

2019 Questionnaire

All questions pertain to activity during the year ended 12/31/2019 unless otherwise noted

Taxpayer Name _____ **Spouse Name** _____
Taxpayer Occupation _____ **Spouse Occupation** _____
Taxpayer Email _____ **Spouse Email** _____
Taxpayer Cell _____ **Spouse Cell** _____
Home Phone _____ **Primary Contact** _____
Bank Name _____ **Routing #** _____ **Account #** _____

What format do you prefer for your copy of the 2019 tax return? (check all that apply)

- | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> PDF by E-mail
<input type="checkbox"/> PDF via Portal
<input type="checkbox"/> Paper Copy I will pick up
<input type="checkbox"/> Paper Copy by mail (\$10 fee) | If not receiving paper copy of return:
<input type="checkbox"/> Will pick up original docs provided
<input type="checkbox"/> Mail original docs provided (\$10 fee) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Personal Information

- | | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| Would you like any tax refund to be directly deposited into a bank account? | <input type="checkbox"/> | <input type="checkbox"/> |
| Would you like any taxes owed to be directly withdrawn from your bank account? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you make any estimated tax payments towards your 2019 tax liability (outside of payroll or retirement withholding)? If yes, provide detail | <input type="checkbox"/> | <input type="checkbox"/> |
| Did your marital status change during the year?
If yes, explain: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| Did your address change from last year?
If yes, new address: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you or your dependents receive an Identity Protection PIN (IP PIN) from the IRS or have you been a victim of identity theft? If yes, provide the IRS letter. | <input type="checkbox"/> | <input type="checkbox"/> |

Dependent Information

- | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| Were there any changes in dependents from the prior year?
If yes, explain: _____ | Yes | No |
| Is there anyone else who might claim any of your dependents or has a dependent claimed themselves on a personal return? | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you have any children under age 19 or a full-time student under age 24 with unearned income in excess of \$2,100?
(Unearned income includes: Interest, Dividends, and Stock Transactions) | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you provide over half the support for any other person(s) other than your dependent children during the year?
If so, who? _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you pay for child care while you worked, looked for work, or while a full-time student? | <input type="checkbox"/> | <input type="checkbox"/> |

Self-Employed Information (Self-Employed Individuals Only)

- | | | |
|------------------------------------------------------------------------|--------------------------|--------------------------|
| Do you have a home office used regularly and exclusively for business? | Yes | No |
| Have you provided total business mileage for 2019? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you have for health insurance premiums while self-employed? | <input type="checkbox"/> | <input type="checkbox"/> |

Purchases, Sales and Debt Information (please provide detail for all "yes" answers)

- | | | |
|---------------------------------------------------------------------------------|--------------------------|--------------------------|
| Did you start a new business or purchase rental property? | Yes | No |
| Did you sell, exchange, or purchase any assets used in your trade or business? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you acquire a new or additional interest in a partnership or S corporation? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you purchase or sell a principal residence? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you sell, exchange, or purchase any other real estate? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you foreclose or abandon a principal residence or real property? | <input type="checkbox"/> | <input type="checkbox"/> |

	Yes	No
Did you acquire or dispose of any stock?	<input type="checkbox"/>	<input type="checkbox"/>
Did you refinance a principal residence or second home?	<input type="checkbox"/>	<input type="checkbox"/>
Did you sell an existing business, rental, or other property?	<input type="checkbox"/>	<input type="checkbox"/>
Did you lend money with the understanding of repayment and this year it became totally uncollectable?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please provide loan documentation and evidence of efforts to collect.		
Did you have any debts canceled or forgiven this year, such as a home mortgage, credit cards, or student loan(s)?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please explain: _____		
Did you purchase a qualified plug-in electric drive vehicle or qualified fuel cell vehicle ?	<input type="checkbox"/>	<input type="checkbox"/>

Income Information

At any time during 2019, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any loan payment or installment income from property sold prior to this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any unemployment benefits?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay or receive alimony payments, if the agreement was effective prior to 12/31/2017? If yes, date of divorce: _____	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any disability income?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive tip income not reported to your employer?	<input type="checkbox"/>	<input type="checkbox"/>
Did any of your life insurance policies mature, or did you surrender any policies?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any awards, prizes, hobby income, gambling or lottery winnings?	<input type="checkbox"/>	<input type="checkbox"/>
Do you expect a large fluctuation in income, deductions, or withholding next year?	<input type="checkbox"/>	<input type="checkbox"/>

Retirement Information

Are you currently working and an active participant in a pension or retirement plan at work?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any Social Security benefits?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any withdrawals from an IRA, Roth, 401(k) SIMPLE, SEP, etc.? If you are under age 59 1/2, what was the reason? _____	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any contributions to an IRA, Roth, 401(k), SIMPLE, SEP, etc.? (Circle all that apply)	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any lump-sum payments from a pension, profit sharing or 401(k) plan?	<input type="checkbox"/>	<input type="checkbox"/>
Would you like to put money into a retirement plan (IRA) to save on taxes?	<input type="checkbox"/>	<input type="checkbox"/>

Education Information

Did you, your spouse, or your dependents attend a post-secondary school? If yes, provide Form(s) 1098-T and qualified expense receipts.	<input type="checkbox"/>	<input type="checkbox"/>
Did anyone in your family receive a scholarship of any kind? If yes, were any of the scholarship funds used for expenses other than tuition, such as room and board?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any withdrawals from an education savings or 529 Plan account?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any contributions to an education savings or 529 Plan account?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay any student loan interest? If yes, please provide any Form(s) 1098-E	<input type="checkbox"/>	<input type="checkbox"/>
Did you cash any special education savings bonds?	<input type="checkbox"/>	<input type="checkbox"/>
Would you like a worksheet to aid in the completion of a Free Application for Federal Student Aid (FAFSA) with the U.S. Department of Education?	<input type="checkbox"/>	<input type="checkbox"/>

Health Care Information

	Yes	No
Did you enroll for Marketplace Coverage through healthcare.gov under the Affordable Care Act? If yes, provide any Form(s) 1095-A you received	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any contributions to a Health savings account (HSA) or Archer MSA?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay long-term care premiums for yourself or your family?	<input type="checkbox"/>	<input type="checkbox"/>

Itemized Deduction Information

Did you pay substantial out-of-pocket medical expenses (i.e., \$5,000+)?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any charitable cash contributions? If yes, please provide evidence such as a receipt from the donee organization, a canceled check, or record of payment, to substantiate all contributions made.	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any charitable noncash contributions (i.e., clothing, furniture, etc.)? If yes, please provide evidence such as a receipt from the donee organization to substantiate all contributions made.	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay real estate taxes for your primary home and/or second home?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay any mortgage interest on a home loan? If yes, provide any Form(s) 1098 you received.	<input type="checkbox"/>	<input type="checkbox"/>
Did you incur interest expenses associated with any investment accounts you held?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any major purchases (car, boat, RV, home improvements)? If yes, please provide purchase document(s).	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any alternative energy efficient improvements to your main home (i.e. wind, solar, energy efficient)? If yes, please provide receipts and/or invoices	<input type="checkbox"/>	<input type="checkbox"/>

Foreign Information

Did you have any foreign income or pay any foreign taxes, directly or indirectly, such as from investment accounts, partnerships or a foreign employer?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive a distribution from, or were you a grantor or transferor for a foreign trust?	<input type="checkbox"/>	<input type="checkbox"/>
Did you have a financial interest in or signature authority over a financial account such as a bank account, securities account, or brokerage account, located in a foreign country?	<input type="checkbox"/>	<input type="checkbox"/>

Miscellaneous Information

Did you make gifts of more than \$15,000 to any individual?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay any individual as a household employee during the year? If yes, did you issue any required Form(s) W-2?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive correspondence from the State or the IRS? If yes, explain: _____	<input type="checkbox"/>	<input type="checkbox"/>
Do you have previous years of tax returns that are either unfiled or filed with unpaid balances due?	<input type="checkbox"/>	<input type="checkbox"/>

2018 Tax Year - Miscellaneous Information

Did you pay PMI (mortgage insurance premiums) during 2018?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any alternative energy efficient improvements to your main home (i.e. wind, solar, energy efficient) during 2018? Please provide invoices/receipts	<input type="checkbox"/>	<input type="checkbox"/>



Palm Harbor: 727-785-2773 Trinity: 727-569-2244
www.pjkcpa.com