
|              | If "Yes," provide documentation.   |
| [][]         | Did you receive any other income you have not provided information for with this organizer?  |
|              | If "Yes," explain  |
| emized Deduc | tion Information   |
| Yes No       |  |
| [][]         | Did you pay out-of-pocket medical or dental expenses (premiums, prescriptions, mileage, etc.) during the   |
|              | year?  |
| [][]         | Did you pay any long-term care premiums for yourself, your spouse, or a dependent during the year?   |
| [][]         | Did you receive any state or local income tax refunds from prior years?  |
| [][]         | Did you make any major purchases (vehicle, boat, etc.) during the year?  |
| [][]         | Did you pay any real estate property taxes or personal taxes during the year?  |
| [][]         | Did you pay mortgage interest during the year?   |
| [][]         | Did you make cash donations to charity during the year?  |
| [][]         | Did you make noncash donations to charity (clothes, furniture, etc.) during the year?  |
| [][]         | Did you donate a boat or vehicle during the year?<br>If "Yes," attach Form 1098-C.   |
| 1111         | Did you have gambling winnings or losses during the year?  |
|              | Did you have gambling winnings or losses during the year?<br>Did you have any job-related expenses that were not reimbursed by your employer (uniforms, safety |
| [][]         | equipment, etc.)?  |
|              | Did you use your vehicle on the job other than for commuting to work?  |
| [] []        |  |
|              | Did you work out of town at any time during the year?  |

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Page 3

|                 | Questionnaire  |
|-----------------|--|
| Name:           | SSN:   |
| Questionnaire   |  |
| Retirement Info | rmation  |
| Yes No          |  |
| [][]            | Did you receive any payments from a pension, profit sharing, or 401(k) plan during the year?   |
| [][]            | Did you make any contributions to, withdrawals from, or execute any rollovers from an IRA, Roth, Keogh,  |
|                 | SIMPLE, SEP, 401(k), or other qualified retirement plan during the year?   |
| [][]            | Did you receive any Social Security benefits during the year?  |
| ducation Info   | mation   |
| Yes No          |  |
| [][]            | Did you pay tuition expenses that were required for attending college, university, or vocational school<br>for yourself, your spouse, or a dependent during the year (even if classes were attended in another<br>year)? |
| [][]            | Did anyone in your household attend a post-secondary school during the year?   |
| [][]            | Did you make a contribution to or receive a distribution from an Education Savings Account or Qualified  |
|                 | Tuition Program during the year?   |
| [][]            | Did you pay student loan interest for yourself, your spouse, or your dependent(s) during the year?   |
| Aiscellaneous   | Information  |
| Yes No          | Diduce excise call and exchange another descention and financial interaction encoded and   |
| [][]            | Did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual<br>currencies?   |
| [][]            | Did you incur a gain or loss due to damaged or stolen property?  |
|                 | If "Yes," provide the incident date, value of the property, and amount of insurance reimbursements.  |
| [][]            | Did you pay wages to any household employees (babysitter, nanny, housekeeper, etc.)?   |
| [][]            | Did you make gifts to any one person in excess of \$15,000 during the year?<br>Yes No  |
|                 | [] [] If "Yes," are you splitting the gift with your spouse?   |
| [][]            | Did you incur moving expenses during the year?   |
| [][]            | Did you make any energy-efficient improvements to your main home during the year?  |
| [][]            | Are you a business owner who paid health insurance premiums for your employees during the year?  |
| [][]            | Did you own interest or shares in a Qualified Opportunity Fund?  |
| [][]            | Did you apply an overpayment of your 2019 taxes to your 2020 estimated taxes?  |
| [][]            | If you have an overpayment of 2020 taxes, do you want the refund applied to your 2021 estimated taxes?   |
| [][]            | Did you make any estimated payments toward your 2020 taxes?  |
| [][]            | Do you want to have any refund or balance due directly deposited or withdrawn?   |
|                 | If "Yes," provide a canceled checking or savings slip.   |
| [][]            | Do you anticipate your income or withholdings to be different for 2020?  |
| [][]            | Did you make any purchases subject to Use Tax?   |
|                 | If "Yes," provide details.   |
| [][]            | Did you receive any notices from the IRS or state taxing authority?<br>If "Yes," explain   |
| [][]            | May the IRS discuss your tax return with your preparer?  |
| [][]            | Would you like a copy of your tax return sent to you electronically instead of receiving a printed copy?   |
| Foreign Tax In  | formation  |
| Yes No          |  |
| [][]            | Did you have a financial interest in or signature authority over a financial account or asset located in<br>a foreign country?   |
| [][]            | Did you receive a distribution from, or were you a grantor of, or transferor to, a foreign trust?  |
|                 | Did the aggregate value of your foreign accounts exceed \$10,000 at any time during the year?  |
|                 | Did you have any income from, or pay taxes to, a foreign country?  |
| [][]            | Did you own property in a foreign country?   |
|                 | , P.=P.=P,   |
|                 |  |

## **Preparer Notes**