

2020 Client Questionnaire

(to be answered by all clients – please print neatly)

Client Information			
Name:	Legal Name (If Different):		
	t Address: Email:		
Preferred F	Phone: (Home Cell Work)		
Spouse Information (if applicable)			
Name:	Legal Name (If Different):		
	t Address: Email:		
Preferred F	Phone: (Home Cell Work)		
To be provided by <u>All</u> Clients, each year			
	Legible copy of your (and your spouse's) unexpired driver license (front <u>and</u> back)		
	Blank voided check to be used to deposit refund or debit balance due		
To be provided by <u>New</u> Clients, first year			
	Copy of Social Security card(s) for each individual who will be included on the tax return		
	Dates of birth for each individual who will be included on the tax return		
	Copies of the last two years tax returns		
IRS Requirements			
	If you normally receive the Earned Income Tax Credit (EITC) , please provide documentation showing your dependent(s) reside at your address (e.g. medical EOB, school report card, daycare receipt, etc.)		
	If you have children and qualify for the Child Tax Credit (CTC) , please provide documentation showing your dependent(s) reside at your address (e.g. medical EOB, school report card, daycare receipt, etc.)		
	If you have children in college and qualify the American Opportunity Tax Credit (AOTC) , you <u>must</u> provide Form 1098-T, the college invoice for each semester attended, <u>and</u> proof of payment for each semester.		
	If you will use the Head of Household filing status, we must have in our files copies of the birth certificates for each of your children. (You only need to provide these one time.)		

Questions for <u>All</u> Clients			
Yes	No		
		Any change in filing status in the past year? If yes, describe:	
		Dependents: Have you added or lost any dependents in the past year? If yes:	
		Housing & Real Estate: In the past year have you: ☐ Bought a house / ☐ Sold a house / ☐ Moved/relocated	
		Did you receive health care from the exchange in the past year? If yes, then Form 1095-A (Health Insurance Marketplace Statement) is required.	
		Do you have any investment accounts (e.g. E*TRADE, Robinhood, TD Ameritrade, etc.)?	
		Do you have financial interest or signature authority over financial account in foreign country?	
		Did you sell, send, exchange, or acquire any virtual (aka crypto) currency during the past year?	
		Have you received correspondence from the IRS or any state? Please provide copies!	
2020 Specific Questions			
Yes	No		
		Did you receive the Economic Impact Payment ("stimulus") #1 (Spring/Summer 2020)? If yes, please include the amount: \$ or □ I don't remember	
		Did you receive the Economic Impact Payment ("stimulus") #2 (Dec 2020 / Jan 2021)? If yes, please include the amount: \$ or □ I don't remember	
		Did you receive Unemployment benefits? If yes, you must obtain and provide Form 1099-G from the NYS website	
		Did you take an up to \$100,000 coronavirus-related distribution from an eligible retirement plan? If yes, please include the amount: \$ and indicate whether you want to: □ Pay tax in full this year or □ Spread it out equally over three years	
		Self-Employed only: Did you have COVID-19 or did you need to take care of family members because of COVID-19? If yes, you will need to provide details pertaining to the circumstances.	

Please see our **"What Should I Bring?"** page on our website for a helpful list of items we need: https://freedomfs.net/what-should-i-bring