

Client No:

# TAX QUESTIONNAIRE

If any of the following items pertain to you or your spouse please check the appropriate box and include all pertinent details.

YES	NO	GENERAL QUESTIONS
<input type="checkbox"/>	<input type="checkbox"/>	Did your marital status change during the year?
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any Covid-19 relief payments? <i>(unemployment, business relief, etc.)</i>
<input type="checkbox"/>	<input type="checkbox"/>	Did your address change during the year? Date of change (JJJJ/MM/DD): <input type="text"/> New address: <input type="text"/> New: <input type="checkbox"/> County <input type="text"/> <input type="checkbox"/> Municipality <input type="text"/> <input type="checkbox"/> School District <input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	Would you like me to prepare your local return? Please list your local taxing authorities: County <input type="text"/> Municipality <input type="text"/> School District <input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	Did you pay occupational tax or EMST tax? Amount: \$ <input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/>	Could you be claimed as a dependent on another person's tax return for 2023?
<input type="checkbox"/>	<input type="checkbox"/>	Did you or any of your dependents receive an Identity Protection PIN from the IRS? <b>If yes, please attach the IRS letter.</b>

YES	NO	DEPENDENTS
<input type="checkbox"/>	<input type="checkbox"/>	Were there any changes in dependents? <b>If yes, please provide details.</b>
<input type="checkbox"/>	<input type="checkbox"/>	Were any of your unmarried children, who might be claimed as dependents, 19 years of age or full-time students under 24 years at the end of 2023?
<input type="checkbox"/>	<input type="checkbox"/>	Did you have any children under age 18 on January 1, 2023 with interest and/or other investment income in excess of \$2,100?
<input type="checkbox"/>	<input type="checkbox"/>	Do you have bank or investment accounts set-up for your children? <b>If yes, please provide all tax documents or statements.</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you incur any higher education/tuition expenses for yourself or any dependents in 2023? <b>If yes, please provide Form 1098-T and list of all other education-related expenses.</b>

<input type="checkbox"/>	<input type="checkbox"/>	Did you make any contributions to a 529 Plan or Education Savings Plan (ESA) in 2023? Amount: \$ <input type="text"/> /per child
<input type="checkbox"/>	<input type="checkbox"/>	Would you be interested in receiving information on 529 Plans? ( <i>college savings plan</i> )
<input type="checkbox"/>	<input type="checkbox"/>	Did you use any 529 Plan/ESA funds to pay for education expenses in 2023? <b>If yes, please provide form 1099-Q.</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you pay for child care while you worked, looked for work or while you were a full time student? <b>If yes, please provide name, address, phone number &amp; tax identification number of child care provider and total amount paid for each child.</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you pay student loan interest in 2023? <b>If yes, please provide form 1098-E.</b>

YES	NO	INCOME
<input type="checkbox"/>	<input type="checkbox"/>	Did you cash any Series EE U.S. savings bonds issued after 1989 and pay qualified higher education expenses for yourself, your spouse, or your dependents? <b>If yes, please provide details.</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any Social Security or disability income? <b>If yes, please provide form SSA - 1099.</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any interest income and/or dividend income? <b>If yes, please provide all 1099s.</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you have any foreign income or pay any foreign taxes?
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any income from rental properties? <b>If yes, please provide documentation showing receipts &amp; expenses for each rental property.</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any unemployment compensation? <b>If yes, please provide form 1099-G.</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any awards, prizes, hobby income or gambling/lottery winnings in 2023? <b>If yes, please provide details and form W-2G and form 5754.</b>

YES	NO	PURCHASES, SALES, AND DEBT
<input type="checkbox"/>	<input type="checkbox"/>	Did you start a business or farm, purchase rental or royalty property, or acquire an interest in a partnership, S corporation, trust, or REMIC? <b>If yes, please provide details.</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you purchase a car, truck, boat, etc? <b>If yes, please provide sales tax.</b>
<input type="checkbox"/>	<input type="checkbox"/>	Was it eligible for environmental tax credit ( <i>alternative fuel, electric, etc.</i> )?

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- Did you purchase or dispose of any business assets (*furniture, equipment, vehicles, real estate, etc.*), or convert any personal assets to business use?  
**If yes, please provide details.**
- Did you buy or sell any stocks, including cryptocurrency, or other investment property?  
**If yes, please provide details and form 1099-DIV.**
- Did you purchase, sell, or refinance your principal home or second home, or did you make a home equity loan? **If yes, please provide closing settlement papers from sale of home.**
- Did you have any debts cancelled or forgiven?  
**If yes, please provide the form 1099-C.**
- Did anyone owe you money which had become uncollectible?
- Did you add any energy efficient home improvements (*insulation systems, exterior windows and doors, solar panels*) to your home in 2023?  
**If yes, please provide an itemized list and amounts paid.**

YES	NO	<b>RETIREMENT PLANS</b>
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- Did you receive a distribution from a profit-sharing plan, retirement plan, or individual retirement arrangement? **If yes, please check the applicable plan and provide all 1099 forms.**  
 Traditional IRA     Roth IRA     Education IRA
- Did you convert from a Traditional IRA or SEP to a Roth IRA?
- Did you contribute to a Traditional IRA, Roth IRA or Education IRA?  
Amount and account statement: \$
- Did you transfer or rollover any amount from one retirement plan to another?  
**If yes, please provide details and account statements.**
- Would you like me to calculate whether you can make an IRA Contribution for the 2023 tax year?  
**If yes, please check:**  Traditional IRA     Roth IRA
- Do you have a 401-K or IRA that you would like to roll over?
- Did you take a Covid-19 related distribution from a retirement account?

YES	NO	<b>ITEMIZED DEDUCTIONS</b>
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- Did you incur any out of pocket medical expenses not reimbursed by your insurance carrier? (*prescriptions, co-pays, dental expenses, hospitalization, etc.*)  
**If yes, please provide total paid out of pocket.**
- Did you incur any mortgage interest or real estate taxes?  
**If yes, please provide form 1098.**

- Did you incur a non-reimbursed employee expense, union dues, or a qualified teacher’s expense? **If yes, please provide detailed list.**
- Did you work out of town for part of the year? **If yes, please provide details.**
- Did you use your car on the job? *(other than to and from work)* **If yes, please provide details.**
- Did you incur a loss because of damaged or stolen property? **If yes, please provide details.**

YES NO **HEALTH CARE**

- Did you or your spouse pay health care premiums **directly** to the insurance company during 2023?  
Paid premiums: **Monthly cost** \$  x **12 months** = \$  **annually**
- Did you convert from a Traditional IRA or SEP to a Roth IRA?
- Did you contribute to a Traditional IRA, Roth IRA or Education IRA?  
Amount and account statement: \$
- Did your employer deduct the cost of health care premiums from your paycheck?
- Did you purchase health care coverage on the Market Place/Exchange?  
**If coverage was obtained from the Exchange, please provide form 1095-A.**
- Did you use HSA or FSA *(flex spending)* funds to pay for medical expenses?  
**If yes, please provide form 1099-SA.**
- Did you pay long-term health care premiums for yourself or your family in 2023?

YES NO **MISCELLANEOUS**

- Was your home rented out or used for business  
**If yes, please provide details.**
- Did you have a medical savings account *(MSA)*, a Medicare + Choice MSA, or acquire an interest in an MSA or a Medicare + Choice MSA because of the death of the account holder? Or were you a policyholder who received payments under a long-term care *(LTC)* insurance contract or received any accelerated death benefits from a life insurance policy?  
**If yes, please provide details.**
- Did you incur any adoption expenses?  
**If yes, please provide details.**
- Did you engage the services of any household employees?  
**If yes, please provide details.**
- Were you notified or audited by either the Internal Revenue Service or the State taxing agency?  
**If yes, please provide details.**

- Did you or your spouse make any gifts to an individual that total more than \$15,000 or any gifts to a trust?  
**If yes, please provide detailed list.**
- Did you make any donations worth \$250 or more? **If yes, please provide details.**  
*(The IRS requires receipt or bank check/draft for allowable deductions)*

Please provide the details and copies of checks for all Estimated Tax Payments made in 2023:

	FEDERAL	STATE	LOCAL
1st Quarter	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
2nd Quarter	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
3rd Quarter	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
4th Quarter	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

Do you have specific questions you would like to ask?

How would you like to be contacted?

\*Required fields

First name\*:

Last name\*:

Cell phone:

Work phone:

Email:

Best day time:  :   AM  PM

*(Between 09:30 - 18:00)*