

# **2018**

## ***Tax Questionnaire***



Please complete this Tax Questionnaire and use the attached Additional Information Page to gather your 2018 tax information. Please be sure to include copies of any of the following applicable forms when returning your completed Additional Information Page.

- Form W-2s
  - W-2 (wage statement)
  - W-2G (gambling winnings)
- Form 1099s
  - 1099-INT (interest income)
  - 1099-DIV (dividends and distributions)
  - 1099-C (cancellation of debt)
  - 1099-B (sale of securities)
  - 1099-G (state and local refunds and unemployment comp.)
  - 1099-LTC (long term care insurance benefits)
  - 1099-MISC (non-employee compensation)
  - 1099-S (sale of real estate)
  - 1099-Q (payments from qualified education programs)
  - 1099-R (pension and annuities)
  - 1099-SA (HSA, Archer MSA or Medicare Advantage MSA)
  - SSA-1099 (Social Security benefits)
- Form 1098s
  - 1098 (mortgage interest)
  - 1098-E (student loan interest)
  - 1098-T (tuition statement)
- Form 1095-A (health insurance marketplace statement)
- Form 1095-B (health coverage)
- Form 1095-C (employer provided health insurance offer and coverage)
- Form K-1s (partnership, S-Corp., trust or estate)
- Form HUD-1 (closing statement for real estate purchased, sold or refinanced)

Name: Jim + Susan Peterson

Please check the appropriate box and include all pertinent details.  
Attach additional schedules if necessary.

## Yes No N/A PERSONAL INFORMATION

- ☐ ☒ Did your marital status change during the year?
- ☐ ☒ Did your home address change during the year? If yes, date you moved \_\_\_\_\_. Also, please make changes on the Additional Information Page.
- ☐ ☒ Could you or your spouse be claimed as a dependent on another person's tax return for 2018?
- ☐ ☒ Did you live or work in a foreign country in 2018?
- ☐ ☒ Were you or your spouse an active member of the U.S. Armed Forces during any time in 2018?
- ☐ ☒ Did you travel more than 100 miles to perform duties as a National Guard member or reservist?
- ☐ ☒ Were you or your spouse issued an Identity Protection PIN by the IRS? If yes, please provide: \_\_\_\_\_.

## Yes No N/A DEPENDENTS

- ☐ ☒ Were there any changes in dependents from prior year tax filing?  
If yes, for new dependents, please provide full name, date of birth, Social Security number, relationship and number of months lived with you. For other dependents, please note changes on the Additional Information Page.
- ☐ ☒ ☐ Did any of your dependents have earned income? If yes, please include W-2s or other documentation.
- ☐ ☒ Did you have a dependent child with investment income (interest, dividends and/or capital gains) of more than \$1,050 in 2018? If yes, please include Form 1099s or other documentation.
- Note: If we are NOT preparing your child's tax return, you may want to review the Kiddie Tax and Does Your Dependent Need To File A Tax Return flow charts in the back of this packet to determine if either applies.**
- ☐ ☒ ☐ Do you wish to establish or contribute to your child or grandchild's Roth IRA? A contribution can be made up to the lesser of \$5,500 or their earned income (W-2 or 1099-MISC).
- ☐ ☒ Did you provide over half the support for a parent or sibling? If yes, please explain on the Additional Information Page.

## Yes No N/A INCOME

- ☐ ☒ Did you receive unreported tip income of \$20 or more in any month?
- ☐ ☒ Did you cash any Series EE or Series I U.S. savings bonds issued after 1989 and pay qualified higher education expenses for yourself, your spouse, or your dependents?
- ☐ ☒ Did you receive any disability income?
- ☐ ☒ Did you receive any unemployment compensation? If yes, please attach Form 1099-G.
- ☐ ☒ Did you have any stock option transactions during 2018, including grants, exercises or sales? If yes, please provide details on the Additional Information Page.
- ☐ ☒ Did you engage in any bartering transactions during 2018?

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**Yes No N/A INCOME (continued)**

- ☒ ☐ Did you start a business or farming activity, purchase rental or royalty property, or acquire an interest in a partnership, S-corporation, trust, or REMIC in 2018?

**Yes No N/A BUSINESS INCOME**

- ☐ ☒ Did you receive any income from a sharing/gig economic activity (e.g. Airbnb, Uber, etc.) in 2018?
- ☒ ☐ Did you start-up a new business in 2018?
- ☐ ☒ Did you make any payments in 2018 that would require you to file Form(s) 1099?
- ☐ ☐ ☐ **If yes, did you or will you file all required Form 1099?**
- ☐ ☒ ☐ Did your business purchase health insurance through the "SHOP" marketplace, and pay at least 50% of the premiums for your employees' coverage in 2018?
- ☐ ☒ ☐ Did your business issue two or more W-2 forms?
- ☐ ☒ ☐ **If yes, did the business pay for or reimburse employees' individual health insurance policies?**

**Yes No N/A RENTAL INCOME**

- ☐ ☒ Did you rent out property for the first time in 2018?
- ☐ ☒ Did you make any payments in 2018 that would require you to file Form 1099?
- ☐ ☒ ☐ **If yes, did you or will you file all required Forms 1099?**

**Yes No N/A PURCHASES, SALES AND DEBT**

- ☐ ☒ Did you purchase or dispose of any business assets (furniture, equipment, vehicles, real estate, etc.) or convert any personal assets to business use?
- ☐ ☒ Did you have any debt you owed cancelled or forgiven in 2018? **If yes, include Form 1099-C.**
- ☐ ☒ Did anyone owe you money that has become uncollectible during 2018?
- ☐ ☒ Did you engage in any put or call option transactions during 2018?
- ☒ ☐ Did you buy or sell any stocks, bonds or other investment property? **If yes, please supply copies of brokerage cost basis reports. Also, please specify the sale of any collectibles (e.g., artwork, gems, stamps, coins) and any qualified small business stock.**

**Note: If we handled all of your current and prior investment activity, we retain all required information.**

**Note: Your broker or custodian is required to report to the IRS if you sold any securities. Accordingly, to avoid paying too much tax, you must provide the following information for each security sold:**

- Name of the security
- Date(s) it was purchased
- Total Cost (including commissions)

**Note: If you sold mutual funds or any securities where any distributions were reinvested or were purchased through payroll withholding, ALL such purchase history must be accounted for to assure you do not over pay your tax.**

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**Yes No N/A PURCHASES, SALES AND DEBT – RESIDENCE AND SECOND HOME**

- ☐ ☒ Did you REFINANCE your principal home or second / vacation home?
- ☐ ☐ ☐ If yes, did you include a copy of the closing document (Form HUD-1 or similar document)?
- ☐ ☒ Did you SELL your primary residence or secondary residence/vacation home last year?
- ☐ ☐ ☐ If yes, is a copy of the *closing document from its original purchase* enclosed? (HUD-1 or similar document)
- ☐ ☐ ☐ If yes, is a copy of the *closing document from the sale* enclosed? (HUD-1 or similar document)
- ☐ ☐ ☐ If yes, for your primary residence, did you occupy it for any two out of the last five years?
- ☐ ☒ Did you PURCHASE a different primary residence or secondary residence/vacation home last year? If yes, please provide a copy of the closing document (Form HUD-1 or similar document) from the purchase of your new home.

**Yes No N/A RETIREMENT PLANS**

- ☐ ☒ Did you receive a DISTRIBUTION from a profit-sharing plan, retirement plan, or individual retirement arrangement (including Traditional IRA, Roth IRA, SEP, Simple, etc.) in 2018?
- ☐ ☐ ☐ If yes, Did you ROLLOVER all distributions from a retirement account into an IRA within 60 days?
- ☐ ☒ Were you or your spouse age 70 ½ or older in 2018?
- ☐ ☐ ☐ If yes, did you or your spouse take any distribution(s) from your IRAs or other retirement accounts in 2018?
- ☐ ☒ Did you or your spouse DONATE an IRA distribution directly to charity in 2018?  
If yes, how much? \$ \_\_\_\_\_
- ☐ ☒ Did you or your spouse CONVERT funds from a traditional, SEP or Simple IRA to a Roth IRA in 2018?

Did you contribute during calendar year 2018 for **TAX YEAR 2018** to a:

		<u>Taxpayer</u>	<u>Spouse</u>
<input type="checkbox"/> <input checked="" type="checkbox"/>	Traditional IRA	Amount: _____	_____
<input type="checkbox"/> <input checked="" type="checkbox"/>	Roth IRA	Amount: _____	_____
<input type="checkbox"/> <input checked="" type="checkbox"/>	SEP, SIMPLE, etc.	Amount: _____	_____

Do you anticipate making a contribution **IN CALENDAR YEAR 2019 FOR TAX YEAR 2018** to a:

		<u>Taxpayer</u>	<u>Spouse</u>
<input type="checkbox"/> <input checked="" type="checkbox"/>	Traditional IRA (Due by 4/15/2019)	Amount: _____	_____
<input type="checkbox"/> <input checked="" type="checkbox"/>	Roth IRA (Due by 4/15/2019)	Amount: _____	_____
<input checked="" type="checkbox"/> <input type="checkbox"/>	SEP, SIMPLE, etc.	Amount: <u>MAX</u>	_____

**If you want to make the maximum contribution possible, write in "MAX".**

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**Yes No N/A HEALTH INSURANCE**

- ☐ ☒ Was there any month in 2018 in which you, your spouse and your dependents were **NOT COVERED** by health insurance provided by either an employer or government (including Medicare) or purchased through Health Insurance Marketplace exchange or directly from insurance company? (Please include Form 1095-A, 1095-B or 1095-C).
- ☐ ☐ ☐ **If yes**, have you applied for, and received a Marketplace granted exemption certificate number? (Please provide a copy of the Marketplace notice).
- ☐ ☒ Did you receive any advanced premium credits applied toward your health insurance premiums in 2018? **If yes**, please provide Form 1095-A with your other tax documents.

**Yes No N/A EDUCATION**

- ☐ ☒ Did you, your spouse or a dependent **CONTRIBUTE TO / DISTRIBUTE FROM (circle one)** a Coverdell Education Savings Account? **If yes**, amount: \_\_\_\_\_ and beneficiary \_\_\_\_\_.
- ☐ ☒ Did you, your spouse or a dependent **CONTRIBUTE TO** a College Savings 529 Plan? **If yes**:

State of Program \_\_\_\_\_ Beneficiary \_\_\_\_\_

Contribution Amount \_\_\_\_\_

If CHET, Account #s (if not previously provided) \_\_\_\_\_

**Note: The above information is needed for each beneficiary. Use Additional Information Page if you need more space.**

- ☐ ☒ Did you, your spouse or a dependent take a **DISTRIBUTION FROM** a College Savings 529 Plan or Coverdell Education Savings account (**circle one**)? **If yes**:

State of Program \_\_\_\_\_ Beneficiary \_\_\_\_\_

Tuition \_\_\_\_\_ Room & board (if not included in tuition) \_\_\_\_\_

Books & Supplies (required by school) \_\_\_\_\_

Computer, equipment, software or internet service (if required by school) \_\_\_\_\_

Relationship of beneficiary to you or spouse \_\_\_\_\_

**Note: The above information is needed for each beneficiary. Use Additional Information Page if you need more space.**

**Please remember to include Form 1099-Q (payments from qualified education programs) for each beneficiary.**

- ☐ ☒ Did you, your spouse or a dependent pay any tuition or fees **not reimbursed from 529 plans or Coverdell accounts** to attend a college, university, or vocational school? **If yes**, please complete the following:

Name of student \_\_\_\_\_ Tuition and fees \_\_\_\_\_

Name of institution \_\_\_\_\_ State \_\_\_\_\_

- ☐ ☐ Had the student completed four years of post high school education prior to 2018?

**For additional students, please include the above information on the Additional Information Page.**

**Must include Form 1098-T (tuition statement) from each educational institution for each beneficiary.**

**Yes No N/A ITEMIZED DEDUCTIONS - MEDICAL**

- ☐ ☒ Did you incur any unreimbursed medical expenses you paid with after-tax dollars that exceeds 7.5% of gross income? **If yes**, please provide the amounts on the Additional Information Page. (NOTE: **Do not include**

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amounts paid with pre-tax dollars such as Flexible Spending Accounts, Health Savings Accounts, Cafeteria plans or any amounts reimbursed by insurance or health insurance included on Social Security Benefit Statement Form SSA-1099. Do include Medicare Supplemental (Medigap) premiums).

- ☐ ☒ Did you pay any after-tax unreimbursed long-term care insurance premiums?  
If yes, what amount? Self: \$ \_\_\_\_\_ Spouse: \$ \_\_\_\_\_
- ☐ ☒ Were you a policyholder who received payments under a long-term care (LTC) insurance contract? If yes, please include a copy of Form 1099-LTC.
- ☐ ☒ Did you drive your car(s) to obtain medical care in 2018? If yes, what was the number of miles driven: \_\_\_\_\_?
- ☐ ☒ Do you or your spouse have a HSA health savings account (NOT a FSA Flexible Savings Account)? If yes:
- ☐ ☒ Did you or your spouse make a contribution in 2018? If yes, amount:  
Self: \$ \_\_\_\_\_ Spouse: \$ \_\_\_\_\_. Type of coverage (check one) \_\_\_\_\_ Self \_\_\_\_\_ Family
- ☐ ☒ Have, or will, you or your spouse make a contribution in 2019 (on or before April 15, 2019) for 2018? If yes, amount:  
Self: \$ \_\_\_\_\_ Spouse: \$ \_\_\_\_\_. Type of coverage (check one) \_\_\_\_\_ Self \_\_\_\_\_ Family
- ☐ ☒ Did you or your spouse receive a HSA or MSA distribution in 2018? If yes, please provide Form 1099-SA.
- ☐ ☒ Did you or your spouse receive a distribution from a HSA or MSA that was **NOT FULLY** used to pay qualified medical expenses?

## Yes No N/A ITEMIZED DEDUCTIONS - TAXES

- ☒ ☐ Did you pay any personal property taxes (i.e. vehicles, boats, trailers, etc.)?
- ☒ ☐ Did you pay any real estate taxes for your home / vacation home / land / investment property?
- ☐ ☒ Did you purchase any vehicles, boats, airplanes, homes or home building materials in 2018? If yes, how much total sales tax was paid? \_\_\_\_\_ (or attach purchase document).

## Yes No N/A ITEMIZED DEDUCTIONS - INTEREST

- ☒ ☐ Did you pay mortgage interest on your primary or secondary residence during 2018? If yes, include a copy of Form 1098 and indicate which property it relates to.
- ☐ ☒ Did you take out a mortgage on a new home, or refinance a prior mortgage, after December 15, 2017?  
During 2018, did any of the following possible limitations on mortgage interest apply to you?
- ☐ ☒ 1) Mortgage debt on the acquisition or improvement of your primary residence in excess of \$1,000,000
- ☐ ☒ 3) Mortgage loan balances greater than the fair market value of property *as of the date of the last loan?*
- ☐ ☒ 4) Loan not in your or your spouse's name?
- ☐ ☒ 5) Refinanced loan proceeds not used directly to buy, build or improve property (i.e. cash taken out)?
- ☐ ☒ 6) Loan **NOT** secured by the same property?
- ☐ ☒ 7) If you had a home equity line of credit, did you use any proceeds for something other than substantial major improvements to your home (such as remodeling)? If yes, how much of the proceeds, since loan inception, were used for something other than substantial major home improvements? \$ \_\_\_\_\_.

## Yes No N/A ITEMIZED DEDUCTIONS - INTEREST (continued)

- ☐ ☒ Are you paying any interest expense on loans for a boat or recreational vehicle which has a sleeping space, toilet and cooking facility? If yes, include form **OR** provide name of lender \_\_\_\_\_ and amount of interest paid \_\_\_\_\_.

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☐ ☒ Did you pay any margin interest expense on loans used to purchase investment securities? **If yes**, include form **OR** provide name of lender \_\_\_\_\_ and amount of interest paid \_\_\_\_\_.

☒ ☐ Did you or your spouse pay any interest on student loans? **If yes**, include form **OR** provide name of lender \_\_\_\_\_ and amount of interest paid \_\_\_\_\_.

**Yes No N/A ITEMIZED DEDUCTIONS – CHARITABLE CONTRIBUTIONS**

☐ ☒ Have you included political contributions in your charitable contributions total? **Political contributions are not deductible as a charitable contribution for federal income tax purposes.**

☐ ☒ Did you donate a car, stocks or mutual funds to a charity? **If yes**, please provide details.

☒ ☐ Did you donate by cash or check to any charitable organizations during 2018? **If yes**, please provide list or total. **It is not necessary to include individual receipts.**

☐ ☒ Did you have any cash/check/credit card donations in 2018 where you gave more than \$250 to a single charity at one time and you did NOT receive a letter from the charity confirming: 1) the amount of money contributed/description of property given and 2) that you did not receive any goods or services in return?

☐ ☒ Did you make any in-kind (**non-cash**) donations to charitable organizations during 2018? If the total value of these contributions was greater than \$500, please include the name and address of the charitable organization, as well as your date of acquisition and your original basis (normally cost) of the goods in the Additional Information Page section. In order to be deductible, the IRS requires that all items be in “good used condition or better”.

☐ ☒ Did you drive any charitable mileage during 2018? **If yes**, list number of miles \_\_\_\_\_.

**Yes No N/A ESTIMATED TAXES & OTHER TAX PAYMENTS / REFUNDS**

☐ ☒ If you have an overpayment of 2018 federal taxes, should we apply the excess to your 2019 estimated tax? **If no, please check one of the following:**

☐ ☒ Request the IRS send me a refund check in the mail.

☐ ☒ Direct deposit the refund into my checking account. **If yes,**

\_\_\_\_\_ Use same deposit information from last year’s return, or

\_\_\_\_\_ Use the attached voided check for current deposit information.

**Note for direct deposit:** If filing a joint return, the refund can only be made into the jointly held account of the taxpayers listed on the return.

☐ ☒ If you have a tax payment due on your 2018 federal taxes, would you like your bank account automatically debited for the balance? **Note: Payment will be debited on April 15, 2019, regardless of when you efile.**

☐ ☒ Did you make 2018 estimated federal, state, or city tax payments? **If yes**, please complete the Estimated & Other Tax Payments insert included in your Additional Information Page.

**Yes No N/A GAMBLING**

☐ ☒ Did you have any gambling / lottery winnings during 2018? If so, provide any W-2G’s.

**GROSS gambling / lottery WINNINGS \$** \_\_\_\_\_ (do NOT net with losses)

**GROSS gambling / lottery LOSSES \$** \_\_\_\_\_

**Yes No N/A FOREIGN COUNTRY INFORMATION**

☐ ☒ Did you have any income from foreign sources or pay any foreign taxes in 2018? (**NOTE: U.S. mutual funds or ETFs holding international stocks or bonds are NOT considered foreign accounts.**)

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- ☐ ☒ Did you own, have a financial interest in or are have signature authority on a financial account(s) in a foreign country, such as a bank account, securities account, or other financial account?
- ☐ ☐ ☐ **If yes**, did the aggregate total value of your foreign accounts exceed \$10,000 at any time in 2018?
- ☐ ☒ Did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust?

**Yes No N/A MISCELLANEOUS**

- ☐ ☒ Do you want to allocate \$3 to the Presidential Election Campaign Fund?
- ☐ ☒ Does your spouse want to allocate \$3 to the Presidential Election Campaign Fund?
- ☒ ☐ May the IRS discuss this return with the advisor who prepared the return?
- ☐ ☒ Did you have any Cancellation of Debt (COD) in 2018? **If yes**, include Form 1099-C
- ☐ ☒ Did you pay or receive (**circle one**) any alimony during 2018? **If yes** - amount? \_\_\_\_\_
- If 2018 was the first-year alimony was paid, please provide name, address and social security number of recipient \_\_\_\_\_
- ☐ ☒ Did you work out of state for part of the year? **If yes**, list state(s) \_\_\_\_\_
- ☐ ☒ Did you or your spouse incur any expenses working as a teacher, counselor, aide or principal for grades Kindergarten through 12? Expenses can include professional development courses related to curriculum taught. **If yes**, amount \_\_\_\_\_ (Max \$250).
- ☐ ☒ Was your home rented out or used for business?
- ☐ ☐ **If yes**, was 2018 the first year this was done?
- ☐ ☒ Did incur any adoption expenses? **If yes**, please provide details on the Additional Information Page.
- ☐ ☒ Did you purchase a new street legal four-wheel, plug-in electric drive motor vehicle (i.e. not a golf cart or ATV)?
- ☐ ☒ Did you engage the services of any household employees?
- ☐ ☒ **EXCEPT** for dependent care costs (DCB) paid through an employer's pretax plan, did you pay for childcare for child(ren) under age 13 while you worked or looked for work during 2018?
- ☐ ☒ Were you a policyholder who received any accelerated death benefits from a life insurance policy?
- ☐ ☒ Did you incur a loss because of damaged or stolen property, not compensated by insurance?
- ☐ ☒ ☐ **Active military members only:** Did you incur moving expenses due to a change of employment?
- ☐ ☒ Did you own or use any virtual currency (such as Bitcoin) in 2018?
- ☐ ☒ Did you individually contribute any gifts to an individual or a trust that total more than \$15,000 in cash, securities or other property?
- ☐ ☒ ☐ Did your spouse individually contribute any gifts to an individual or a trust that total more than \$15,000 in cash, securities or other property?
- ☐ ☒ Do you expect a significant change in 2019 income or expenses or a change in filing status? **If yes**, please explain on the Additional Information Page.
- ☐ ☒ Do you wish to declare any out-of-state or out-of-country purchases in which no sales tax was paid?
- ☐ ☐ ☐ **If yes**, please provide your total 2018 out-of-state and out-of-country purchase amount: \$ \_\_\_\_\_

**TAX RECORDS**

**A copy of your tax returns will be provided via a PDF file.  
No paper copy will be provided.**