

2021 CLIENT TAX QUESTIONNAIRE

(Please Print)

TAXPAYER INFORMATION														
Taxpayer Last Name: First: Middle: Suffix:			Jffix:	☐ Mr. ☐ Miss Marital Status:										
				☐ Mrs.	□ Ms.	Single□ Married□ Div □ Sep□ Widow□								
Social Security Number:	lumber: Date of Birth: Age:				Occupat	ion:	Home Phone:			С	Cell Phone:			
Email Address:						ed Metho			Email		Text□			
Street Address:														
Sirect Address.								Api. #.						
City:		Sta	te:				Zip	Code:						
Did your marital status ch	nange during t	the yea	ır? 🗆	Υ	N Did	your add	ress ch	ange duri	ing the	year?	□ Y	□N		
SPOUSE INFORMATION														
Spouse Last Name:	First: Mi	ddle:	Suffi	ix:	☐ Mr.	□ Miss								
					☐ Mrs.	□ Ms.								
Social Security Number:	Date of Bi	irth:	Age:		Occupat	ion:			Cell Ph	none:				
		DEPE	NDENTS	(CHI	LDREN A	AND OTH	IERS)							
								Months				l You		
No. of the Control of				ate of Birth		Social Security		Lived Full-Tir		Time	ne Provide More Than			
Name (Last, First)	Relationship		nm/dd/y		1	Number			With Student			More Inan Half of the		
				• • •			You				Support?			
									□ Y	□N	□ Y	□ N		
									□ Y	□N	□ Y			
									□ Y	□N	□ Y			
									□ Y	□N	□ Y			
									□ Y	□N	□ Y	□N		
Da				laa .aa.	عاما العاما الم							□N		
Do you provide a honWere there any births,	· ·		•				te famili	vin 2021 c	r 20228	/If				
yes, list details in "Oth						- IIIIIII Gala		, 111 2021 0	,, 2022;	(,,				
Could you be claimed as a dependent on another person's tax return for 2021?										□ Y	□N			
If requested by the IRS, do you have documentation (i.e. receipts, records) to substantiate your eligibility for the Child Tax Credit, Earned Income Tax Credit and/or Head of Household Filing Status? [□ Y	□N				
Crilia Tax Cicali, Earth	ca income tax	Cicaii	ana, or m	saa oi	11003011010	a rilling sic	11039							
			INCO	ME II	NFORMA	TION								
Did you receive any income from employment as an employee or independent contractor? (If yes, attach Form W. 2 and for 1099 NEC)								□ Y	□N					
Form W-2 and/or 1099-NEC) • Did you receive any Unemployment Compensation in 2021? (If yes, attach 1099-G)										□ Y	□N			
 Did you receive any Social Security benefits during 2021? (If yes, attach Form SSA-1099) 										□ Y	□N			
Did you sell any Stocks/Investments in 2021? (If yes, attach 1099-B)										□ Y	□N			
Did you receive Interest Income from a savings account or dividends from mutual funds/investments?											□ Y	□N		
 (If yes, attach Form 1099-INT and/or 1099-DIV) Did you have any gambling winnings or losses, including lottery, bingo and raffles? (If yes, attach W2-G) 												□N		
	npiina winnina	s or loss	es, includ	ina Inti	terv, binac	and raffle	es? (If ve	es, attach	W2-G1		□ Y	- ' '		

Did you are you species of a site of the second process of the		RETIREMENT INFORMATION						
. Did you receive a distribution from a retirement plan in order to pay medical bills, for higher education expenses	•			Υ	□N			
In 2020, did you take a Covid related distribution from a 401K plan, RA ar other qualified plan and was the inclusion of distribution on your 2020 tax Return deferred over a 3-year period? Part	•			Υ	□N			
HEALTH INFORMATION Did you purchase health insurance from the Health Care.gov Marketplace in 2021? (if yes, affach Form 1095-A)	•	Did you make any contributions to a retirement plan such as a pension, 401K, IRA, SEP, SIMPLE in 2021?		Υ	\square N			
Did you purchase health insurance from the Healthcare.gov Marketplace in 2021? (If yes, attach Form 1095-A)	•			Υ	□N			
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Did you or your spouse participate in a Health Savings Account (HSA) or other Medical Savings Account in 2021? (if yes, atlach form 1999-34 and form 3498-3.) HOUSING INFORMATION Do you own a home? (if yes, atlach Form 1098 - Montgage Interest and 2021 Property Tax Statement) Did you arent during 2021? (if yes, atlach Form 1098 - Montgage Interest and 2021 Property Tax Statement) Did you rent during 2021? (if yes and total household income is less than \$60,000, answer the following: a. Name and address of Landlord: b. Monthly rent paid in 2021; c. Number of months rented: d. Is Heat included in your rent payment? d. Is Heat included in your rent payment? bid you sell and/or purchase a home in 2021 or 2022? (if yes, atlach Support for income and expenses) Did you receive rent from real estate or other property? (if yes, atlach Support for income and expenses) Did you make any energy efficient improvements to your home in 2021? (if yes, list amount \$\frac{1}{2}\$ \text{ Number of months rented:} CHILD AND DEPENDENT CARE Did you pay any child/dependent care expenses in 2021 for a child under 13 years old or costs to care for a y N N N N N N N N N		HEALTH INFORMATION						
Did your spouse/dependent incur a substantial amount of unreimbursed medical expenses in 2021? Did your spouse/dependent incur a substantial amount of unreimbursed medical expenses in 2021? Did you wan a home? (if yes, attach Form 1098 – Mortgage Inferest and 2021 Property Tax Statement)	•	<u> </u>						
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Provider Address Samount Paid to Provider	•	handicapped individual? If yes, complete the following:						
EDUCATION Did you, your spouse or a dependent incur any tuition, fees or book expenses that were required to attend college, university or vocational school in 2021? (If yes, attach 1098-T and support for expenses) Did you, your spouse or a dependent receive scholarships or grants for higher education in 2021? Did you, your spouse or dependent receive a distribution from a 529 Plan or Education Savings Plan in 2021? (If yes, attach Form 1099-Q.) Did you make any contributions to a 529 Plan or Education Savings Plan in 2021? (Attach support) Did you pay any Student Loan Interest in 2021? (If yes, attach Form 1098-E) ITEMIZED DEDUCTIONS Note: The IRS allows taxpayers to reduce their income by taking the higher of the Standard Deduction or Itemized Deductions. For 2021, the standard deduction is \$12,550 for Single Filers, \$18,800 for HOH and \$25,100 for Married Filers. Did you make charitable contributions in 2021? You may deduct up to \$300 or \$600 (joint) in cash donations if you do not itemize. (If yes, attach receipts or acknowledgements from charity, cancelled check or other proof) Did you use your vehicle to provide volunteer services to a charity? Did you pay state taxes on new vehicle purchased or monthly lease in 2021? Did you owe State or Local taxes when you filed your 2020 Income Tax Return? If yes, please list amount paid in N		Name of Child Care Provider: Provider EIN/Social Secu	rity	Nur	nber:			
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LULI, W		Did you pay state taxes on new vehicle purchased or monthly lease in 2021?		Υ	□ IN			

ANSCELLANICOUS OUESTIONS													
MISCELLANEOUS QUESTIONS In March 2021, the government issued an Economic Stimulus payment of \$1,400 per taxpayer and eligible													
•	dependents. If you did not receive the full amount, you may be cligible to claim the amount as a credit on												
your 2021 tax return. Refer to IRS Notice 1444-C or your tax account info at www.IRS.gov/Account for the									\$				
	amount of the stimulus payme						a dalla an		vad an II) C			
•	Did you receive Advance Child Tax Credit payments during 2021? If yes, you should have received an IRS Letter 6419. If you cannot locate your letter, visit www.IRS.gov/CTCportal or call 800-908-4187 to obtain total of												
	payments received. List total						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0.010110		Ψ		
•	Due to Covid-19, did you work										ПΥ	ПИ	
	home location, you may qual			city or sto	ate taxes paid.	Please	list date:	s you w	orked fro	m			
	home in "Other Information" Section below.												
	BUSINESS INFORMATION												
No	Note: Complete this section if you received a 1099-NEC, 1099-MISC, 1099-K or own a small business.												
•													
•	Did you materially participa		ısiness i	n 20218							ΠΥ	□N	
•	Did you pay estimated taxes		751110331								ΠΥ	□N	
•	Do you have records to sup		ısiness i	evnense	s? If ves inlease	attach	receint				ΠΥ	□N	
_	Did you use your vehicle for	·		CXPC113C.	34 II yC3, picast	dilacii	ТСССІРІ	o,			ПΥ	□N	
•	Do you have written eviden	·		vohiolo	ovpopsos2 Pla	aca list ti	a fallou	in a:			_ ·		
•	Business Miles Driven in 20		ori your		nuting Miles Dr			ving:	Otho	r Miles Driv			
	Dosiliess Miles Dilveil ili 20	<i>J</i>		Comm	noming Miles Di	iven in z	UZ I		Office	I Miles Dila	en in 20.	4 I	
				FILIN	IG QUESTIO	NS							
•	Did you receive or request a	ı six-diait Ide	ntity Pr				SSŠ				ΠΥ	□N	
•	The IRS is able to deposit refu							eive a	refund, w	vould you			
	like a direct deposit?		,								□ Y	□N	
•	If yes, please provide the fol												
	Name of Bank	Bank Rou	iting Nu	ımber	Bank Acco	ount Nun	ber			e of Acco			
	☐ Checking ☐ Savings								gs				
									ecking	□ Savin	gs		
								ecking	ıgs				
Se	elect type of Tax Return Copy fo	or your pers	onal file	es:		□ Elect	ronic C	эру		er Copy w	ith Folde	er	
Н	ow did you hear about us?			□ Fami	ly/Friend (List N	ame):							
	Google/Website Search			□ Oth	er (List Source)	:							
		QUESTIO	NS, C	OMME	NTS AND O	THER IN	IFOR <i>M</i>	IOITA	1				