



Taxpayer & Spouse: \_\_\_\_\_

**2021 CUSTOMER QUESTIONNAIRE**

Please provide the information requested below. Please circle the applicable response where available in this document. If the question does not pertain to you, please mark N/A. Unless indicated, all questions pertain to the 2021 tax year. **PLEASE PROVIDE DOCUMENTS TO SUPPORT THE ANSWERS TO ALL THE QUESTIONS IN THIS QUESTIONNAIRE.**

For purposes of this 2021 Tax Questionnaire, the U.S. is the 50 states and Washington, D.C.

If this is the first time that we are preparing your tax return, please provide us with copies of your federal and state (if you do not live in Florida) tax returns for the two previous years.

Please provide a copy of each of the tax forms or the other information listed below. If you do not have a form because it was not issued to you (or the information requested is not applicable to you), please mark N/A in the “Provided” column. If you cannot provide the information because of another reason, please explain why.

***Personal Information***

<b>Taxpayer</b>	<b>Taxpayer</b>	<b>Spouse</b>	<b>Spouse</b>
<b>First Name</b>		<b>First Name</b>	
<b>Last Name</b>		<b>Last Name</b>	
<b>SS# or ITIN</b>		<b>SS# or ITIN</b>	
<b>Occupation</b>		<b>Occupation</b>	
<b>Birthday</b>		<b>Birthday</b>	
<b>DL # or state issued ID state number</b>		<b>DL # or state issued ID state number</b>	
<b>State</b>		<b>State</b>	
<b>Issued</b>		<b>Issued</b>	
<b>Expired</b>		<b>Expired</b>	
<b>Address</b>		<b>Address</b>	
<b>Telephone Day</b>		<b>Telephone Day</b>	
<b>Telephone Work</b>		<b>Telephone Work</b>	
<b>Telephone Evening</b>		<b>Telephone Evening</b>	
<b>Cell Phone</b>		<b>Cell Phone</b>	
<b>Email</b>		<b>Email</b>	
<b>Preferred method of contact</b>		<b>Preferred method of contact</b>	

<b>Income/Deduction</b>	<b>Tax Form or Supporting Documentation</b>	<b>Provided? Answer Yes, N/A, or No. Please answer “Yes” if you are giving us a copy of the document. Please answer “N/A” if you did not receive one or it does not apply. If you have this information but are not providing it, answer “No” and explain why.</b>
Wages	Form W-2	
Interest and Dividends	Form 1099-INT and 1099-DIV	
Sale of Stocks, Securities, Capital Assets	Form 1099-B	
Miscellaneous Income	Form 1099-MISC and 1099-NEC	
Retirement/Pension Distributions	Form 1099-R	
Pass-thru Income (LLC’s, S Corp, Partnership, Trust, Estate)	Schedule K-1	
Unemployment compensation	Form 1099-G	
Social Security Income	Form SSA-1099	

Mortgage Interest	Form 1098	
Health Savings Account (HAS or MSA)	Forms 1099-SA and 5498-SA	
Healthcare Coverage or Insurance	Forms 1095-A	
Student Loan Interest	Form 1098-E	
Tuition	Form 1098-T	
Education credit	All documents supporting education expenses	
Medical and dental expenses	Receipts showing services rendered and payments made by you	
General sales tax deductions	Sales receipts for qualifying items purchased, or a retained printout of the results of the online Sales Tax Deduction Calculator	
Gifts to charity	Verifiable (i.e. third party) receipt from a qualifying charity for each donation	
Non-cash charitable donations that exceed \$500	Detailed listing of each and every item donated, the date of such donation, and that item's value as estimated by the taxpayer or the charity	

Non-cash charitable contributions exceeding \$2,500 for one item or a group of similar items grouped together, e.g., “household goods,” “clothes,” “furniture,” “books,” and “miscellaneous”	Detailed listing of each and every item donated, the date of such donation, that item’s value as estimated by the taxpayer or the charity, and a signed and dated appraisal	
Schedule C deductions	All documents that support your income or expense items, documents relating to any business owned or operated by you, and documents supporting gross receipts of the business	

1. Do you or your spouse have a personal identification number (due to identity theft)? If yes, please indicate the number below. yes/no/na

Taxpayer/Spouse	State	City	Code*	Pin

\*If the pin was issued by the IRS use “1” for the Code at the Code column. If the pin was issued by a State or city, use “2” for the Code at the Code column.

2. May the IRS or other taxing authority discuss the return with the preparer? yes/no/na
3. Are you aware of any changes to your income, deduction, etc. during the year, as compared to the previous tax year? yes/no/na
4. Did your marital status change during the year? yes/no/na
5. Did your address change during the year? yes/no/na
6. Has the IRS or any state local taxing agency, notified you of changes to a prior year’s tax return (or a partnership or LLC in which you have an investment)? If yes, please provide copies of notice or correspondence received. yes/no/na

### ***Dependents***

1. Can you or your spouse be claimed as a dependent on someone else's tax return? yes/no/na
2. Did you have any dependents this tax year? yes/no/na
  - i. If yes, since when have they been living with you?
  - ii. Do you pay half the cost of maintaining the home for yourself and the dependent?
  - iii. Are you unmarried?
3. Were there any changes in dependents? yes/no/na
4. Did any of your dependents have unearned income over \$1,100 or earned income over \$12,400? If yes, the dependent is required to file a return. yes/no/na
5. Do you want us to prepare a tax return for your dependent if required yes/no/na
6. Did you or your spouse pay for childcare while you or your spouse worked or looked for work yes/no/na

### ***CARES Act***

1. Did you or your spouse receive an economic impact payment? If so, please enter amount received. yes/no/na
2. Did you receive funds from the Paycheck Protection Program (PPP)? If so, please enter amount received. yes/no/na
3. Did you receive an Economic Injury Disaster Loan (EIDL)? If so, please enter amount received. yes/no/na
4. If you use the standard deduction, did you make at least \$300 in cash donations in 2021 to qualified charities? yes/no/na
5. Did you receive a coronavirus-related distribution from a retirement plan? If so, include all Forms 1099-R. yes/no/na

### ***Healthcare***

1. Did you obtain healthcare coverage through the Marketplace? If yes, include all Form 1095-A. yes/no/na

2. Did you have any transactions pertaining to a health savings account (HAS) or medical savings account (MSA)? If so, include all Forms 1099-SA and/or 5498-SA. yes/no/na

***Retirement***

1. Did you receive a distribution from or contribute to a retirement plan (401(k), IRA, Etc.)? If so, include all Forms 5498 and/or 1099-R. yes/no/na
2. Did you transfer or rollover any amount from one retirement plan to another? yes/no/na
3. Did you convert part or all your traditional/SEP/Simple IRA to a Roth IRA? yes/no/na
4. Did you withdraw any amounts from your IRA to pay for higher education expenses or acquire a principal residence? If so, please provide us details. yes/no/na

***Education***

1. Did you, your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or vocational school? yes/no/na  
a. If so, include Form 1098-T.
2. Did you or your spouse pay any interest associated with a student loan (loan used exclusively to pay for tuition, fees, and other expenses required for enrollment or attendance at a post-secondary school (college, university, or vocational school) advanced to you that you were/are obligated to repay? yes/no/na  
a. If yes, please provide Form 1098-E received.
3. Did you withdraw funds from an education savings account or qualified tuition program and use the funds for anything other than qualified education expenses? Please include Form 1099-Q. yes/no/na  
a. If yes, explain and provide amounts.
4. Did you withdraw funds from an education savings account or qualified tuition program to pay for higher education expenses incurred by you, your spouse, or your grandchildren? yes/no/na  
a. If yes, explain and provide amounts.
5. Did you or your spouse make a contribution to an education savings account yes/no/na

or a qualified tuition program?

a. If yes, explain and provide amounts.

6. **If you answered yes to any of these questions, please fill out Module 5 below.**

***Investments***

1. Did you or your spouse sell any securities or investment property not reported on Form 1099-B? yes/no/na
2. Did you purchase, sell, or refinance your principal home or second home, or did you take a home equity loan? yes/no/na
  - a. If so, please include settlement statement you received at closing.
3. Did you or your spouse start, purchase, or sell a business, rental property, or farm, or acquire/sell any interest in any partnership or S corporation? yes/no/na
4. Did you or your spouse receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? yes/no/na

***Deductions and Credits***

1. Did you purchase any motor vehicles or boats in 2021? yes/no/na
  - a. If so, provide sales tax paid.
2. Did you make a qualified residential energy-efficient improvements or purchases involving solar, wind, geothermal, or fuel cell energy resources? yes/no/na
  - a. If so, please provide us with invoices you paid in 2021 along with the tax credit certificate received.
3. Did you or your spouse contribute property (other than cash) with a fair market value or more than \$5,000 to a charitable organization? yes/no/na
  - a. If yes, provide the appraisal of property contributed. An appraisal is not required for contributions of publicly traded securities or contributions of non-publicly traded stock of \$10,000 or less.
4. **If you answered yes to any of these questions, please complete Module 11.**

***Miscellaneous***

1. Did you receive any disability income? yes/no/na
  - a. If so, provide us with any forms you received, 1099's, etc.

2. Did you pay an excess of \$1,000 in any quarter or \$2,200 during the year for domestic services performed in or around your home to individuals who could be considered household employees? yes/no/na
3. Did you have any interest in or a signature authority over a bank account, securities account, or other financial account in a foreign country? yes/no/na
4. Was your home rented out for more than 14 days or used as a home office? yes/no/na
5. Did you have total mortgages incurred on or before December 15, 2017, on your first and/or second residence greater than \$1,000,000? yes/no/na
6. Do you have total mortgages incurred after December 15, 2017, on your first and/or second residence greater than \$750,000? yes/no/na
7. Did you use funds from a Home Equity Line of Credit (HELOC) for anything other than to purchase, build, or substantially improve your residence? yes/no/na
8. Did you make any gifts, including birthday, holiday, anniversary, graduation, education savings, etc., with a total (aggregate) value more than \$15,000 to any individual? yes/no/na
9. Do you expect any changes (income, deductions, dependents, etc.) to occur in 2021? yes/no/na
  - a. If so, please provide details.
10. Were you notified or audited by either the IRS or a State taxing agency? yes/no/na  
Yes/no/n/a.
  - a. Please provide us details.
11. May the IRS discuss your tax return with your preparer? yes/no/na
12. A PDF Client Copy of your return and e-file release form (or Filing Copy) will be placed in your Client Access Portal for your retrieval. Would you like a paper copy of your completed tax return? yes/no/na
13. Did you or your spouse receive any damages or injury awards during the tax year? yes/no/na
  - a. If yes, provide details and amounts.
  - b. Was any of the damages award paid in respect of previously deducted medical expenses?



i. If yes, provide details and amounts.

14. Did you or your spouse engage in any gambling activity during the tax year? yes/no/na  
a. If yes, provide information regarding gambling winnings, if any.  
b. If yes, provide information regarding gambling losses, if any, in Module 11.
15. Did you or your spouse have any debts refinanced? yes/no/na  
a. If yes, provide details.
16. Were any debts owed by you or your spouse cancelled or forgiven? yes/no/na  
a. If yes, provide details and Forms 1099 received.
17. Are you or your spouse teachers or other educators? yes/no/na  
a. If yes, complete Module 11.
18. Did you or your spouse receive any annuity payments during the year? yes/no/na  
a. If yes, provide amounts and details.
19. Did you or your spouse incur a loss as a result of a federally-declared disaster? yes/no/na  
a. If yes, complete Module 11.
20. Did you or your spouse incur and pay any medical or dental expenses during the year? yes/no/na  
a. If yes, complete Module 11.
21. Did you or your spouse make contributions to charity during the year? yes/no/na  
If yes, complete Module 11.
22. Did you or your spouse pay sales tax or use tax to a state, municipality, county, or city during the year? yes/no/na  
a. If yes, complete Module 11.  
Did you or your spouse pay any interest during the course of your investment activities? yes/no/na  
b. If yes, complete Module 11.
23. Did you purchase any of the following asset for personal use? If yes, yes/no/na  
complete Module 11.

- a. Motor vehicle?
- b. Aircraft?
- c. Boat?
- d. Home (including a mobile home or prefabricated home)?
- e. Had a substantial addition to or major renovation to your home?

### CERTIFICATION

The undersigned certifies, under the penalties of perjury, that the information provided in response to the foregoing questions is complete and accurate to the best of his or her knowledge. The undersigned further certifies that he or she has provided the information requested herein. The undersigned also certifies that he or she has verified the information provided in this document and states that it comports with the supporting documentation provided, if any.

\_\_\_\_\_  
Taxpayer's Signature

\_\_\_\_\_  
Spouse's Signature

\_\_\_\_\_  
Taxpayer's Printed Name

\_\_\_\_\_  
Spouse's Printed Name

Dated:

Dated:

## Consent to Use of Tax Return Information

\_\_\_\_\_ (“we”, “us” and “our”)  
Printed name of tax preparer

Federal law requires this consent form be provided to you (“you” refers to each taxpayer, if more than one). Unless authorized by law, we cannot use your tax return information for purposes other than the preparation and filing of your tax return without your consent.

You are not required to complete this form to engage our tax return preparation services. If we obtain your signature on this form by conditioning our tax return preparation services on your consent, your consent will not be valid. Your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of signature.

For your convenience, we have entered into an arrangement with Santa Barbara Tax Products Group, LLC, a division of Green Dot Corporation, a Delaware corporation (“Processor”), using banking services of Civista Bank, to provide qualifying taxpayers with the opportunity to apply for refund processing services offered by and through Processor. To determine whether these services may be available to you, we will need to use your tax return information by analyzing it and calculating the amount of your anticipated refund.

If you would like us to use your tax return information to determine whether these services may be available to you while we are preparing your return, please sign and date this consent to the use of your tax return information.

By signing below, you (including each of you if there is more than one taxpayer) authorize us to use the information you provide to us during the preparation of your 2021 tax return to determine whether to present you with the opportunity to apply for refund processing services through Processor.

**Printed Name of Taxpayer:** \_\_\_\_\_

**Taxpayer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name of Joint Taxpayer:** \_\_\_\_\_

**Joint Taxpayer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email at [complaints@tigta.treas.gov](mailto:complaints@tigta.treas.gov).