**2022** Page 2

		Questionnaire
Name:		SSN:
Question	naire	
Personal I	nform	ation
	No No	
[]	[]	Did your marital status change during the year?  If "Yes," explain
[]	[]	If your filing status is married, but you are filing separately from your spouse, did you and your spouse live apart for the last six months of 2022?
[]	[]	Can you or your spouse be claimed as a dependent by someone else?
[]	[]	Did your address change during the year?
[]	[]	Were you, your spouse, or any dependents a victim of identity theft?  If "Yes," explain
[]	[]	Were you, your spouse, or any dependents issued an Identity Protection PIN (IP PIN)?  If "Yes," provide Notice CP01A from the IRS.
Pro	vide p	proof of identity to be eligible to e-file your tax return (driver's license or state-issued photo ID)
Dependen	t Infor	mation
-	No	maton
[]	[]	Did you have any changes in dependents during the year?
r 1	[]	If "Yes," explain Can another person qualify to claim any of your dependents?
[]		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 \$2,300 of
Duo	vida d	unearned income?  locumentation for proof of dependent credits (school records, medical records, daycare records, etc.)
Più	viue u	ocumentation for proof of dependent credits (school records, medical records, daycare records, etc.)
		old (HOH) Questions (filing status used by unmarried taxpayers who support and house a qualifying person)
res	No [ ]	Are you unmarried and support/house a dependent(s)?
[ ]	[]	Do you pay for half the cost of the home? (bill, groceries, repairs, taxes ect.)
[]	[]	Are you divorced?
		If "Yes" do you have a divorce decree or separate maintenance agreement? (circle one)
	[]	Do you have custody of your dependents?
		y nights did each dependent sleep in your house? If less then 183 explain Do your receive any nontaxable support income? (family, food stamps, housing assistance, child support,
LJ	[]	ect)
[]	[]	Does anyone else live in your home?
		Name: Relationship [ ] [ ] Do they provide financial support?
		[ ] [ ] Do they provide infancial support?
Health Ca		rmation
	No	D'd annual to a format have been been been been been been been be
	[]	Did any member of your household have healthcare coverage through the Marketplace (Obamacare)? If "Yes," provide copies of Form 1095-A.
[]	[]	Did you receive any distributions from a Health Savings Account (HSA), Archer MSA, or Medicare Advantage MSA during the year?
		If "Yes," provide copies of Form 1099-SA and Form 5498-SA
		[ ] Individual Health Savings Plan
		[ ] Family Health Savings Plan
		[ ] [ ] Were all your HSA distributions used for medical expenses?

022	Overtionneine
	Questionnaire
Name:	SSN:
Questionna	ire
Purchase Inf	formation
Yes N	lo
[][	
[][	
	If "Yes," provide the cost of the asset, the date it was placed in service, and business use
	percentage.
] [ ] ] [ ]	
111	year?
	If "Yes," provide the year, make, model, VIN, and date the vehicle was placed in service.
l	
Income Infor	
[][	
[]	
j i j	
[][	] Did you buy or sell any stocks, bonds, or other investments during the year?
[][	• • •
[ ]	
[][	If "Yes," provide documentation.
[][	If "Yes," attach Form 1099-MISC, Form 1099-NEC, or Form 1099-K.
[][	If "Yes," attach Form 1099-K or Form W-2.
[][	If "Yes," provide documentation.
[][	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 income or incur expenses as an independent contractor (e.g., Shipt, Instacart, DoorDash)? If "Yes," provide documentation.
[][	] Did you receive any other income you have not provided information for with this organizer?  If "Yes," explain
Sales Inform	ation
Yes N	
[][	] Did you sell an existing business, rental property, or other property 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.
[][	
[][	
	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?
Debt Informa	
[][	
[]	

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	Questionnaire
e:	SSN:
estionnair	e
ızea Deal Yes No	ection Information
[][]	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 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?  If "Yes," attach Form 1098-C.
[][]	Did you have gambling winnings or losses during the year?
rement In	
Yes No	
[][]	
	plan during the year?
[][]	
	Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan during the year?
[][]	
	retirement plan during the year?
[][]	Did you receive any Social Security benefits during the year?
cation Inf	
Yes No	
[][]	Did you pay tuition expenses that were required for attending college, university, or vocational school for yourself, your spouse, or a dependent during the year (even if classes were attended in another year)?
[][]	
[][]	Did you make a contribution to or receive a distribution from an Education Savings Account or Qualified
r 1 r 1	Tuition Program during the year?
[][]	
	If "Yes," provide the amount of interest that was refunded.
[][]	Did you receive forgiveness on a qualifying federal student loan?
[][]	MN- Did you purchase school supplies for K-12 education and keep the receipts?
	Student - Grade - Amount
_	formation
Yes No	
[][]	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?
[][]	

2022		Page 5
	Questionnaire	
Name:	SSN:	
Questionnaire		
Refund, Withho	olding, and Estimated Tax Information	
Yes No		
[][]	Did you make any estimated payments toward your 2022 taxes?	
[][]	Did you apply an overpayment of your 2021 taxes to your 2022 estimated taxes?  If you have an overpayment of 2022 taxes, do you want the refund applied to your 2023 estimated taxes?	
[][]	Do you want to have any refund directly deposited?	
[][]	Do you want to have any balance due directly withdrawn?	
	If "Yes," provide a canceled checking or savings slip.	
[][]	Do you anticipate your income or withholdings to be different for 2023?	
Miscellaneous	Information	
Yes No		
[][]	Do you want to donate to the MN non-game wildlife fund? Amount \$  Did you pay wages to any household employees (babysitter, nanny, housekeeper, etc.)?	
[][]	Did you make gifts to any one person in excess of \$16,000 during the year?	
	Yes No	
	[ ] [ ] If "Yes," are you splitting the gift with your spouse?	
[][]	Did you incur moving expenses with the military during the year?  Did you make any energy-efficient improvements to your main home during the year? (solar, wind,	
[][]	geothermal or fuel-cell technology)	
[][]	Are you a business owner who paid health insurance premiums for your employees during the year?	
[][]	Do you own interest or shares in or did you dispose of a Qualified Opportunity Fund during the year?	
[][]	Did you make any purchases subject to Use Tax during the year?  If "Yes," provide details.	
[][]	Did you receive any notices from the IRS or state taxing authority?	
	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?  If you drop-off do you want a review Appointment?	
[][]	[ ] Zoom	
	[ ] Phone Call	
	[ ] In-Person	
[][]	Do you have any questions? Please list below.	
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