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To Our Clients:

This questionnaire has been designed to assist you in compiling the necessary information to prepare your 2020 income tax returns. The following pages contain many of the common income tax items, expenses, deductions and credits as well as questions that determine the proper handling of these items. Please indicate the amounts for 2020 in the designated areas; you may add further information as appropriate.

PLEASE RETURN THIS QUESTIONNAIRE
TO THE ABOVE ADDRESS BY:

FEBRUARY 28, 2021

It is essential that we receive your information timely to enable us to process the return in time for you to file by ***APRIL 15, 2021*** .

* *

To comply with current Internal Revenue Service regulations governing the preparers of income tax returns, we request you read and sign the following statement:

"I (We) have submitted to you all of the required information to be used in the preparation of my (our) 2020 personal income tax returns and I (we) have the necessary documentation to substantiate the income and deductions claimed, including all record keeping required for travel, entertainment, charitable contributions and auto expenses, if applicable. I (We) understand you will not audit or otherwise verify the data submitted. I (We) also understand the fee charged is based upon the amount of time required at standard rates for tax work and is due and payable upon presentation of your invoice."

SIGNATURE ______________________________ DATE ________________

SIGNATURE ______________________________ DATE ________________

<<<<<Please visit our web site at: WWW.GSCO-CPAS.COM>>>>>

2020 INCOME TAX INFORMATION 2020

	Taxpayer (You)	Taxpayer (Spouse)
Name		
Social Security Number		
Occupation		
Date of Birth		
Home Address	**Street:**	
"X" if address has changed ( )	**Town:** **State:** **Zip Code:**	
Telephone Number	**Home: ( )**	**Cell: ( )**
"X" if number has changed ( )	**Business: ( )**	**Fax: ( )**
Driver's License: State and Number		
Date of Issue and Date of Expiration		
NYS Driver's License Document #		
Current e-mail address		

CHILDREN AND OTHER DEPENDENTS

Name (First and Last)	Social Security Number	Date of Birth	Relationship	Gross Income	College Student?	College 529 Plan?

NOTE: For Child Care Credit, please provide Name, Address, Identification Number and amount paid to each provider (if applicable)

WAGES AND SALARIES

<<< PLEASE ATTACH *ALL* COPIES OF *ALL* W-2 FORMS >>>

INTEREST AND DIVIDEND INCOME

ATTACH *ALL* FORMS 1099 you received from Banks, Credit Union, Notes, U.S. Savings Bonds, Private Mortgages, investments in Corporations, etc. List any interest or dividends for which a Form 1099 was not received. *(For seller financed mortgages on personal residences, provide the name, address and Social Security Number of the payor.)*

ESTIMATED INCOME TAX AND SOCIAL SECURITY DATA

		FEDERAL		STATE ________		CITY___________	
	Due Date	Date Paid Mo/Day/Yr	Amount	Date Paid Mo/Day/Yr	Amount	Date Paid Mo/Day/Yr	Amount
Credit from 2019			$		$		$
1st installment	6/15/2020		$		$		$
2nd installment	7/15/2020		$		$		$
3rd installment	9/15/2020		$		$		$
4th installment	1/15/2021		$		$		$
Totals			$		$		$

Social Security: Total Benefits received for 2020 **(Attach Form(s) 1099-SSA)**

You:	$
Spouse:	$

CAPITAL GAINS AND LOSSES

<<< Attach Forms 1099-B received and enter sales of Securities (STOCK, BONDS, etc.) >>>

HWJ*	Kind of property and description (Example: 100 shares of "Z" Co.)	Date ACQUIRED (Mo/Day/Yr)	Date SOLD (Mo/Day/Yr)	PURCHASE Price	SALES Price	GAIN or (LOSS)

****Enter H (husband), W (wife), or J (joint) for name in which ownership of asset is held.***

INDIVIDUAL RETIREMENT ACCOUNTS - IRA's **

	YOU	SPOUSE
Traditional Deductible IRA - amount contributed	$	$
Non Deductible IRA - amount contributed	$	$
Roth IRA - amount contributed	$	$

*****Note: IRA contributions for 2020 must be made no later than April 15, 2021***

OTHER INFORMATION

DO YOU HAVE ANY OF THE FOLLOWING? If Yes, please furnish details on page 4

	YES	NO
Do you have medical insurance? ***		
IRS Stimulus check (indicate amount) $ __________		
Unpaid sales tax on out of state purchases		
Unpaid sales tax on internet purchases		
Child care payments for children under age 13		
Conversion or reconversion of traditional IRA		
Long Term Care per diem over $380 per day		
Health Savings Account (HSA)		
Alimony *paid* (indicate amount) $________		
Alimony *received* (indicate amount) $_______		
Purchase or lease of a new car, SUV or boat *(1)*		
Solar energy improvements to residence *(1)*		
Hurricane, Flood, Casualty or Theft loss *(2)*		
Cryptocurrency/Virtual Currency transactions *(2)*		
Foreign bank/brokerage account over $10,000 *(2)*		
Create a foreign trust *(2)*		
Purchase or Sale of principal residence *(3)*		
Mortgage Refinance *(3)*		

	YES	NO
College Sec. 529 plan contributions		
Grade K-12 Teacher Expenses		
Gifts of more than $15,000		
Business use of personal auto		
Rent or Royalty income		
Partnership K-1(s) *(4)*		
"S" Corporation K-1(s) *(4)*		
Estate or Trust K-1(s) *(4)*		
Jury duty income		
Directors fees or Commissions		
Unemployment insurance income *(5)*		
Gambling or Lottery winnings *(5)*		
IRS/State tax notices/adjustments		
Operation of a farm		
Credit card debt or loan forgiveness		
Adoption related expenses		
NYS Volunteer EMT or Firefighter		
NYC residence or apartment		

******Attach forms 1095-A, 1095-B or 1095-C if received - See important note on page 4***

(1) Attach copy of bill of sale (2) Attach details (3) Attach closing statements (4) Attach K-1's (5) Attach Forms 1099-G

DIRECT DEPOSIT OF REFUND

If you would like direct deposit of your refund, check here and include a voided check from your checking account. ☐

Note: ALL tax returns must be electronically filed as required by federal, state and local law.

2020 DEDUCTIONS 2020

MEDICAL EXPENSES	
Prescription drugs-Total only	
Health insurance (excluding Medicare)	
Long term health care premiums-taxpayer	
Long term health care premiums-spouse	
Qualified long term care services	
Lodging (but not meals)	
Doctors and Dentists	
Hospitals	
Laboratory fees	
Eyeglasses and contact lenses	
Hearing aids	
X-Rays	
Nurses	
Other (List):	
Medical travel:	
__________ miles at 17 cents per mile	

Insurance reimbursements received	$

TAXES	
Real estate taxes	
Real estate tax refunds and rebates	( )
Personal Property Tax	
Sales taxes paid on a New Vehicle or Boat	
Other (list):	

INTEREST EXPENSE	
Home mortgages*	
Home equity loans	
Points paid on mortgage refinancing	
Mortgage Insurance (PMI) [Post 2006 Purchases]	
Student Loan interest (from Form 1098-E)	
Investment interest paid (list):	

**** If seller financed mortgage, you must include NAME, ADDRESS and SOCIAL SECURITY NUMBER of the payee***

CHARITABLE CONTRIBUTIONS		
Name of Charity	***Cash***	***Non-Cash *****
Churches, Temples and Schools		
American Cancer Society		
American Red Cross		
March of Dimes		
Salvation Army		
United Way		
Other (List):		
Charitable travel:		
_________ miles at 14 cents per mile		$

*****If you made contributions of property (other than cash), attach a description, including date you gave it, the original cost, and how you figured its value on page 4.***

MISCELLANEOUS DEDUCTIONS	
Union and professional dues (state use)***	
Tax preparation fee (state use)***	
Professional subscriptions (state use)***	
Safe deposit box (state use)***	
Uniforms and protective clothing (state use)***	
Work tools (state use)***	
Job search expense (state use)***	
IRA maintenance fees (if paid separately) (state use)***	
Gambling losses (to extent of winnings)	
Other (list):	

******These expenses are no longer deductible for Federal purposes but some states still allow deduction for these items***

COLLEGE TUITION PAID		
Name of Student:	**Year in College**	**Amount******

*******Tuition and fees only - Attach form 1098-T if received or provide name and address of college(s)***

2020 OTHER INFORMATION 2020

An important note concerning the Affordable Care Act and Medical Insurance:

The Affordable Care Act ("ACA") federal penalty for not having medical insurance has been repealed. If you do have medical insurance, please make sure you have indicated this on page 2 and attach all Forms 1095-A, 1095-B or 1095-C received. Note that Massachusetts, New Jersey, Vermont, California, Rhode Island and Washington DC still have an individual mandate at the state level.

An important note concerning The Tax Cuts and Jobs Act (TCJA) of 2017:

The Tax Cuts and Jobs Act of 2017 made substantial changes to the tax laws including elimination of personal exemptions, increase in standard deduction, limitation on the amount of state & local income tax and real estate tax deductions, decrease in deductible mortage interest, elimination of home equity interest deduction and elimination of miscellanous deductions such as work cloths & shoes, investment fees and expenses, unreimbused employee business and travel expenses, union dues, and safe deposit box rental. In an effort to reduce the effect of some of these changes, states such as New York have passed laws allowing some of these deductions to continue to be allowed for that particular state. Even though IRS limits or no longer allows these deductions, please provide this information on page 3 in case your state still allows deductions for these items.

Please list below any other information you wish to tell us about: