## YOUR PERSONAL DATA VALID AS OF 31.12.2020

Name and surname:		
AHV number (tax ID):		
Date of Birth:		
Swiss address:		
Marital status as of 31.12.2020:		
Occupation:		
Residence permit:		
Canton of residence:		
IBAN:		
Bank name and address:		
Account holder name:		
Have you filed a tax return in Switzerland before?		
☐ YES		NO
Have you received a tax return form for 2020 from the tax of	ffice	by post?
□ YES		NO
Do you have a specific situation, e.g. change of cantons, impyes, briefly DESCRIBE:	nigra	tion to CH during the year? If
Your Income in Switzerland		
1. Do you have income from employment (as an employe	ee)?	
☐ YES		NO
<ol><li>Do you work part-time?</li><li>YES</li></ol>		NO
3. Do you work for shifts, weekly shifts or night shifts?	_	110
☐ YES		NO

4	4. Do you have other income in Switzerland, e.g. unemployment benefits, social benefits, sickness benefits, pension, self-employed person, lottery winnings, profits from bonds, dividends, income from Hauswartung, reduction of ZP so-called Spring association and others?			
	☐ YES		NO	
5	Do you own real estate or a gar under your name?			
3	Do you own real estate or a car under your name?  VES		NO	
6			ritten in your name (bank	
Your	Tax Deductions			
7	Do you travel to work by car?			
	□ YES		NO	
8	Do you travel to work by public transport?			
	□ YES		NO	
9	Do you travel to work on a bicycle or small motorc (also partly eg from the house to the train station)?	ycle	/ Kleinmotorrad up to 50 cm <sup>3</sup>	
	☐ YES		NO	
1	0. Does your employer contribute to your food?			
1	☐ YES		NO	
1		1 1	2 0" 1 )0	
1	<ol> <li>Have you contributed to the third pension pillar (Stew YES</li> </ol>	erbei	NO	
	<b>3</b> 123	_	110	
1:	2. SEND us a confirmation of payments paid within the die Steuererklärung	healt	h, the so-called: Auszug für	
1	3. Did you have the cost of health insurance that you pair your health insurance company (most often a dentist alternative medicine, etc.)?	-		
	☐ YES		NO	
1	4. Do you have a medical diet prescribed by a doctor (eg	g celi	ac disease) or a disability?	
15. Do you have life insurance or income insurance?				
	☐ YES		NO	

16. Do you have costs for further education? E.g. languag school, etc.		urse, forklift course, evening			
u ies		NO			
17. Are you a (voluntary) donor for a Swiss organization?					
☐ YES		NO			
10.75					
18. Do you pay alimony?					
□ YES		NO			
19. Does the expenditure on the profession exceed 10% of your income or CHF 2 400 (eg clothing, study, contributions to organizations, professional literature, etc.)?					
☐ YES		NO			
20. Do you have debts, do you pay your mortgage, do you have a credit card debit, a car loan or private debts (NOT leasing)?					
☐ YES		NO			
21. Do you financially support someone in need (not a wife and children), e.g. parents.					
☐ YES		NO			

## YOUR WORLDWIDE INCOME

Your income outside of Switzerland:

You need to declare your worldwide income in Switzerland. SEND us receipts of your income and the income of your spouse outside Switzerland, property outside Switzerland and statements from foreign bank accounts as of December 31, 2020 so that we can include them in your tax return.