

# 2020 Tax Season Update Questionnaire

Date \_\_\_\_\_

Client Name: \_\_\_\_\_

*We provide one copy of your tax return per year.*

*Please select one: Paper \_\_\_\_\_ or Digital \_\_\_\_\_*

*Please note if you select paper, additional copies will be \$25 per request.*

*If you opt for a digital copy you will not receive a paper copy of your returns and it is your responsibility to print and save your tax returns.*

We need two different e-mails on file if you are filing a joint tax return.

**Please circle if any of the following changed so we can provide you with a different questionnaire:**

Address                      E-mail                      Phone                      Phone Carrier

- **Marital Status Change:** Please Provide Marriage Certificate, Divorce Decree and/or new Social Security Card for name change if applicable.
- **New Dependent (s):** Please provide copies of social security card & birth certificate.
- **If you bought, sold or refinanced your real estate property:** provide a copy of your closing statement.

*\*Please note that we cannot file your returns without the before mentioned documents if these life changes took place.*

Did you have healthcare for all of 2020?    **Yes**                      **No**    If yes, was it provided through the Affordable Care Act?                      **Yes**                      **No**  
*If yes, Form 1095-A is required to complete your tax return.*

**Bank Account Change:** Please provide a copy of a voided, blank check. *Do not provide a deposit slip!*

**Please answer all of the following questions on the next page:**

## 2020 Tax Season Update Questionnaire

	Yes	No
1. <b>Did you receive, sell, send, exchange, or otherwise acquire any financial interest in virtual currency at any point in 2020?</b> (EX: bitcoin)	<input type="checkbox"/>	<input type="checkbox"/>
2. <b>Did you or anyone in your household work outside of your home state?</b> <i>If yes, need copies of driver's license for <b>taxpayer and spouse</b>, (if married).</i>	<input type="checkbox"/>	<input type="checkbox"/>
3. <b>Did you make any contributions to or withdrawals from a Health Savings Account or Archer MSA in 2020?</b>	<input type="checkbox"/>	<input type="checkbox"/>
4. <b>Did you make out-of-state purchases by telephone, internet, mail or in person <i>without paying sales tax</i>?</b>	<input type="checkbox"/>	<input type="checkbox"/>
5. <b>Did you make gifts of more than \$15,000 to any individual(s)? (This could be multiple gifts totaling to \$15,000.00 in one year.)</b>	<input type="checkbox"/>	<input type="checkbox"/>
6. <b>Did you receive correspondence from the State or the IRS?</b> <i>If so, please provide copies of all such notices if you haven't done so already.</i>	<input type="checkbox"/>	<input type="checkbox"/>
7. <b>Did you receive notification <i>that the IRS reduced or disallowed a credit in the previous years</i>?</b> <i>If so, please provide a copy of the letter.</i>	<input type="checkbox"/>	<input type="checkbox"/>
8. <b>Did you receive an IRS PIN for your 2020 tax return?</b> <i>If so, please provide a copy of the letter.</i>	<input type="checkbox"/>	<input type="checkbox"/>
9. <b>Did you live in another state during the Covid Pandemic?</b>	<input type="checkbox"/>	<input type="checkbox"/>
10. <b>Did you work from a different state than what you normally would in 2020?</b>	<input type="checkbox"/>	<input type="checkbox"/>
11. <b>Did you or anyone in your household receive unemployment benefits or compensation under the Coronavirus Relief Act?</b> <i>If yes, you <b>must</b> login to your unemployment account for the Form 1099-G; it will <b>not</b> be mailed to you.</i>	<input type="checkbox"/>	<input type="checkbox"/>
12. <b>Did you or anyone in your household have more than one job?</b>	<input type="checkbox"/>	<input type="checkbox"/>
13. <b>Did you receive emergency family leave wages?</b>	<input type="checkbox"/>	<input type="checkbox"/>

**Please answer all of the following questions on the next page:**

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**Yes      No**

**14. Are you a telecommuting employee that was required to “shelter in place” due to local Covid-19 protocols while working in a state that was not your home state?**

**15. Did you or anyone in your household receive an CARES ACT Economic Stimulus payment in 2020?**  
*If yes, please provide **all** Economic Impact Payment, Notice 1114 letter(s) received.*

**16. Do you and/or spouse have a business? If yes, business name(s) \_\_\_\_\_**

**Entity:              Sole Proprietor                      Single Member LLC                      Partnership                      Corporation**

- a.** If you are a business owner, did you receive a Paycheck Protection Program (PPP) loan?
- b.** If yes, did you apply for PPP loan forgiveness?

**17. If you are self-employed, were you unable to perform your self-employee activities due to Covid-19 related care for yourself; a family member or to another?**

**18. If you or anyone in your household was self-employed or worked in the gig economy, did you/they receive NJ PUA funds in 2020?**
