Name:		
Questionnaire		_
Do you own your home?	Yes	No
Did you make gifts of more than \$18,000 to any individual?	Yes	No
Did you receive, sell, send, or exchange any financial interest in any digital asset?	Yes	No
Do you have any foreign income or accounts in a foreign country?	Yes	No
Do you make contributions to a 529 education plan? If so, Name Amount SSN	Yes	No
Do you make contributions to an ABLE plan for a disabled person? If so, Name Amount SSN	Yes	No
Do you or anyone on this tax return have an IRS Identity pin letter?	Yes	No
Did you receive or pay alimony?	Yes	No
(Date of divorce must be prior to 12/31/2018) Date of Divorce/	1	
Are you a surviving spouse?	Yes	No
Do you wish \$3 to go to the Presidential Election Campaign?	Yes	No
Do you have health care coverage with a government Marketplace (Pennie)?	Yes	No
Do you have form 1095A?	Yes	No
Do you have an adoption credit from a previous year that is being carried forward?	Yes	☐ No
Did you sell your primary residence last year?	Yes	No
Are you a first-time home buyer repayment client?	Yes	☐ No
Have you received a letter from the IRS about the child tax or earned income credi	t? Yes	☐ No
Client acknowledges the receipt of the Informational Disclosure Packet & any printed in the office or via email (if email is provided).	/ other infor	mation eithe
Signature Date		
Exit Interview		
Client Signature Clerks Initials Date _ Pg 1		

Name:

Income Information

Type Of Income	Taxpayer	Spouse	Type Of Income	Taxpayer	Spouse
W2			1099MISC		
1099 Combined Statement			SS		
10991			W2G		
1099D			K-1		
1099G Unemployment			1099K		
1099G Refund			Schedule C- Business Form		
1099R			Schedule E- Rental Form		
1099C/A			Schedule E- Royalties		
1099B			Schedule F- Farm		
1099NEC			Alimony Amount Received		

Adjustments to Income

Type Of Adjustments	Taxpayer	Spouse		Taxpayer	Spouse
IRA Pension/ Contributions Roth			Housing Allowance		
IRA Pension Contributions Trad			Self Employed Health Ins		
Student Loan Interest			HSA		
Qualified Reservist Expense			Alimony Paid to Whom	SSN	Amount Prior to 2018
Teacher Expense					

Itemized Deductions

Medical (7.5%)	Amount	Charity (60% AGI Limit)	Amount
Medical Insurance		Charity Cash	
Co-Pays		Charity Prop Donation	
Prescriptions		Charitable Mileage (0.14)	
Medical Miles (0.22)		Charity Mileage	
Testing		Other	
Other			

Taxes (\$10000 max)	Amount	Miscellaneous Deduct	Amount
Property Taxes		Gambling Losses Offsetting W2G's	
Personal Prop Tax		Attorney Fees	
Sales Tax		Union Dues (PA State Only)	
Local Service Tax		Work Clothing (PA State Only)	
Unemployment Tax		Work Tools (PA Only)	
Other		Other (use PA UE form)	

Interest	Amount
Mortgage Int 1098	
Seller Fin Mortgage	
Seller Paid Points	
Investment Acct Int	
Other	

Payments

Prior Year Est Payment	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter	Prior Year Refund Applied
IRS					
State					
Local					
Other					

Name:

		<u>Credits</u>						
Daycare Credit Form 244	1							
Child's Name		Daycare Name	EIN#		Amount Paid		Employer Paid (Box 10 w2)	
Education Credits Form 8863	у	AOC only good for 4 ears. Lifetime Learning is good anytime.						
Type of Credit (American Opportunity/Lifetime Learning)	S	tudents Name	# of Years AOC Taken	10	orm Additiona 198T Items Y/N		Additional Addition Items Co	
Residential Energy Credit Form 5695 Total Combined Credits maximum is \$3200. All credits limited to 30% of item cost.	t	Following is \$600 credit max. Central Air, Boiler, Gas furnace and water heater, windows. Metal Roof credit \$1200 max.	Insulation \$1200 ma Ext Door n is \$250 p door 2 lin	ax. nax er nit.	Geothermal, Wind, Solar & Fuel Cells Unused credit carries fwd.		equ is \$	Heat Pump equipment, Biomass uipment max 52000. Home udit max is \$150.
Type of Equipment		Amount Paid	30% of Co	st Max Credit				

Name:	:	
	Credits Continued	

Qualified Plug In Energy Credit Form 8936	Max Credit new vehicle is \$7500. Credit does not carryforward.	Credit used vehicle is 30% of cost. Maximum is \$4000.	Used Vehicle credit does not carryforward.
Vehicle Make & Model	VIN	Date Bought	Max Credit

Electric Vehicle Charger Tax Credit Form 8911 Type of Equipment	Credit is 30% of cost max is \$1000 Amount Paid	30% of Cost	Max Credit	

Adoption Credit Form 8839	Adoption credit	Maximum per child	\$16,810	Credit will	Carry forward	
Child's Name	SSN	Date of Adoption	Special Needs Child Y/N	Foreign Child Y/N	Adoption Expenses Paid	Adoption Expenses Reimbursed

Retirement Savers Credit Form 8880	Max contribution amount is \$2000 or \$4000 MFJ (\$2000 each)	This credit is income based and phases out at \$79,000 MFJ, HOH \$57,375 all others \$38,250.
Taxpayer or Spouse Name	Amount Paid (IRA, 401k etc.)	

HOW ARE YOU PAYING

Client Name		Phone #	
Basic Tax Return Price		\$	
Additional Forms	# Schedul	es Schedule \$	
Schedule C		\$ \$	<u></u>
Schedule E		\$ \$	<u>—</u>
Schedule F		\$ \$	<u>—</u>
Additional Work		\$ \$	<u></u>
PA Schedule UE (full sheet)		\$	<u> </u>
Bank Draft Fee (\$40)		\$	<u></u>
Portal Fee (\$20)		\$	<u></u>
Discounts			<u>—</u>
Total Tax Preparation Price			\$
Paying for another client???			
Name			<u>—</u>
Name			
		Total Price	\$
	• —	ld Check until (Date) t Card Info) Santa Barbara Fu Guide	ınding
Base return			\$30
Dase return	\$100	Loyalty Discount 2 to 5 Years	φ30
Custom Discount(any amount)	\$??	Loyalty Discount 5 Plus Years	\$40
Dependent Discount	\$125	Schedule C (per business)	\$75 (???)
Federal Only Discount	\$85	Schedule E (per property)	\$40 (???)
Friends & Family Discount	\$85	Schedule F (per farm)	\$75 (???)
Loyalty Discount 1 Year	\$20	Property Tax Rebate Return	\$35