

2018 Tax Questionnaire

| | |
|---|---------------|
| Last Name: | |
| Taxpayer _____ | Spouse: _____ |
| First Name & Middle Initial: | |
| Taxpayer _____ | Spouse: _____ |
| Social Security Number: | |
| Taxpayer _____ | Spouse: _____ |
| Address: _____ | |
| City, State, Zip: _____ | |
| Home Phone: _____ | |
| Work Phone: | |
| Taxpayer: _____ | Spouse: _____ |
| Cell Phone: | |
| Taxpayer: _____ | Spouse: _____ |
| Email: _____ | |
| Date of Birth: | |
| Taxpayer: _____ | Spouse: _____ |
| Date of Death: | |
| Taxpayer: _____ | Spouse: _____ |
| Occupation: | |
| Taxpayer: _____ | Spouse: _____ |

| ***ID Theft Prevention Questions*** (Must Answer to E-file) | |
|---|---------------|
| Driver's License/ID Issuing State: | |
| Taxpayer: _____ | Spouse: _____ |
| License ID Number: | |
| Taxpayer: _____ | Spouse: _____ |
| License/ID Issue Date: | |
| Taxpayer: _____ | Spouse: _____ |
| Letters and/or Numbers located on the lower right corner or back of license: | |
| Taxpayer: _____ | Spouse: _____ |
| License /ID Expiration Date: | |
| Taxpayer: _____ | Spouse: _____ |

2018 Tax Questionnaire

| General | | |
|--|-----|----|
| | Yes | No |
| Were you or your spouse permanently and totally disabled in 2018? | | |
| Were you or your spouse a member of the US Armed Forces in 2018? | | |
| Are you or your spouse blind? | | |
| Did your marital status change during 2018? If yes, please explain and attach copies of marriage certificate or divorce decree. | | |
| Did you live with your spouse for the last six months of 2018? | | |
| If you are filing Married Filing Separately, did you live with your spouse at any time during the year? | | |
| If you are filing Married Filing Separately, does your spouse itemize deductions? | | |
| Are you and your spouse (if applicable) both US citizens or residents? If not please provide details. | | |

| Dependents | | |
|--|-----|----|
| | Yes | No |
| Can you be claimed as a dependent by your parents or anyone else? | | |
| Did you have any new dependents in 2018? If yes , please provide copy of Social Security card and date of birth or adoption paperwork. _____ | | |
| Did your dependents live with you for 12 months in 2018? Please provide school or Drs. statement with home address. If not , how many months did they live with you? _____ | | |
| Are any of the dependents listed on last year's return no longer your dependent? | | |
| Did you provide more than half the support of any other person in 2018? If so, please provide details. | | |
| Do you have dependents who must file a tax return? If yes , do you want us to prepare the returns? | | |
| Do you have dependent children under the age of 19 or who are full time students under age 24 with investment income over \$2,100? If yes , do you want to include your child's income on your return? | | |
| Are any of your dependents not US citizens or residents? | | |
| Did you incur any adoption expenses in 2018? Please attach documentation. | | |

| Refunds & Balance Due – All returns will be electronically filed | | |
|---|-----|----|
| | Yes | No |
| Would you like some or all of your refund applied to your 2019 estimated tax payments? If yes , check all that apply: 1st __ 2nd __ 3rd __ All __ | | |
| Would you like any refunds directly deposited? If yes , please attach a voided check (no deposit slips please). | | |
| Would you like to pay via electronic funds withdrawal if there is a balance due? If yes , please attach a voided check (no deposit slips please). | | |

| Income | | |
|--|-----|----|
| | Yes | No |
| Did you have any wages or any other employer paid compensation? If so, please provide Form W-2. | | |
| Did you work in a foreign country? Please provide details. | | |
| Did you receive any interest income from checking or savings accounts? If yes, please provide Form 1099-INT | | |
| Did you surrender any US savings bonds during 2018? If yes, please provide Form 1099-INT. | | |
| Did you receive any dividends or stock earnings? If yes, please provide Form 1099-DIV. | | |
| Did you receive a state income tax refund on your 2018 return? | | |

2018 Tax Questionnaire

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| Did you receive stock from a stock bonus plan with your employer? | | |
| Did you buy or sell any stocks or bonds in 2018? If yes, provide Form 1099-B and broker statements. | | |
| Did you realize a gain or loss on property which was taken from you by destruction, theft, seizure, or condemnation? | | |
| Did you start a business or were you or your spouse self-employed? Tell me more! Do you have books? | | |
| Do you use your home as your principal place of business? If so, please provide details. | | |
| Did you purchase any business equipment during the year? If so, please provide details. | | |
| Do you have a written repairs/capitalization policy? If not, this is a now a requirement for 2018. Let's talk! | | |
| Did you have any income from farming on a farm you own and operate? Do you have books? Attach details. | | |
| Did you receive any rental income? Do you have expense and income receipts? Please provide details. | | |
| Did you use the property as a vacation home? If so, what were the total number of personal use days? _____ What were the total number of days rented? _____ | | |
| Did you sell property or equipment on installment in 2018? If so, please provide details. | | |
| Did you do a "like-kind" exchange of property in 2018? If yes, please provide details. | | |
| Did you receive payments from a pension or profit-sharing plan, IRA, or 401K in 2018? Attach Form 1099-R. | | |
| Did you receive a total distribution from an IRA or other qualified plan that was partially or totally rolled over into another IRA or qualified plan within 60 days of the distribution? Attach Form 1099-R. | | |
| Did you convert all or part of a regular IRA into a Roth IRA? If so, please attach detail. | | |
| Did you roll over all or part of a qualified plan into a Roth IRA? If so, please attach detail | | |
| Did you receive any income from an estate or trust? Please provide Form K-1. | | |
| Did you have an interest in any partnerships or S-Corps? Please provide Form K-1. | | |
| Did you receive any royalty income not shown on a Form K-1 or Form 1099-Misc? | | |
| Did you receive any disability payments in 2018? Please provide details. | | |
| Did you receive any social security payments in 2018? Please provide Form SSA-1099. | | |
| Did you receive any unemployment compensation in 2018? If yes, please provide Form 1099-G. | | |
| If you reside in NY, did you receive a real property freeze tax credit check? If so provide amount _____ | | |
| Did you receive tip income not reported to your employer? If yes, what was the amount? _____ | | |
| Did a lender cancel any of your debt in 2018? Attach Forms 1099-A or 1099-C. | | |
| Did you have gambling winnings in 2018? If so, congratulations! Please provide Form W-2G or details. | | |
| Did you serve on jury duty and receive payment that was not reimbursed to your employer? | | |
| Did you serve as an election judge and receive payment? Please provide detail. | | |
| Did you receive any lawsuit settlements? Please provide detail. | | |
| Did you work under the table or for cash? Please provide detail. | | |
| Did you receive any other income not included above? Please provide detail. | | |

| Foreign Bank Accounts, Foreign Assets, & Foreign Taxes | | |
|---|-----|----|
| | Yes | No |
| Did you have any income from foreign sources, not reported on 1099's? | | |
| Were any foreign taxes withheld? | | |
| Did you pay any foreign taxes? | | |

2018 Tax Questionnaire

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| At any time in 2018 did you have an interest in or a signature or other authority over a bank account or other financial account in a foreign country? If yes, what country? _____ | | |
| Did the aggregate value of all of your foreign accounts exceed \$10,000 at any point during 2018? | | |
| Did you at any time during 2018 have an interest in or authority over any foreign accounts or assets (i.e. stocks, bonds, mutual funds, partnership interests, etc.) held in foreign financial institutions that exceeded \$50,000 in value at any time during the year? | | |
| Were you the grantor of or transferor to a foreign trust which existed during the tax year, whether or not you have any beneficial interest in the trust? | | |
| Did you receive a distribution from a foreign trust? | | |

| Deductions | | |
|--|-----|----|
| | Yes | No |
| Did your out-of-pocket medical expenses exceed 7.5% of your income in 2018? If so, please provide details. | | |
| Did you purchase a vehicle, boat, or RV in 2018 and pay sales tax? If yes, please provide receipt. | | |
| Did you pay real estate taxes on a property that you own as your primary residence? Attach details. | | |
| Did you pay real estate tax on any other pieces of property that you own? | | |
| Did you buy, sell, or refinance any real estate? Please provide closing statement(s). | | |
| Do you live in a state that charges personal property tax on your vehicle? If yes, please attach receipts. | | |
| Did you make mortgage payments on your home or other property? If so, please attach Form 1098. | | |
| Did you refinance your mortgage or take an equity loan on your 1st or 2nd home? | | |
| Did you pay mortgage insurance premiums? Please provide all Form 1098's. | | |
| Did you make any cash contributions to charity? Please provide cancelled checks or receipts. | | |
| Did you donate a vehicle, boat, or RV to charity? If so, please provide Form 1098-C. | | |
| Did you donate any non-cash items (clothing, household) to charity? Please provide receipt and detailed list. | | |
| Did you drive any miles to provide a charitable service? Total miles driven: _____ | | |
| Did you drive any miles to donate non-cash items? Total miles driven: _____ | | |
| Did you incur any casualty or theft losses during 2018? (Fire, flood, theft) Please provide details. | | |
| Did you have any gambling losses? (Only provide if you had gambling winnings). | | |
| Did you pay union dues? Please provide documentation (Year end paystub or cancelled checks). | | |
| Did you have any job search expenses? If so, please provide details. | | |
| Do you have out-of-pocket expenses for your job? (Education, uniforms, phone, auto, meals, etc.) | | |
| Did you use your personal vehicle for work or business? If so , were you or could you have been reimbursed by your employer? If not , please provide Year, Make, and Model of vehicle, grand total of all mileage driven, and total business miles driven. | | |
| Did you pay any dues to an association related to your job? If so , was any portion required to be non-deductible due to political lobbying by the association? Provide detail. | | |
| Do you have an office at home for the convenience of your employer with no other principal place of work? | | |
| How much did you pay for tax preparation services in 2018? _____ | | |
| Did you pay any safe deposit box fee? Amount: _____ | | |
| Did you pay for any IRA fees via check? If so, please provide details. | | |
| Did you pay any investment advisory fees in 2018? If so, please provide details. | | |

2018 Tax Questionnaire

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| Did you pay back any unemployment received in a prior year? If so, please provide details. | | |
| Did you change jobs and move more than 50 miles? (Closer to work) | | |
| Did you move between states for work purposes in 2018? If so, please provide state and date/s moved. _____ | | |
| Did you contribute to a traditional IRA, SEP IRA, or Roth IRA? If so, please provide documentation. | | |
| Would you like to if you are eligible? | | |
| Were you an Armed Forces Reservist that travelled more than 100 miles to complete your monthly training? If so, please provide hotel, meal, and mileage logs | | |
| If you or your spouse are self-employed are either of you eligible to participate in an employer's health plan at another job? | | |
| Did you contribute to or receive distributions from a health savings account (HSA)? If yes, please provide Form 1099-SA. | | |
| Did you pay for a long-term health care policy in 2018? If yes, what was the premium paid? Taxpayer Premium _____ Spouse Premium _____ | | |

| Miscellaneous | | |
|--|-----|----|
| | Yes | No |
| If you are a grade K-12 teacher did you have any out-of-pocket classroom expenses? If so, provide total. Taxpayer _____ Spouse _____ **There is no automatic \$250 deduction for school teachers. You must provide documentation of what you spent. | | |
| Did you make or receive any alimony payments in 2018? | | |
| If you received alimony, what was the total amount received in 2018? _____ | | |
| If you paid alimony, please provide former spouse's name and social security number. Name: _____ SSN: _____ | | |
| Did you pay interest on a student loan for yourself, your spouse, or your dependents? Provide 1098-E. | | |
| Did you make any out of state purchases on which you did not pay sales tax? | | |
| Did you contribute to a Coverdell Education Savings Account? | | |
| Did you contribute to a NYS 529 College Savings Plan? If yes, please provide documentation. | | |
| Did you use the proceeds from Series EE or I US savings bonds purchased after 1989 to pay for higher education expenses? | | |
| Did you have any household employees that you paid over \$2,000 in 2018? Please provide details. | | |
| Did you make a loan at an interest rate below market rate? | | |
| Did you make any gifts to a trust? | | |
| Did you or your spouse make gifts of over \$15,000 to an individual? If yes, please provide giftee's name, address, SSN, type of gift (cash, property, etc.), and amount of gift. | | |
| Please list the states that you worked in for 2018? _____ | | |

| Credits | | |
|---|-----|----|
| | Yes | No |
| Did you pay daycare expenses for any dependents under age 13? If yes, attach daycare receipt. | | |
| Did you, your spouse, or your dependents attend college in 2018? If yes, attach Form 1098-T. | | |
| Did you make any solar, geothermal, or wind energy saving purchases in 2018? If yes, please provide receipts. | | |
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2018 Tax Questionnaire

| Estimated Tax Payments | | |
|--|-----|----|
| | Yes | No |
| Did you carry over a refund from your federal or state tax return to 2018? Please provide details Federal: _____ State: _____ | | |
| Did you make any federal estimated tax payments in 2018? Please provide details. | | |
| Payment Date: _____ Amount: _____ | | |
| Payment Date: _____ Amount: _____ | | |
| Payment Date: _____ Amount: _____ | | |
| Payment Date: _____ Amount: _____ | | |
| Payment Date: _____ Amount: _____ | | |
| Did you make any state estimated tax payments in 2018? If yes, what state/s? _____ | | |
| Payment Date: _____ Amount: _____ | | |
| Payment Date: _____ Amount: _____ | | |
| Payment Date: _____ Amount: _____ | | |
| Payment Date: _____ Amount: _____ | | |
| Payment Date: _____ Amount: _____ | | |

* Please use a separate sheet if you paid estimated taxes to more than one state.

| State Information | | |
|--|-----|----|
| | Yes | No |
| Did you live in more than one state during 2018? If so, which states? _____ | | |
| What county did you live in on 12/31/18? _____ | | |
| What school district did you live in on 12/31/18? _____ | | |
| What is your state's sales tax rate? _____% | | |
| If a resident of NY, were you a volunteer firefighter for all 12 months? | | |
| If so, please provide name and address fire district. _____ | | |
| If a resident of NY, did you pay any nursing home assessment fees? Please provide bills showing amounts. | | |

| Prior Year Returns | | |
|---|-----|----|
| | Yes | No |
| Were you notified by the IRS or any state taxing authority of changes to a prior year/s return? If yes , please provide agent's report or notice of change. | | |
| Were there changes to prior year income, deductions, credits etc. which would require filing an amended return? | | |

*Please provide the last three years federal and state tax returns if not currently in our possession.

2018 Tax Questionnaire

| Tax Planning for 2018 | | |
|--|-----|----|
| | Yes | No |
| Will your marital status change for 2019? | | |
| Will there be any changes to the number of dependents on your returns? | | |
| Do you or your spouse plan to retire in 2019? | | |
| Will your income change significantly in 2019? Up_____ Down_____ | | |
| Will you start/sell a business or purchase/sell a rental property? | | |
| Will you invest or sell shares in a partnership or S-Corp? | | |
| Are there any other changes that I should be aware of? Please provide details. | | |

2018 Tax Questionnaire

| Part 5 – Coverage Worksheet | | | | | | | | | | | | | | | | |
|-------------------------------|------------------|-----------------|-----------------|--------------------|--|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| | | | | | Place an X in the box for any month with NO Coverage | | | | | | | | | | | |
| Name of Covered Individual(s) | Type of Coverage | Employer Policy | Exchange Policy | Exemption Received | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | | | | |
| 4. | | | | | | | | | | | | | | | | |
| 5. | | | | | | | | | | | | | | | | |
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| 7. | | | | | | | | | | | | | | | | |
| 8. | | | | | | | | | | | | | | | | |
| 9. | | | | | | | | | | | | | | | | |
| 10. | | | | | | | | | | | | | | | | |

****If individual had more than one type of coverage or other situations we should be aware of, please attach additional pages as needed.**
*****You must provide all Forms 1095-A, 1095-B, and 1095-C that you receive.**

In order to protect us both from future IRS liability in the event of an audit, we require all individual taxpayers for 2018 to affirm the following related to Health Care. Please initial and sign the bottom.

_____ We have provided DFS with all copies of Forms 1095-A, 1095-B, and 1095-C we received.

Completed By (Taxpayer or Spouse Please Sign): _____

Date: _____

Please print your name: _____