



Questionnaire for Taxes 2019

Filing Status:

What is your filing status? Single, Head of household, married filing jointly, married filing separate or widow?

Personal Information:

1. Your name as it appears on your SSN or ITIN?
2. Your DOB?
3. What is your occupation during 2019?
4. Can you be claimed as a dependent on someone else's return? Yes or No
5. Are you over age 18 and a full-time student at an eligible educational institution? Yes or No
6. What is your current mailing address? Apt #, City, State, Zip code?
7. What is your current phone number?
8. Did you pay rent during 2019? Yes or No
9. Did you purchase health insurance via HealthCare.gov or a State Marketplace?
Yes or No Form 1095-A (if you purchase)

Income Information:

- 1- How many jobs did you have during 2019?
- 2- How many W2's do you have for 2019?
- 3- Scholarships? Yes or No Form 1098-T? Yes or No
- 4- Interest checking/savings accounts Forms 1099-INT? Yes or No
- 5- Refund of state/ local income taxes? (Form 1099-G? Yes or No
- 6- Form 1099-MISC? Yes or No
- 7- Retirement income or payments from Pensions, Annuities, and or IRA? (Form 1099-R)? Yes or No
- 8- Unemployment Compensation? (Form 1099G)? Yes or No
- 9- Social Security or Railroad Retirement Benefits? (Forms SSA-1099, RRB-1099)? Yes or No
- 10- Other income? (Gambling, lottery, prizes, awards, etc...)? Yes or No
- 11- Self-Employment income? Cash Yes or No
- 12- Do you have any expenses related to your self-employment? Yes or No

Refund Information: (If applicable)

If you are due a refund, would you like: a. Direct deposit Yes or No



Is this a checking or savings account?

Routing number:

Account number:

Balance Due Information: (If applicable)

If you have a balance due, would you like to make a payment directly from your bank account? Yes No

Is this a checking or savings account? Yes No

Routing number:

Account number:

Dependents Information (If applicable)

Do you have dependents? Yes No (Fill out the below questions, if this applies to you)

Dependents Information: (1)

If you have more than one dependent fill out the same questions for the other dependents:

1. Name as it appears on your SSN or ITIN? First name, Middle name, Last name
2. Date of birth?
3. SSN or ITIN number?
4. Was this person a U.S. citizen, U.S. national, or U.S. resident alien? Yes or No
5. Relationship: Daughter, Son etc.
6. Number of months this person lived in your home during 2019?
7. Child or dependent care expenses such as daycare? Yes or No

Check All That Apply:

- This person was over age 18 and a full-time student at an eligible educational institution.
- Check if this person was DISABLED.
- Check if this dependent is married.
- This dependent made over \$4,200 of income in 2019

Dependents Information: (2)

- 1- Name as it appears on your SSN or ITIN? First name, Middle name, Last name
- 2- Date of birth?
- 3- SSN or ITIN number?
- 4- Was this person a U.S. citizen, U.S. national, or U.S. resident alien? Yes or No
- 5- Relationship: Daughter, Son etc.
- 6- Number of months this person lived in your home during 2019?
- 7- Child or dependent care expenses such as daycare? Yes or No



Check All That Apply:

- This person was over age 18 and a full-time student at an eligible educational institution.
- Check if this person was DISABLED.
- Check if this dependent is married.
- This dependent made over \$4,200 of income in 2019