

Blizzard Business Service, Inc

2020 Tax Preparation Questionnaire

Name _____
Occupation Taxpayer _____ Spouse _____
Address _____
Phone (Cell) _____ Landline _____ E-mail _____
Can I contact you by text or e-mail (no personal or tax information will be used) Yes ___ No ___
Direct Deposit (attached a voided check) _____ Paper check _____
Are you married ____, divorced ____, widowed ____ Date of 2020 spouse death _____
Dependents you may claim for 2020 _____

New child? _____ Date of birth _____
Social Security Number _____ Did you have a Stillborn in 2020 Yes ___ No ___
Is any dependent a full-time student (to age 24) Yes ___ No ___ Name _____
If you have been a victim of identity theft attach letter showing IRS IP Pin.
Is anyone (taxpayer, spouse, dependent) totally and permanently disabled _____ or blind _____
If you are able, copy the taxpayer and spouse (if married) driver's license OR provide date of issue and expiration. Taxpayer _____ Spouse _____

- Yes ___ No ___ Unsure ___ 1) At any time during 2020 did you have a financial interest in or signature authority over a financial account or trust located in a foreign country?
- Yes ___ No ___ Unsure ___ 2) Did you receive, send, sell or exchange or otherwise acquire any interest in any virtual currency (ie: bitcoin)?
- Yes ___ No ___ Unsure ___ 3) Did you make purchases that you did not pay Michigan Sales Tax on?
- Yes ___ No ___ Unsure ___ 4) Did you give more than \$14,000 to any one individual during 2020?
- Yes ___ No ___ Unsure ___ 5) Did you receive a Stimulus Payment in 2020? Attach IRS Notice 1444 or give amount if known _____.
- Yes ___ No ___ Unsure ___ 6) Did you make charitable contributions of at least \$300 during 2020? Go Fund Me and certain Foundations do not apply. Must be IRS non-profit approved.
- Yes ___ No ___ Unsure ___ 7) Attach W-2 forms
- Yes ___ No ___ Unsure ___ 8) If you worked from home this year, indicate the number of days you worked from home versus total days worked if your job is normally in a city that collects income tax.
- Yes ___ No ___ Unsure ___ 9) Education expense. Attach Form 1098-T and other allowable expenses.
- Yes ___ No ___ Unsure ___ 10) Interest/Dividend income. Attach Forms 1099-INT, 1099-DIV, etc.
- Yes ___ No ___ Unsure ___ 11) Information on sale of stocks or real estate (Form 1099-B or 1099-S)
- Yes ___ No ___ Unsure ___ 12) Unemployment benefits. Attach Form 1099-G
- Yes ___ No ___ Unsure ___ 13) Pension distributions. Attach Form 1099-R.
- Yes ___ No ___ Unsure ___ 13a) Did you take an early distribution due to COVID-19?
- Yes ___ No ___ Unsure ___ 14) Social Security benefits. Attach Form SA-1099
- Yes ___ No ___ Unsure ___ 15) Information for self-employed business

Yes ___ No ___ Unsure ___ 16) Information on rental property

Yes ___ No ___ Unsure ___ 17) Other income (gambling, lottery, jury duty, etc)

Yes ___ No ___ Unsure ___ 18) Did you make a contribution to a retirement account for 2020?
[] IRA [] Roth IRA [] 401k [] Other Amount \$_____ for _____

Yes ___ No ___ Unsure ___ 19) Do you have an HSA or FSA? Attach form 5498-SA, 1099-SA and 12-31 bank statement for account if available.

Yes ___ No ___ Unsure ___ 19a) Did you have a high deductible plan for family ___ self only ___ for 12 months?

Yes ___ No ___ Unsure ___ 20) Did you have any debt from a mortgage, loan or credit card cancelled or forgiven by the lender. Attach Form 1099-C or 1099-A.

Yes ___ No ___ Unsure ___ 21) Have you had an Earned Income Credit disallowed in a previous year?

Yes ___ No ___ Unsure ___ 22) Did you pay any student loan interest. Attach Form 1098-E.

Yes ___ No ___ Unsure ___ 23) Did you buy or sell a home in 2020? Will need the closing statement that shows the sales price and all deductions allocated at the time of sale.

Yes ___ No ___ Unsure ___ 24) For child care expense provide caregiver, address, SS or EIN and amount paid. Also indicate for which child/children.

Yes ___ No ___ Unsure ___ 25) Did you make any estimated payments? List amounts and dates
IRS _____
MI _____

Yes ___ No ___ Unsure ___ 26) Health insurance. Attached 1095-A, 1095-B or 1095-C. Amount you paid for health insurance \$_____

Yes ___ No ___ Unsure ___ 27) Attach copy of 2020 winter and summer property taxes (even if not paid)

Yes ___ No ___ Unsure ___ 28) If you think you may be able to itemize please contact me for information required.

Additional information:

Please attach another sheet of paper if you have more information to add to these questions.

X _____
Taxpayer Signature

X _____
Spouse Signature (if married)

Dated _____