

Questionnaire for Individual Taxpayer: \_\_\_\_\_

Have you experienced any changes in:

**Lifestyle**

Marriage/Divorce	Yes	No
Dependents/Right to Claim	Yes	No
Purchase/Sale of Home	Yes	No
Retirement	Yes	No
Bankruptcy	Yes	No

**Income**

Wages	Yes	No
Self-Employment	Yes	No
Interest and/or Dividend Income	Yes	No
Capital Gains/Brokerage Investments	Yes	No
IRA and Retirement Distributions	Yes	No
Alimony Received	Yes	No

**Adjustments to Income**

Retirement Contribution Deduction	Yes	No
Student Loan Interest Deduction	Yes	No
Alimony Expense (pre-2019 divorces)	Yes	No

**Itemized Deductions and Tax Credits**

Medical Expenses	Yes	No
Taxes Paid	Yes	No
Mortgage Interest Expense	Yes	No
Charitable Contributions	Yes	No
Dependent Care Expense	Yes	No
Education/Tuition Credit	Yes	No

Total **charitable cash contributions** \_\_\_\_\_ non-cash \_\_\_\_\_ (if non cash is >than \$500 must have lists)

Did you get **health insurance through the Market Place**? Do you have a 1095-A? Yes No

Have you put money into a Traditional IRA? Yes No

Do you have **foreign** accounts, signature on foreign accounts, or foreign trusts or assets? Yes No

Do you have **cryptocurrency** transactions? Yes No

Do you have **other income**: gambling, cash income or illegal income? Yes No

Did you have \$20,000 in gross payments, and/or 200 transactions, from a **Third-Party Network** (i.e. PayPal, Venmo, Uber, etc.) Yes No

Did you perform any **residential energy efficiency** or **clean energy** improvements? Yes No

Did you purchase a **clean energy vehicle**? Yes No  
If yes, was the vehicle new or used: New Used

Do you want \$3 to go from the federal general fund to **presidential campaign fund**? Yes No

Do you want \$5 go from the MN general fund to the **MN election campaign fund**? Yes No  
You can designate the political party you wish it to go to. DFL, GOP ETC. \_\_\_\_\_

Do you want to **contribute your money to the Minnesota Nongame Wildlife Fund**? Yes No  
If so, what is the **amount** you wish to contribute? \_\_\_\_\_

Do you have **Long Term Care Insurance** (nursing home insurance)? Yes No  
Need insurers name, policy number and amount paid.

Did you contribute any money into a **529 college account**? Yes No  
We would need company, account # and amount.

Do you usually get a **property tax refund**? Yes No

Do you live in or work in Wisconsin? We need to know if you owe Wisconsin sales or use tax. \_\_\_\_\_  
WI offers credits for 529 plans, tuition paid, Long Term Care Ins. and military retirement.

Please inform us if there is an **address change, marital status change, an addition of a new dependent, if a previous dependent is no longer your dependent, new emails, new phone numbers, etc.**

Taxpayer (signature) \_\_\_\_\_

Spouse (signature) \_\_\_\_\_

Date: \_\_\_\_\_

Preparer (signature) \_\_\_\_\_

Elroy P. Johnson, AFSP  
Abraham T. Curran, Tax Preparer