

LOAN CENTRAL

2021 Tax Preparation Questionnaire & Authorizations

Section 1 - COMPLETED BY LOAN CENTRAL	# W2s	# 1099s	#1098s	#1095s	#Other
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Former Tax Customer New Tax Customer, **If new, who referred you?** (name&address) _____

YES NO **Will you be applying for a Tax Advance Loan(TAL) if your refund meets the minimum refund requirement?**

YES NO **Do you have W-2 forms from ALL employers you worked for last year?**

YES NO **Did you or your spouse receive unemployment compensation last year? (1099G form required)**

YES NO **Are you Self Employed or have Farm Income, or were you issued a 1099 in 2021? (additional application required)**

YES NO **If claiming dependents, do you have proof of residency for EITC (earned income tax credit) purposes or dependent's birth certificates?**

YES NO **Did you or your dependents attend college OR pay college expenses/interest in 2021? (Education Credit Form/1098T)**

YES NO **Do you or any member of your tax household have health insurance through the Marketplace (Obama Care) in 2021? (1095A)**

YES NO **Has the IRS ever assigned a IP PIN 6 digit number for identity theft reasons for taxpayer or spouse? (If YES, need IRS CP01A Notice)**

YES NO **Did you receive an IRS Stimulus payment of \$1400 in 2021 for all your dependents? If no, who didn't receive?** _____

YES NO **Email my tax returns to Email address** _____ @ _____ .com

Section 2 - Complete for STATE, CITY, & SCHOOL DISTRICT PREPARATION, If No, skip Section 2.

YES NO **Did you live in the same state ALL of 2021? If NO, list ALL states in which you lived & the dates you lived there:**

Name of County you live in? _____ **State** _____ **from** _____ / _____ /2021 **to** _____ / _____ /2021

Name of School District? _____ **State** _____ **from** _____ / _____ /2021 **to** _____ / _____ /2021

YES NO **Do you request a City Tax Return?** YES NO **Do you request a School District Tax Return?**

YES NO **Direct your state refund(s) into your bank: Routing #** _____ **Account#** _____ **If No, the State will mail your refund to you.**

Section 3 - PERSONAL INFORMATION

Marital Status on 12/31/21: Single Married, When _____ Separated, When _____ Divorced, When _____ Widowed, When _____

Primary Taxpayer's Name (First, Middle, Last)			Date of Birth		Social Security Number
Mother's Maiden Name	Cell phone	Other Contact Phone	Driver's License Number	Expiration Date	Alternate email address
Spouse's Name (First, Middle, Last)			Spouse's Date of Birth		Spouse's Social Security Number
Spouse's Mother's Maiden Name	Spouse's Cell phone	Spouse's Drivers License No.	Expiration Date	Spouse's email address	

Mailing Address (street, city, state, and zip)

Section 4 - DEPENDENT INFORMATION FOR WHOM YOU ARE CLAIMING If not claiming dependents, skip Section 4

To be **your dependent**, a person must be either your qualifying child or your qualifying relative. A person may be your qualifying child if they:

- Are your biological child, stepchild, foster child, brother, sister, stepbrother, stepsister, or a descendant of them. • Lived with you for more than half of the year.
- Did not provide more than half of his/her own support for the year. Was under 19 on 12/31/21 (under 24 if full time student or permanently and totally disabled).

	Dependent 1	Dependent 2	Dependent 3	Dependent 4
Dependent's Name				
Relationship to Taxpayer				
Social Security #	- -	- -	- -	- -
Date of Birth	/ /	/ /	/ /	/ /
# of months dependent lived with you in 2021?	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12
If born in 2002 or before, are they disabled? Full-time student? Where?	Disability began? Reason? <input type="checkbox"/> YES <input type="checkbox"/> NO Fulltime Student? Where?	Disabled? Full time student, where? <input type="checkbox"/> YES <input type="checkbox"/> NO Fulltime Student? Where?	Disabled? Full time student, where? <input type="checkbox"/> YES <input type="checkbox"/> NO Fulltime Student? Where?	Disabled? Full time student, where? <input type="checkbox"/> YES <input type="checkbox"/> NO Fulltime Student? Where?
Other Parent's Name & Address that is not listed on this return?	Other Parent's Name Address	Other Parent's Name Address	Other Parent's Name Address	Other Parent's Name Address
Reason other parent or both parents are not claiming dependent?	<input type="checkbox"/> YES <input type="checkbox"/> NO Divorce/Separation Agreement	<input type="checkbox"/> YES <input type="checkbox"/> NO Divorce/Separation Agreement	<input type="checkbox"/> YES <input type="checkbox"/> NO Divorce/Separation Agreement	<input type="checkbox"/> YES <input type="checkbox"/> NO Divorce/Separation Agreement
Receive Advanced Child Tax Credit from July-Dec, 2021?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Did Dependent live with anyone else in 2021? Who? How Long?	Name? How many months?	Name? How many months?	Name? How many months?	Name? How many months?

Section 4 - DEPENDENT INFORMATION CONTINUED

YES NO Do you have any children you are not claiming on this tax return? If yes, who & Why?

YES NO Paid Daycare Expenses?

Amount Paid

Paid to:

Daycare Address

SS/EIN#

Section 5 - EMPLOYER INFORMATION

YES NO Do you have Social Security Income? (SSA-1099 required)

YES NO I am an educator and am eligible to take the Educator's Expense Deduction? Amount\$ _____ (\$250 max per person)

Taxpayer's Current Employer

From:

to:

If YOU have been employed less than one year, please list all other employers in 2021 and dates employed there:

1) _____ From: _____ To: _____ 3) _____ From: _____ To: _____

2) _____ From: _____ To: _____ 4) _____ From: _____ To: _____

Spouse's Current Employer

From:

to:

If YOU (Spouse) have been employed less than one year, please list all other employers in 2021 and dates employed there:

1) _____ From: _____ To: _____ 3) _____ From: _____ To: _____

2) _____ From: _____ To: _____ 4) _____ From: _____ To: _____

Section 6 - ADDITIONAL TAX INFORMATION

YES NO Was there a year in the past FOUR years that you did not file taxes? If yes, which year & why? _____

YES NO Was there a year in the past THREE years that your refund was kept, delayed or reduced? If yes, which year(s)? _____

YES NO Is there a prior year in the past that you didn't file a tax return and should have?

YES NO Audited by the IRS at any time in the past THREE Years? If yes, which year(s)? _____

YES NO Owe the IRS, State, Department of Agriculture, Department of Defense, USDA or other federally guaranteed loans?

YES NO Filed for a bankruptcy petition in the last five years or plan to file? Date filed: _____ Discharge date: _____

YES NO Contribute any money to a 401K, IRA or other retirement savings account? If yes, amt contributed \$ _____

YES NO Are you obligated to repay the First Time Homebuyers Credit? If yes, amount to repay? \$ _____

YES NO Withdrew any money from a 401K/retirement acct in years 2019, 2020, or 2021? If yes, which year & amt withdrawn? _____

YES NO Did you take a withdrawal in 2020 for COVID from your retirement account? If YES, how much was claimed last year? _____

YES NO Did you have gambling winnings in 2021? If yes, amount of winnings \$ _____ (W-2G)

YES NO Legally responsible to pay child support? If yes, name(s) of children? _____

Which County _____ Are you past due ANY amount? YES NO If yes, amount past due \$ _____

YES NO Owe Student Loans, If yes, are any past due? YES NO Total balance owed \$ _____

YES NO Did you donate to church or charitable organizations in 2021? If yes, how much: \$ _____

Name Of Nearest Relative Not Living With You

Relationship

Phone Number

Address

AUTHORIZATION/APPLICANT(S) CERTIFICATION

I agree I will not hold Loan Central liable for any misstatements or omissions I may have made.

Loan Central may keep this Questionnaire & Authorizations whether or not my Electronic Refund Product (ERP) is approved or if my tax return is not prepared.

I further authorize you to obtain from the Bureau of the Fiscal Service's Debt Management Services (DMS) via an automated system or by any other written, electronic or telephonic means, any and all information related to debt owed by me to the United States Government, to a State, or any debt enforced by a State, including child support obligations and/or any payments made or due to you by a federal or state agency, and/or any tax return information disclosed to DMS by information disclosed to DMS by the Internal Revenue Service in order to collect tax debt through the levy process under 26 U.S.C. 6331(h), and to conduct tax refund offset under 26 U.S.C. 6402. Tax "return information" is defined in 26 U.S.C 6103 (b). Information includes but is not limited to, correspondence & other information related to your debt(s) or payment(s), including your tax refund payment. I acknowledge that neither the Fiscal Service nor Loan Central are required to inform you of disclosures made under this authorization. This authorization will be valid for six months from the date of the signing of this Agreement, unless revoked by you in writing and is received & processed by FMS at Supervisor, TOP Call Center, PO Box 1686, Birmingham, AL 35201-1686, with a copy sent to Loan Central at 1828 Eastern Ave, Gallipolis, OH 45631.

YES NO I authorize Loan Central to contact me through Text Messaging and/or email to the cell phone number(s) & my email addresses I provided on this Questionnaire & Authorizations. I further understand that this is not a requirement to enter into an agreement as a condition for any ERPs or tax preparation. I understand Text Messaging rates may apply from my wireless phone provider and these charges are not the responsibility of Loan Central. If I no longer wish to receive messages via Text Messaging or Email, I must provide written notice to Loan Central at 1828 Eastern Avenue, Gallipolis, OH 45631.

YES NO I authorize Loan Central to email my tax returns & all applicable disclosures to the email address I provided.

SIGNATURES: By signing my name below, I represent that everything I have stated in this Questionnaire & Authorizations are true and correct. I have read and understand each of the consents herein.

Taxpayer/Applicant Signature

Date

Taxpayer/Applicant Signature

Date

Any person who, with intent to defraud or knowing that he is facilitating a fraud against Loan Central, completes a questionnaire containing a false or deceptive statement is guilty of fraud which is a Federal crime punishable by fine or imprisonment, or both.