

AM-PM Business Solutions, LLC

Mailing address:

2 Pine Cone Drive - #352103

Palm Coast, FL 32135

patricia@ampmbiz.com

Phone: (386) 463-2676 | Fax: (386) 445-3474

TAX RETURN INTERVIEW FORM

Name _____ Date _____

PERSONAL INFORMATION

YES NO

1. Did your marital status change? If yes, explain _____

2. Did you move? If so, please provide the dates lived in each state. _____

3. Please provide your current email and telephone numbers: _____

DEPENDENT INFORMATION

4. Do you have any dependents? _____

5. Did you have any changes to your dependents? (i.e., babies, deaths, etc.) _____

If so, please provide details _____

6. Do you have dependents who must file?
If yes, do you want us to prepare the return(s)? _____

7. Did you incur any adoption expenses? _____

8. Do you have children who are under the age 19 or a full time student
under age 24 with investment income greater than \$2,000?
If yes, do you want to include your child's income on your return? _____

9. Are any of your dependents not US citizens or residents? _____

10. Did you provide over half the support for another person? If so, please provide the name, date of birth and social security number: _____

11. Did your dependents attend college? If so, please provide a Form 1098-T along with a transcript from the school showing payments made. _____

IRA, PENSION AND EDUCATION SAVINGS PLANS

12. Did you receive any payments from a pension or profit-sharing plan? If so, please provide the Form 1099-R, _____

13. Did you receive a total distribution from an IRA or other qualified plan that was partially or totally rolled over into another IRA or qualified plan within 60 days of the distribution? _____

14. Did you contribute to a Roth IRA account? If so, please provide the amount and date of contribution: _____

15. A. Did you convert all or part of a regular IRA into a Roth IRA? _____

B. Did you roll over all or part of a qualified plan into a Roth IRA? _____

If you had an early distribution from an IRA or Roth IRA account, please provide the total basis and yearend value for that account.

16. Did you contribute to a 529 college savings plans? Please provide statement showing total amount of contribution. _____

ITEMS RELATED TO INCOME/LOSSES

17. Did you collect Social Security benefits? If so, please provide Form SSA-1099. _____

18. Have you done any online gambling, bitcoin purchases and sales or dealt in cryptocurrency? If so, please provide statements. _____

19. Did you collect unemployment? If so, please provide the Form 1099-G that can be downloaded from the Department of Labor website. _____

20. Did you invest money directly into any companies? If so, please provide the Schedule K1. _____

21. Were you granted or did you exercise any employer stocks? If so, please provide the yearend 1099 and Form 3921/3922. _____

ITEMS RELATED TO PRINCIPAL HOMES

- 22. Did you buy, sell, refinance or abandon a principal residence or other real property? (Please send copies of any closing statements from both the purchase and sale as well as any Forms 1099) _____
- 23. Did you have mortgages above the \$1,000,000/\$750,000 threshold? _____
If yes, please provide the Form 1098 as well as the balance of the mortgages.
Mortgage balance at beginning of year _____
Mortgage balance at the end of the year _____
- 24. Did you refinance your mortgage and use all the proceeds to improve the property? _____
- 25. Did you make energy efficient improvements to your home or purchase any energy savings property? _____
If yes, please provide details. _____

HEALTH INSURANCE

- 26. Did you contribute to or receive distributions from a Health Savings Account (HSA) or medical savings account? _____
If yes, please attach Form 1099-SA (Distributions from an HSA, Archer MSA, or Medicare+Choice MSA).
- 27. Did you pay long term care premiums? _____

FOREIGN BANK ACCOUNTS, FOREIGN ASSETS AND FOREIGN TAXES

- 28. Did you have any foreign income or pay any foreign taxes? _____
- 29. At any time, did you have an interest in or a signature or other authority over a bank account, or other financial account in a foreign country? _____
 - A. Did the aggregate value of all your foreign accounts exceed \$10,000 at any time? If so, you may be required to file a FinCEN Form 114. _____
 - B. If the account earned interest, please provide the total interest income to be reported on Schedule B. _____
- 30. Did you at any time, have an interest in or any authority over any foreign accounts or assets (i.e., stocks, bonds, mutual funds, partnership interests, etc.) held in foreign financial institutions that exceeded \$50,000 in value at any time during the year? _____

31. Did you sell/trade in cryptocurrency? _____

MISCELLANEOUS

32. Did you purchase an energy efficient vehicle? _____
If yes, please enter year, make, model and date purchased.

33. Did you donate a vehicle? If yes, please provide Form 1098C. _____

34. Did you or your spouse make gifts of over \$15000 to an individual? _____

35. Did you make gifts to a trust? _____

36. Did you pay any individual for domestic services? _____

37. Did you pay interest on a student loan for yourself, your spouse,
or your dependents? If so, please provide the Form 1098-E. _____

38. Did you, your spouse or your dependents attend post-secondary
school? If so, please provide the Form 1098-T. _____

39. Did a lender cancel any of your debt ? If so, please provide the
Form 1099-A or 1099-C. _____

40. If you paid alimony, please enter recipient's SSN _____, the amount of
alimony paid _____, and the official date of the divorce
_____. If you received alimony, please provide the amount _____
and the date of the divorce _____.

41. Do you or your spouse plan to retire this year? _____

MILEAGE

42. Did you use your personal vehicle for business purposes? _____
If so, please provide the total number of miles and the number
of business miles. Please also provide all auto related expenses.

Total Miles _____

Business Miles _____

ECONOMIC STIMULUS PAYMENTS

43. Did you receive an economic stimulus payment? Please indicate the amounts received:

ESTIMATED TAX PAYMENTS

44. Did you make any estimated tax payments? If so, please provide the amount and date paid:

| | 1 st Qtr | 2 nd Qtr | 3 rd Qtr | 4 th Qtr |
|---------|---------------------|---------------------|---------------------|---------------------|
| Federal | _____ | _____ | _____ | _____ |
| State | _____ | _____ | _____ | _____ |
| Local | _____ | _____ | _____ | _____ |