

INDIVIDUAL INCOME TAX QUESTIONNAIRE

Taxpayer #1 _____ Soc. Sec. # _____ Occupation _____

Taxpayer #2 _____ Soc. Sec. # _____ Occupation _____

Street _____ Home Phone _____

City, State _____ Zip _____ Bus. Phone _____

Date of Birth: Taxpayer #1 _____ Taxpayer #2 _____ Email Address _____
Please * your preferred contact

Was there a change in your address, marital status, or dependents during the year?
_____ Yes _____ No Please give details.

In which format would you like your copy of your 2017 tax return?



CD _____ Print _____ Email _____

If you are entitled to a refund from either the state or the federal government and would like it to be directly deposited in your bank account, please provide the following:

Bank Name _____

Routing Number _____ Account Number _____

Type of Account: Checking _____ or Savings _____

Would you like IRS to be able to discuss your return with us? _____ Yes _____ No

Names of dependents that live with you. (If you have dependent children who do not live with you, please highlight their names. We may need to attach a signed 8332 form to ensure a proper deduction.)

First, Initial, Last	Date of Birth	Social Security #	Relation-ship	# of months @ home in 2017
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Did both Taxpayer #1 and Taxpayer #2 as well as all eligible dependents have health insurance coverage for all months of 2017 that met IRS regulations of minimum essential coverage? _____ Yes
_____ No

If not please let us know what months, if any, your family was covered by health coverage for 2017.

Jan. Feb. Mar. April May June July Aug. Sept. Oct. Nov. Dec.
____ _

If you received either 1095-A, 1095-B or 1095-C please include.

Do you wish to purchase a park pass for entry into Maine State Parks?

Individual pass (\$55) _____ Vehicle pass (\$105) _____

Do you wish to contribute to any of the following?

Companion Animal Sterilization Fund Amt. _____

Maine Children's Trust Amt. _____

Endangered & Nongame Wildlife Fund

"Chickadee Check-off" Amt. _____

Maine Military Family Relief Fund Amt. _____

Maine Veterans' Memorial Fund Amt. _____

Maine Public Library Fund Amt. _____

Did you make a gift in excess of \$14,000 during 2017 to any individual? ___ Yes ___ No

If you made purchases from out of state retailers who do not collect sales tax, please give us the amount of total purchases. _____

Did you make payments for child care for a dependent(s) during 2017? Amt. _____ In order to claim the credit, and/or if you received employer provided day care benefits we need the following on the person/organization that provided care:

Name _____ Address _____

Soc. Sec./ I.D. number _____ Child Name _____ Amt. _____

Did you pay any expenses in relation to the adoption of a child? If so, how much? _____ Was this child a special needs child? _____

Do you expect any material change from 2017 in your income for 2018? If so, how much?

Increase _____ Decrease _____

Did you receive any unemployment compensation? Amt. _____ Attach Form 1099-G.

Did you receive a Form SSA-1099 for social security benefits? Amount paid _____ Amount repaid _____ Attach Form SSA-1099.

WAGES

PLEASE attach W-2s. PLEASE GIVE US ALL COPIES OF YOUR W-2.

Taxpayer _____ Spouse _____

BUSINESS EXPENSES

If you take auto expenses, PLEASE fill in the following: Total number of months you drove the car in 2017 _____; total mileage for the car in 2017 _____; business mileage 1/1/2017-12/31/2017 _____ date this car was put in service _____ average daily round trip commuting distance _____; do you (or your spouse) have another vehicle available for personal use? ___ Yes ___ No Do you have evidence to support your deduction? ___ Yes ___ No Is this evidence written? ___ Yes ___ No

Estimated Tax Payments Paid: (Do not include below carryforwards on your 2016 tax return. Only include amounts actually paid)

	Federal		State	
	<u>Amount Paid</u>	<u>Date Paid</u>	<u>Amount Paid</u>	<u>Date Paid</u>
4 th Quarter 2016	_____	_____	_____	_____
1 st Quarter 2017	_____	_____	_____	_____
2 nd Quarter 2017	_____	_____	_____	_____
3 rd Quarter 2017	_____	_____	_____	_____
4 th Quarter 2017	_____	_____	_____	_____

Did you receive state income tax refunds in 2017? Amount_____Please attach Form 1099-G.

Did you receive any lottery or gambling winnings?_____ If you received Form W-2G, please attach it.

INTEREST INCOME

PLEASE attach copies of Form 1099, DO NOT COPY NUMBERS FROM THEM. Also remember that we must report tax-exempt interest.

Indicate the amount of interest received, if any, from seller-financed mortgages_____the name, address and social security number of the person paying the interest_____.

Did you have financial account(s) in a foreign country? Was the combined value more than \$10,000? _____ If yes, please list the country, the bank, the address, the account number(s) and the approximate maximum value(s).

DIVIDEND INCOME

PLEASE attach copies of Form 1099, DO NOT COPY NUMBERS FROM THEM. Capital gains distributions and nontaxable distributions must also be reported.

SECURITY TRANSACTIONS

No. of Shares	Company	Sales Amt.* / Date	Cost Amt.* / Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*Use the amount reported on your 1099-B.

PLEASE SEND US THE YEAR END STATEMENT FROM YOUR BROKER AND FORM 1099-B.

Did any stock you own become worthless during 2017? Yes_____ Please describe.

Did you make contributions to any of the following? If so indicate amount.

	Taxpayer	Spouse
SEP	Amt. _____	_____
Traditional IRA	Amt. _____	_____
Roth IRA	Amt. _____	_____
Simple Plan	Amt. _____	_____

Did you pay any student loan interest for yourself or a dependent? _____amt. Please attach Form 1098-E.

Did you pay education expenses for yourself or a dependent? _____amt. If you received a 1098-T please include.

Did you pay premiums for long-term care insurance? (This is not health care insurance.) _____

Did you receive any pension or annuity payments this year? Please attach Form 1099-R.

If you received any rental income, please submit details pertaining to address of the property, expenses, income, and cost of property.

Did you receive any income or loss from an estate or trust? Please attach the Form K-1 that was provided to you.

Did you pay alimony? Indicate amount _____ and to whom: Name _____ Social Security Number _____.

Did you receive alimony? Indicate amount _____.

Did you make payments to a health savings account? (This is not a flex account.) What was the amount? _____ Please attach form 5498-SA.

Did you take distributions from a health savings account? What was the amount? _____

Did you make any energy improvements to your house during 2017? If so what were they and what was the cost of the improvements?

Why is the person who invests all your money called a broker?

Did you obtain an associate's or bachelor's degree after 2007 from an accredited Maine college or university? Were you a Maine resident during college and continue to be a resident now? Please include education loan payment information.

If you were an educator did you spend up to \$250 on qualified expenses used in the classroom?
Amt _____

ITEMIZED DEDUCTIONS

Medical Expense: Total medical and dental expenses _____

Insurance reimbursement for above _____

Taxes: State income taxes _____

Real estate taxes _____

****Excise taxes (don't include registration fee) _____

Interest Expense: Home mortgage paid to financial institution _____

Mortgage paid to individual (give name, address & social security number) _____

Points paid separately to buy or improve home _____

Investment interest _____

Contributions: Cash or check _____

Noncash contributions (attach required statement) _____

Moving Expenses: Deductible moving expenses are limited to the cost of transporting household goods and personal effects, and travel (including lodging but not meals) to the new residence.

Miscellaneous deductions:

Union and professional dues _____

Tax return preparation _____

Educational expenses _____

Unreimbursed employee expenses (please itemize) _____

Safe deposit box fee _____

Investment advisory fees _____