

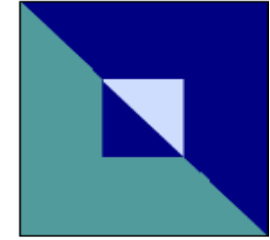
L.R. Bult & Associates, Ltd.

Certified Public Accountants

1467 Ring Road, Calumet City, IL 60409

Tel: (708) 862-9400 Fax: (708) 862-1099 www.lrbult.com

Client Questionnaire - 2021 Tax Return



The Internal Revenue Service (IRS) matches information returns/forms with amounts reported on tax returns. Accordingly, all information returns reflecting amounts reported to the IRS are also mailed or delivered to the taxpayers in an envelope clearly marked "IMPORTANT TAX DOCUMENTS ENCLOSED" and should be submitted with this organizer.

Forms such as:

- | | | | |
|--------------------------|---------------------------------------------|-------------------------------------|-------------------------------------------|
| W-2 (Wages) | 1099-R (Retirement) | 1099-MISC (Rents, etc.) | Charitable Contribution Statements |
| W-2G (Gambling Winnings) | 1099-INT(Interest) | 1099-G (Unemployment) | Other Tax information statements |
| 1098 - Mortgage Interest | 1099-DIV (Dividends) | 1099 (any other) | Advance Child Tax Credit Notices 6419 |
| 1098-T (Education) | 1099-B (Brokerage Sales) | 1095 (Health Insurance) | Annual Brokerage statements (and revised) |
| Schedule K-1 | Economic Impact Payment Notices 1444-C/6475 | HUD-1 (Real Estate Sales/Purchases) | |

FILL OUT SHADED AREAS ONLY IF YOU ARE A NEW CLIENT OR ANY INFORMATION HAS CHANGED FROM PREVIOUS YEAR:					
Name		Social Security	Date of Birth	Occupation	Disabled
Taxpayer					
Spouse					
Street Address			City	State	Zip
**Taxpayer Drivers License or State ID #		State: Date Issued: Expires:	E-mail Address:		Phone Number
					Alt Phone Number
**Spouse Drivers License or State ID #		State: Date Issued: Expires:	Email Address:		Phone Number
					Alt Phone Number
Dependents Name (First, Last)	Relationship	Social Security #		Date of Birth	Disabled

**Refunds may be delayed without ID information.

(CONTINUE ON BACK)

Please answer the following questions to determine your maximum deductions:

DEPENDENT INFORMATION	Please Circle
Did your marital status change during the year (by December 31, 2021)?	Yes No Not Sure
Were there any births, deaths, marriages, divorces, or adoptions in your immediate family?	Yes No Not Sure
Did you or your spouse retire or change jobs in 2021?	Yes No Not Sure
Were there any changes in dependents from the prior year?	Yes No Not Sure
<i>If yes, explain:</i>	
Did you have any children under the age of 19, or a full-time student under age 24 with unearned income of more than \$2,100?	Yes No Not Sure
Do you have dependents who must file a tax return?	Yes No Not Sure
Did you have any dependent care costs?	Yes No Not Sure
Did you receive Advance Child Tax Credits in 2021?	Yes No Not Sure
<i>If yes, please provide the monthly amounts and IRS notice 6419</i>	
HEALTH INSURANCE	Please Circle
Did you and all members of your household maintain minimum health care coverage for all months of 2021?	Yes No Not Sure
Did you or any member of your family enroll in health insurance coverage through the Health Insurance Marketplace at healthcare.gov under the Affordable Care Act? If yes, enclose Form 1095-A, Health Insurance Marketplace Statement.	Yes No Not Sure
Do you currently have a Health Savings Account?	Yes No Not Sure
INCOME INFORMATION	Please Circle
Did you receive unemployment?	Yes No Not Sure
Did you have gambling winnings or losses this past year?	Yes No Not Sure
Did you have any foreign income or pay any foreign taxes during the year, directly or indirectly?	Yes No Not Sure
Did you receive any disability income during the year?	Yes No Not Sure
Did you receive economic impact payments in March or later of 2021 (related to COVID-19)?	Yes No Not Sure
<i>If yes, please provide the amount EIP #3 from IRS Notice 6475</i>	
Did you receive, sell, send, exchange, or acquire any Virtual Currency?	Yes No Not Sure
Did you receive any other income?	Yes No Not Sure
PURCHASES, SALES, DEBT INFORMATION	Please Circle
Did you sell, exchange, or purchase any real estate during the year?	Yes No Not Sure
Did you acquire or dispose of any stock during the year?	Yes No Not Sure
Did you sell an existing business, rental, or other property this year?	Yes No Not Sure
Did you have any debts canceled or forgiven this year, such as a home mortgage, credit cards, or student loan(s)?	Yes No Not Sure
Did you purchase a qualified plug-in electric drive vehicle or qualified fuel cell vehicle this year?	Yes No Not Sure
Did you go through bankruptcy proceedings?	Yes No Not Sure

ITEMIZED DEDUCTION INFORMATION	Please Circle
---------------------------------------	----------------------

- | | |
|---------------------------------------------------------------------------------------------------------|-----------------|
| Did you make any cash charitable contributions?
<i>If yes, please provide the amount</i> _____ | Yes No Not Sure |
| Did you make any noncash charitable contributions (clothes, furniture, etc.)? | Yes No Not Sure |
| Did you make any major purchases during the year (cars, boats, etc.)? | Yes No Not Sure |
| Did you pay property tax this year? | Yes No Not Sure |
| Did you pay mortgage interest? | Yes No Not Sure |
| Did you incur expenses as a K-12 educator? | Yes No Not Sure |

MISCELLANEOUS INFORMATION	Please Circle
----------------------------------	----------------------

- | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| Did you give a gift of more than \$15,000 to one or more people? | Yes No Not Sure |
| Did you install any energy efficient improvements to your main residence (new construction and rentals do not apply) such as biomass stoves; generators; or fuel cells; or energy efficient improvements such as exterior windows, doors, and skylights; roofs; insulation; air source heat pumps; gas; propane or oil furnaces and fans; central air conditioners; or tankless water heaters? | Yes No Not Sure |
| Do you have a foreign bank account, trust, or business? | Yes No Not Sure |
| Did you have a financial interest in foreign financial assets? | Yes No Not Sure |
| Do you owe back child support or any other debts that could affect your return? | Yes No Not Sure |
| Do you have any unpaid sales/use tax for tax year 2021 (such as from goods you purchased online or from a catalog)? | Yes No Not Sure |
| Did you make any Federal and/or State estimated tax payments for the 2021 tax year?
<i>If yes, please provide the payment dates & amounts</i> _____ | Yes No Not Sure |
| Have you set up an online account at IRS.gov? | Yes No Not Sure |

EDUCATION INFORMATION	Please Circle
------------------------------	----------------------

- | | |
|------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| Did you have any educational expenses during the year on behalf of yourself, spouse, or a dependent(s)? | Yes No Not Sure |
| Did you pay interest on a student loan for yourself, your spouse, or your dependent(s) during the year? | Yes No Not Sure |
| Did you make a contribution to or receive a distribution from an Education Savings Account or Qualified Tuition Program during the year? | Yes No Not Sure |
| Did you cash any U.S Savings Bonds Series EE and/or I? | Yes No Not Sure |

DIRECT DEPOSIT OR REFUND

Please Circle

Would you like to have your refund(s) directly deposited into your account? Yes No Not Sure

FILL OUT ONLY IF YOU ARE A NEW CLIENT OR ANY INFORMATION HAS CHANGED FROM PREVIOUS YEAR:

ACCOUNT:

Name of Financial Institution- _____

Name on Account- _____

Financial Institution Routing Transit Number- _____

Your Account Number- _____

Type of Account- Checking Traditional Savings Other *Please Specify*

We will prepare your 2021 Federal and State income tax returns using information you provide to us. We may ask for clarification of some items, but will not audit or otherwise verify the data to discover errors or omissions, should any exist. We will perform accounting services only as needed to prepare your tax returns and will not verify or audit your records. In instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on your behalf, the alternative you select. The following Questionnaire will help organize important information in order to facilitate an efficient preparation of your return.

To the best of my knowledge the information enclosed in this client tax organizer is correct and includes all income, deductions, and other information necessary for the preparation of this year's tax returns for which I have adequate records.

Taxpayer

Date

Spouse

Date