



CAMPANILE

& ASSOCIATES, LLC

Accounting • Wealth Strategies • Insurance

December 20, 2020

Greetings

We hope this finds you well. Last tax season was an unprecedented one and we want to thank all of our clients for your cooperation and patience.

In preparation of the 2020 tax season we are sending this letter and tax questionnaire to all of our tax clients.

With the cold weather approaching and uncertainty of state health mandates due to COVID-19 we will not be setting appointments and ask that all tax return information be dropped off or mailed. Beginning February 1st, 2021, our office hours will be Monday-Thursday 9-6, Friday 9-4 and Saturday 10-2.

The enclosed tax questionnaire must be filled out and returned along with hard copies of all your information so that we can complete your tax return accurately and in a timely matter.

For those of you who require an organizer, call the office and one will be provided.

Please be aware of others when dropping your information off as our office is small and cannot accommodate more than 2 people at a time in the waiting area. A mask is required.

There will be a secure drop box next to the front door for anyone preferring a no contact drop off or having to drop off outside of business hours.

There will be a \$25.00 fee to file an extension.

All tax returns received after April 1, 2021 will be put on extension. If you plan on filing an extension you must call the office prior to April 14th.

Please contact us with any questions.

Thank You,

Vincent Campanile, CPA & Staff

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Securities offered through TFS Securities, Inc. Member FINRS/SIPC
A full service broker dealer located at
874 Broadway, Bayonne, NJ 07002
201.823.1030

2020 Tax Questionnaire

Name _____

Address _____

Phone _____

Email _____

FILING STATUS (if changed)

Married filing joint Married filing separate Head of household Single

NEW DEPENDANTS (if any)

Name _____

Date of birth _____

Social Security # _____

DEPENDANTS IN COLLEGE

Yes If yes we need 1098-T - Tuition Statement
 No

*WE NEED YOUR STIMULUS CHECK AMOUNTS

CK #1 _____
CK #2 _____

DIRECT DEPOSIT

Routing # _____

Account # _____

*if you did not receive a stimulus please let us know

IRA CONTRIBUTION

Yes Amount Contributed \$ _____
 No

MORTGAGE

Yes If yes we need 1098 - Mortgage Statement
 No

RENT PAID

Yes Amount paid \$ _____
 No

PROPERTY TAXES

\$ _____

HEALTH INSURANCE

Yes If marketplace we need 1095-A Health Insurance Statement
 No

COLLECT UNEMPLOYMENT

Yes If yes we need 1099-G (you must print from unemployment website)
 No

OUT OF POCKET MEDICAL

Total amount \$ _____

ESTIMATE TAX PAYMENTS (if made)

<input type="checkbox"/> Federal	1st \$	2nd \$	3rd \$	4th \$

<input type="checkbox"/> State	1st \$	2nd \$	3rd \$	4th \$
