

Questionnaire

Name: _____

SSN: _____

Questionnaire

Personal Information

Yes No

If "Yes," provide details.

- 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 2024?
- Did your name change during the tax year?
- 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.

Dependent Information

If you are claiming dependents please provide documentation for proof of dependent credits (school records, medical records, daycare records, etc.)

Yes No

If "Yes," provide details.

- Did you have any changes in dependents during the year?
If "Yes," explain. _____
- Can another person qualify to claim any of your dependents?
- Did you have any child or dependent care expenses during the year?
- Did you have any adoption expenses during the year?
- Did you have any children under age 18 or a full-time student under age 24 with more than \$2,600 of unearned income?
- Are you unmarried and support a household for minor child or qualifying person?
- Did you pay for K-12 school supplies? (Minnesota only)

Child Name _____	Grade _____	Amount _____
Child Name _____	Grade _____	Amount _____
Child Name _____	Grade _____	Amount _____
Child Name _____	Grade _____	Amount _____

Health Care Information

Yes No

If "Yes," provide details.

- Did any member of your household have healthcare coverage through the Marketplace (Obamacare, MNSURE)?
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. (For HSA distributions.)

Income

Yes No

If "Yes," provide details.

- Did you receive any tips not reported to your employer?
- Did you receive any disability income during the year?
- Did you cash in any U.S. savings bonds during the year?
- Did you buy or sell any stocks, bonds, or other investments during the year?
- Did you receive any principal or interest during this year from property sold in prior years?
- Did you receive any other income you have not provided information for with this organizer?
If "Yes," explain. _____
- Does anyone owe you money that has become uncollectible?

Questionnaire

Name:

SSN:

Questionnaire

Purchases, Sales, and Debt Information

- | Yes | No | If "Yes," provide details. |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Did you sell a principal residence during the year?
If "Yes," provide closing documentation for the purchase and sale of the home. |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have a principal residence or a piece of real property foreclosed on during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you abandon a principal residence or a piece of real property during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | 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. |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you sell, exchange, or purchase any real estate during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have any debts canceled or forgiven this year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you purchase a new or previously owned clean vehicle (electric vehicle, plug-in hybrid, fuel-cell vehicle, qualified commercial clean vehicle) during the year?
If "Yes," provide the report the dealer or seller is required to provide to you and the vehicle identification number (VIN). |

Business Income

- | Yes | No | If "Yes," provide details. |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Did you rent out your home or use it for 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 start a new business or purchase any rental property during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you sell an existing business, rental property, or other property during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | 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 the business use percentage. |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you purchase any gasoline, diesel, or special fuels for off-road business use? |

Did you receive income or incur expenses associated with:

- | Yes | No | If "Yes," provide documentation. |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Fantasy sports league? |
| <input type="checkbox"/> | <input type="checkbox"/> | Fashion sharing (e.g., Poshmark or thredUP)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Car sharing (e.g., Lyft or Uber)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Crowdfunding (e.g., Kickstarter or Indiegogo)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Short-term rental (e.g., Airbnb, VRBO or HomeAway)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Independent contractor (e.g., Shipt, Instacart, DoorDash)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Freelancing (e.g., Upwork or TaskRabbit)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are you a business owner who paid health insurance premiums for your employees during the year? |

Retirement Information

- | Yes | No | If "Yes," provide details. |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Did you make any contributions (NOT THROUGH AN EMPLOYER) to an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you make any withdrawals or receive distributions from a pension or profit-sharing plan, IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you execute any rollovers from an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive any Social Security benefits during the year? |

Questionnaire

Name:

SSN:

Questionnaire

Education Information

- | Yes | No | If "Yes," provide details. |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 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)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did anyone in your household attend a post-secondary school during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you make a contribution to or receive a distribution from an Education Savings Account or Qualified Tuition Program during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you pay student loan interest during the year?
If "Yes," provide the amount of interest that was refunded. |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive forgiveness on a qualifying federal student loan? |

Foreign Tax Information

- | Yes | No | If "Yes," provide details. |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have a financial interest in or signature authority over a financial account or asset located in a foreign country? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive a distribution from, or were you a grantor of, or transferor to, a foreign trust? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did the aggregate value of your foreign accounts exceed \$10,000 at any time during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have any income from, or pay taxes to, a foreign country? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive a Schedule K-3 from a partnership or S corporation? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you have ownership in a foreign corporation at any time during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you own property in a foreign country? |

Refund, Withholding, and Estimated Tax Information

- | Yes | No | If "Yes," provide details. |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | If you have an overpayment of 2024 taxes, do you want the refund applied to your 2025 estimated taxes? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you make any estimated payments toward your 2023 taxes? (not withheld from your paycheck)
<input type="checkbox"/> <input type="checkbox"/> Did you apply an overpayment of your 2023 taxes to your 2024 estimated taxes? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you want any balance due directly withdrawn on April 15th 2025? (Review banking info on Personal Information page.) |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you want to have any refunds directly deposited? (Review banking info on Personal Information page.) |

Miscellaneous Information

- | Yes | No | If "Yes," provide details. |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive, sell, exchange, gift, or otherwise dispose of any digital asset or financial interest in any digital asset? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you incur a gain or loss due to damaged or stolen property, while living in a federally declared disaster area?
If "Yes," provide the incident date, value of the property, amount of insurance reimbursements, and the declaration number assigned by FEMA. |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you pay wages to any household employees (babysitter, nanny, housekeeper, etc.)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you make gifts to any one person in excess of \$18,000 during the year?
Yes No
<input type="checkbox"/> <input type="checkbox"/> If "Yes," are you splitting the gift with your spouse? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you incur moving expenses with the military during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you make any energy-efficient improvements to your main home during the year? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive a cash payment or digital asset of more than \$10,000 in one transaction or two or more related transactions during the year?
Yes No
<input type="checkbox"/> <input type="checkbox"/> If "Yes," was Form 8300, Report of Cash Payment over \$10,000 Received in Trade or Business, filed? |
| <input type="checkbox"/> | <input type="checkbox"/> | Did you receive any notices from the IRS or state taxing authority?
If "Yes," explain. _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | May the IRS discuss your tax return with your preparer? (this answer is yes) |

