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Butler, Lavanceau & Sober, LLC
2021 Individual Income Tax Questionnaire

Please indicate your preferred means of communication:
Email__________________________ **OR** Phone Number _________________
Contact Person _________________________________

	Yes	No
Annual Verifications (Required)		
Did you receive a 3rd-round COVID-19 Stimulus payment after March 2021? If yes, provide IRS Letter 6475 with amount or enter amount:__________	☐	☐
Did you receive Advanced Child Tax Credit payments? If yes, provide IRS Letter 6419. (IRS sent these July thru December payments)	☐	☐
Taxpayer Occupation:________________ Spouse Occupation:________________		
Did your address change? If yes, provide new address & move date on final page.	☐	☐
Did you receive an Identity Protection PIN from the IRS? If yes, provide PIN letter.	☐	☐
Did you receive any other letters from the state or IRS? (provide a copy)	☐	☐
Confirm your bank information (if new account, contact us to provide required details):		
Bank Name: _________________________ Last 4 of Account#:________		
Do you own or have signing authority over a foreign bank, brokerage or trust account? If yes, provide details on final page.	☐	☐
If you are NOT itemizing, you may still deduct some cash donations. Provide the total of your cash donations: _______________		
Did you buy, sell, or exchange virtual currency (Bitcoin, etc.) If yes, provide details.	☐	☐
Did you make any gifts of more than $15,000 to any individual?	☐	☐
Did you purchase a qualified plug-in electric vehicle?	☐	☐
Did you make energy efficient improvements to your main home? If you have ever received a credit in the past, you are not eligible so check “no”.	☐	☐
Did you pay for child care? If yes, we will need the amount paid. For new caregivers, provide their name, address and tax id number.	☐	☐
	N/A	☐
Changes to Personal Information (if none, check box & skip to next section)		
Do you have a new dependent? We will contact you for additional info needed.	☐	☐
Should we remove a spouse or dependent? Contact us with any questions.	☐	☐
If you are divorced or separated with child(ren), **are you the custodial parent**?	☐	☐
Do you have dependents who must file a tax return? If they filed a return, forward a copy so we can verify that they did not claim themselves.	☐	☐
	N/A	☐
Self-Employed Credits & Deductions (if not self-employed, check box & skip to next section)		
Did you pay health insurance for your employees this year?	☐	☐
Did you pay for your own health insurance premiums? How much were your annual premiums: _____________	☐	☐
Are you eligible for health insurance coverage through your spouse's employer?	☐	☐
Did you use an area of your home solely and exclusively for business?	☐	☐
Did you pay any unincorporated entity $600 or more in cash or checks?	☐	☐
Did you issue 1099s to any of the entities in the above question?	☐	☐
Do you want us to compute your maximum SEP or Solo 401K contribution?	☐	☐
List the amount, if any, of SEP or Solo 401(k) retirement contributions made in 2021 or the 2021 tax year: _______________	☐	☐
Were you unable to perform your self-employed duties due to having or caring for someone with Covid-19? If so, provide the number of days: ________	☐	☐
Were you unable to perform your self-employed duties due caring for a dependent minor child whose school or daycare was closed due to Covid-19? If so, provide the number of days: _________	☐	☐

	Yes	No
	N/A	☐
Education & Education Savings Plans (if not applicable, check box & skip to next section)		
Did you, your spouse, and/or your child(ren) attend post-secondary school? If yes, provide Form 1098-T from college.	☐	☐
Did you make any withdrawals from an education savings or 529 Plan account? If yes, please provide Form 1099-Q.	☐	☐
Did you make contributions to **your resident state's** education savings or 529 plan? If yes, provide account number and amount.	☐	☐
Did you pay student loan interest? If yes, provide Form 1098-E.	☐	☐
	N/A	☐
Itemized Deduction Information (Check box & Skip to the next section if these deductions will total less than $25,100 if you are married, $12,550 if you are single, or $18,800 for Head of Household.)		
Did you pay real estate taxes on your primary and/or secondary home? If yes, provide details.	☐	☐
Did you pay mortgage interest on your primary and/or secondary home? If yes, provide Form 1098.	☐	☐
Did you refinance your home or take out a home equity loan? If so, provide the settlement statement.	☐	☐
Did you pay out-of-pocket medical expenses (including health insurance premiums) that may exceed 7.5% of your income? If yes, please provide a list and keep your receipts for your records.	☐	☐
Did you make cash charitable contributions? Provide letters from charities for donations over $250. Keep receipts or cancelled checks for all donations for your records.	☐	☐
Did you make non-cash charitable contributions? Provide lists of items **and their thrift-shop values**. For donated vehicles, provide Form 1098-C.	☐	☐
	N/A	☐
Retirement & Retirement Accounts (if not applicable, check box & skip to next section)		
Did you receive Social Security or Retirement income this year? For Social Security, provide Form 1099-SA. For other retirement plans, provide 1099-R.	☐	☐
Did you contribute to charity directly through an IRA? Provide details.	☐	☐
Did you make any contributions to retirement accounts that are not included in a W-2 from an employer? If so, provide details.	☐	☐
Do you want us to compute your maximum Regular or Roth IRA contribution?	☐	☐
	N/A	☐
Healthcare & Healthcare Accounts (if not applicable, check box & skip to next section)		
Did you obtain Marketplace health insurance through healthcare.gov? If yes, provide Form 1095-A	☐	☐
Did you or did you employer make contributions to your Health Savings Account (HSA)? If so, provide Form 5498-SA. (This does not apply to Flexible Savings Accounts, or FSAs, which must be spent during the year.)	☐	☐
Did you use funds from your Health Savings? If so, provide Form 1099-SA. (This does not apply to Flexible Savings Accounts.)	☐	☐
Are you a Maryland resident who purchased a **new** Long-Term Care policy this year? Please provide details. (Maryland credit is only for the first year of the policy.)	☐	☐
	N/A	☐
Child Tax Credit (CTC), Head of Household (HOH) or Earned Income Credit (EIC)(if no dependents, check box & skip to the next section)		
Have any of the above credits been denied in a previous year?	☐	☐
Can anyone else (other than your spouse) claim your child as a dependent?	☐	☐
Did your child live with you for over half the year?	☐	☐
Are you single and claiming Head of Household in 2021? Contact us with questions regarding eligibility.	☐	☐

	Y	N
Looking Forward to Next Year (more space below to comment.)		
Do you expect a large fluctuation in income, deductions or withholding next year? If so, please explain below.	☐	☐
Do you need quarterly estimated tax payment vouchers for 2022?	☐	☐
Will you be taking out a Required Minimum Distribution in 2022? If so, please provide your estimated amount: __________& % of Federal & state tax withholding. Federal: ______________ State: _____________	☐	☐
Will 2022 be the first year you will start collecting social security benefits? If so, please provide estimated date to start, monthly amount, and Federal withholding:____	☐	☐
If you are entitled to a refund, would you like to have some or all of it applied to your 2022 estimated tax liability?	☐	☐

2021 Quarterly Estimates (if not applicable, skip to next section)

List Amounts & Dates Actually Paid

Federal

1stQ Date _______ Amount _______
2ndQ Date _______ Amount _______
3rdQ Date _______ Amount _______
4thQ Date _______ Amount _______

Your State

1stQ Date _______ Amount _______
2ndQ Date _______ Amount _______
3rdQ Date _______ Amount _______
4thQ Date _______ Amount _______

Additional State, if any

1stQ Date _______ Amount _______
2ndQ Date _______ Amount _______
3rdQ Date _______ Amount _______
4thQ Date _______ Amount _______

Once we have completed your 2021 returns:

1. Choose a method (pick up, mail or e-copy)to receive **your copy** of your 2021 tax returns:________

2. Choose a method (pick up, mail or e-copy) to have your original documents returned:________

3. Please list any unusual tax events for this or the upcoming year:

4. For our scheduling purposes for **2022 returns**, please choose a week that you will be ready for return preparation: Week 6 - 2/3/23

Please print the form, sign below & send with your tax documents

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