

REQUIRED CONTACT INFORMATION

- Has your address changed? NO YES _____
- Has your phone number changed? NO YES _____
- Email address for KBA correspondence _____
- Which method would you like to receive your copy of your Tax Return? ELECTRONIC PAPER
- Has your bank account changed? NO YES (provide a voided check)
- Would you like any refunds you receive to be direct deposited? NO YES
- Would you like information on paying tax balances due and/or estimated tax payments via direct debit? NO YES

PLEASE CHECK THE APPROPRIATE BOX. IF YES, PLEASE PROVIDE DOCUMENTATION.

YES NO

Personal and Dependent Information

- Did your marital status change during the year?
- Are you or your spouse legally blind or disabled?
- Were there any changes in dependents from the prior year?
- Do you have any children under 19, or students under 24, with investment income exceeding \$2,100?
- Do you have dependents who must file a tax return?
- Did you provide over half of the support for any person, other than children under 19 or students under 24?
- Did you pay for dependent care, including preschool or after school care, while you worked or looked for work?

Health Care Information

- Did you, your spouse, and dependents have qualified health care coverage for every month of 2017?
- Did you enroll in health care coverage through MNSure? (provide Form 1095-A)
- Did you pay for health insurance or contribute to an HSA with after-tax dollars?
- Did you pay long-term care (nursing home) premiums? (provide policy name, number, and amount)

Purchases, Sales and Debt Information

- Did you sell, exchange, or purchase any real estate or rental property? (provide closing statement)
- Did you refinance a mortgage or take out a home equity loan? (provide closing statement)
- Did you have any debt forgiven, or did you foreclose or abandon property during the year?
- Did you pay sales tax on any major purchases during the year (cars, boats, etc.)?
- Did you pay any student loan interest this year? (provide Form 1098-E)

Itemized Deduction Information

- Do you have evidence to substantiate charitable cash contributions?
- Did you make any non-cash charitable contributions? (provide details)
- Did you receive any expense reimbursements from your employer, including per diem and sub pay?
- Did you have any unreimbursed employee expenses, including unreimbursed mileage?
- Did you have any expenses related to seeking a new job during the year?
- Did you renew your vehicle tabs? (provide documentation)
- Did you pay mortgage interest? (provide statements)
- Did you pay real estate taxes? (provide statements)

Miscellaneous Information

- Did you receive active duty military pay or pension payments?
- Are you a retired public safety officer who elected to exclude health or long-term care insurance premiums?
- Did you utilize an area of your home exclusively for business purposes?
- Did you pay rent for your residence? (provide Certificate of Rent Paid)
- Did you pay for college tuition and books? (provide Form 1098-T, student name, year in school, and amounts)
- Did you pay any K-12 education expenses? (provide student name, year in school, and amounts)
- Did you make any estimated payments? (provide amounts and dates of payments)
- Did you make any individual contributions to a Traditional or Roth IRA?
Self: Traditional IRA \$_____ Roth IRA \$_____ Spouse: Traditional IRA \$_____ Roth IRA \$_____
- Did you have financial interest in or signature authority over a foreign bank account?
- Did you receive correspondence from the State or the IRS? (provide documentation)
- Do you want to designate \$3 to the Presidential Election Campaign Fund?
Checking yes will not change your tax or reduce your refund.
- Do you want to allocate \$5 to the State Elections Campaign Fund?
Which party? _____ Checking yes will not change your tax or reduce your refund.
- Do you want to contribute to the Minnesota Nongame Wildlife Fund? If yes, amount \$_____
Checking yes will change your tax or reduce your refund. If checked yes an amount must be indicated above.