



B. Johnson & Assoc., Ltd.
CERTIFIED PUBLIC ACCOUNTANTS

**Individual
Income Tax
Questionnaire**

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416 S 6th St, Ste 200
Brainerd, MN 56401

Phone - (218) 829-3501

Credits: see page 4 for required documentation

I (We) assure you that the information provided in this form, along with any other information sheets provided for preparation of my (our) income tax returns is correct to the best of my (our) knowledge and belief. I (We) understand that payment for your services is due upon receipt of my (our) tax returns.

_____ Signature	_____ Signature	_____ Date
<u>Taxpayer(s)</u>	<u>Social Security #</u>	<u>Occupation</u>
<u>Date of Birth</u>		
Name(s) _____	- -	_____
_____	- -	_____
Address _____	_____	_____
Street	City	State
		Zip
If you have any refunds and you would like them to be direct deposited to your account, please provide :		Home Phone _____
		Work Phone _____
		Cell Phone _____
		Cell Phone _____
		Fax _____
		E-Mail _____
		E-Mail _____
_____ Voided check (for checking account)		
_____ Deposit Slip (for savings account)		
_____ Same as your 2024 tax return		

Did you or do you plan to make IRA contributions for this year?				Yes ___ No ___
Contributor	Type of Account (Traditional, Roth, Educ.)	Dates	Amounts	
_____	_____	_____	_____	
_____	_____	_____	_____	

Did you have an interest in or a signature authority over a financial account in a foreign country? Yes ___ No ___
If Yes : Name of country _____

Did you pay \$2,800 or more to any one household employee this year? Yes ___ No ___

Do you want to designate \$3 to the federal presidential election campaign fund?	Yes ___ No ___	Yes ___ No ___
Do you want to designate \$5 to the state elections campaign fund?	Yes ___ No ___	Yes ___ No ___
Your choice(s) of political party? _____		

Did you have a theft or casualty loss over 10% of your gross income after insurance proceeds? Yes ___ No ___
If yes, please explain : _____

Did you make gifts of more than \$19,000 to any one individual during the year? Yes ___ No ___
If yes, please explain : _____

Did you receive correspondence from the State or the IRS during the year? Yes ___ No ___
If yes, please explain : _____

If you want to donate to the Minnesota Nongame Wildlife fund, fill in the amount : Income Tax Return \$ _____
Property Tax Return \$ _____

Do you foresee any significant changes to your financial situation that will affect your tax liability for 2026? If so, please explain briefly : _____

Property Tax Refund: If you want us to prepare your Minnesota renter or homeowner property tax refund return Form M-1PR, you need to provide us with your 2025 Certificate of Rent Paid or your 2026 Statement of Property Taxes Due. There is an additional fee for this service.

We will notify you by mail when your tax returns are completed. Please let us know if your mailing address is different from the address above. _____

Taxes Paid**Auto Licenses : List separately**

(Describe) :

_____	_____
_____	_____
_____	_____

Real Estate Taxes :

Home.....	_____
M-1PR Refund Received.....	()
Second Home/Cabin.....	_____
Land.....	_____

Sales Tax - on these major purchases: vehicle, boat, home building materials, etc.

_____	_____
_____	_____

_____	_____
_____	_____

Income Taxes :

Date Paid

Federal

State

Prior Years Refunds Received.....

Prior Years Additional Payments.....

Estimated Tax Payments:

Prior Year 4th Installment Due January 15, 2025.....	_____	_____	_____
1st Installment Due April 15, 2025.....	_____	_____	_____
2nd Installment Due June 15, 2025.....	_____	_____	_____
3rd Installment Due September 15, 2025.....	_____	_____	_____
4th Installment Due January 15, 2026.....	_____	_____	_____

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other Deductions

Alimony Paid.....

Name and Social Security # of Recipient

Tax Preparation Fee.....

Safe Deposit Box.....

Investment Fees and Expenses.....

IRA Maintenance Fees.....

Adoption Expenses.....

Explain _____

Moving Expenses (military active duty).....

Explain _____

Mileage:

_____ miles @ \$.21

Work or Job Related Expenses :

Union and Professional Dues.....

Work Supplies.....

Tools and Safety Equipment.....

Required Uniforms and Laundry.....

Trade Journals and Subscriptions.....

Your Continuing Education :

(Enter information for your dependents education on the dependent questionnaire)

Tuition and Fees.....

Books and Supplies.....

Travel or Miles @ \$.70.....

Job Hunting Expenses.....

Other Items (Describe) :

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

If you have expenses for business, work, or farm use of your personal automobile, fill in the required information on the separate information questionnaires.

Please bring the following documents with your information:**W-2 Forms for Wages and Gambling Winnings.****1099 Forms for Interest, Dividends, Stock Transactions, Real Estate Sales, and Miscellaneous Income.****1099 Forms for Pension and IRA Distributions.****1099 Forms for Unemployment Compensation Received.****K-1 Forms for Partnerships, S-Corporations, Estates and Trusts.****1098 Forms for Interest Paid on Mortgages.****1098-E Forms for Interest Paid on Student Loans.****1098-T Forms for Tuition Payments.****1099-C Forms for Cancellation of Debt.****SSA-1099 Forms for Social Security Benefits Received.****RRB-1099 Forms for Railroad Retirement Benefits received.****Real Estate Sales / Purchases Closing Statements.****Contract For Deed - Name, Address, and Social Security # Information.****Refinancing Loan Closing Statements.****Any Tax Notices from the Internal Revenue Service or Minnesota****Department of Revenue.****Credits:****Mortgage Interest Credit:**

Mortgage Interest Certificate.

Child & Dependent Care Credit:

Qualifying Expenses.

Education Credits:

Forms 1098-T and Cost of Books and Supplies.

Solar, Wind & Geothermal Energy:

Receipts for Qualified Property.

Adoption Credit:

Receipts for Qualified Expenses.

Energy Credits:

Receipts for Energy Efficient Costs.

Payment for tax preparation is expected at the time your returns are filed. All unpaid balances are subject to a 1 1/2% per month (18% annual rate) service charge.

Wage and Salary Income

(Attach All W-2's Received)

Employer	Gross Wages (Box 1)	Federal Tax	State Tax

Retirement Income

(Attach All 1099's Received)

Payor	Gross Distribution	Taxable Distribution	Federal Tax	State Tax
Social Security				
Social Security				
Railroad Retirement				
IRA's.....				
Pensions.....				

Interest Income

(Attach All 1099's Received Including All Tax-Exempt Interest Received)

(If Interest is Received on a Contract For Deed, The Payor's Name, Address and Social Security # are Required)

Payor	Amount	Payor	Amount

Dividend Income

(Attach All 1099's Received Including All Tax-Exempt Dividends)

Payor	Dividends	Qualified Dividends	Capital Gains	Tax Exempt	Foreign Tax

Miscellaneous Income

(Attach Relevant Forms)

Unemployment Compensation.....		Estates or Trusts.....	
Alimony.....		Royalties.....	
VA Pension.....		Welfare Assistance.....	
VA Disability.....		Partnership or S-Corp (Provide K-1).....	
Tips and Gratuities.....		Lawsuit Recoveries.....	
Directors Fees.....		Cancellation of Debt.....	
Prizes and Awards.....		Other (Describe) :	
Workers' Compensation.....			

Security and Real Estate Sales

(Foreclosures, Abandonments, Ponzi Scheme Losses and Other Property Transactions Need to be Listed Here)

Description	Date Acquired	Date Sold	Sales Price	Cost	Expenses

Medical and Dental Expenses

Medical Insurance.....	_____	Ambulance.....	_____
Medicare Insurance.....	_____	Medical Transportation:	_____
Long Term Care Insurance.....Taxpayer	_____	Mileage _____miles @ \$.21	_____
Spouse	_____		
Name of Company _____			
Policy # (s): _____		Parking, Bus, Taxi.....	_____
Prescription Drugs.....	_____	Motels.....	_____
Glasses and Contacts.....	_____	Other Expenses (Describe) :	_____
Hearing Aids.....	_____		_____
Doctors, Dentists, Hospitals and Clinics :	_____		_____
_____	_____	Less HSA Reimbursements	_____
_____	_____	included above.....	(_____)
_____	_____	Less Insurance Reimbursements	_____
HSA Contributions.....	_____	included above.....	(_____)

Interest Paid**Deductible Home Mortgage:**

Interest Paid to Banks and Other Financial Institutions :

List All Mortgages and Equity Loans

(Attach All 1098 Forms Received)

Deductible Mortgage Insurance:

(Only Applies to New Mortgages)

Points Paid on Purchase or Refinance of Mortgage Loans :

(Include Copy of Settlement Statement)

Interest Paid to Individuals on a Contract For Deed : (Payee's Name, Address and Social Security # must be included; failure to provide is subject to a fine)

Name.....

Address.....

Social Security #.....

Investment Interest :

Investment Loan Relates to :

Brokerage Margin Account:

Other (Describe)

Student Loan Interest :

Student's Name.....

Interest Paid (Attach 1098-E Forms).....

Contributions

Only amounts given to qualified charitable organizations qualify. Examples of NON-DEDUCTIBLE amounts are to political organizations and candidates, dues and fees paid to lodges and fraternal orders, raffles, bingo, and pull tabs.

Please list all of your qualified charitable gifts here as you may receive a deduction even if you do not itemize deductions.**Cash Contributions :**

Religious Organizations.....

Schools.....

United Way.....

Boy Scouts / Girl Scouts.....

Other (Please list) :

Volunteer Mileage : _____miles @\$.14**Non-Cash Contributions:**

1) Complete the worksheet included with your organizer.

2) You must have a receipt stating the amount received by the organization from the sale of a donated vehicle, boat, etc.

If TOTAL Non-Cash Contributions are:**Less than \$250: Receipt not required if impractical.**

Document donations with written description.

More than \$250: Receipts required.**The IRS requires proof for ALL cash contributions to qualified charitable organizations.
(receipt, cancelled check, bank statement, credit card statement, etc.)**