

## Client Questionnaire for 2009

Please check the appropriate box and include all necessary details.

	Yes	No
<b>Personal Information</b>		
Did your marital status change during the year? If yes explain: _____	<input type="checkbox"/>	<input type="checkbox"/>
Did your residence change during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Can you be claimed as a dependent by another taxpayer?	<input type="checkbox"/>	<input type="checkbox"/>
<b>Dependent Information</b>		
Were there any changes in dependents from the prior year?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, explain: _____		
Do you have any children (under age 19 or college students under 24) with investment income in excess of \$1,800?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay any student loan interest this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you, or will you, contribute to a Coverdell Education Savings Account this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you maintain a home for someone not claim as a dependent?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay for childcare (babysitting, daycare)?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please provide childcare provider name, address, social security/EIN and amount paid.		
<b>Purchases, Sales and Debt Information</b>		
Did you start or dispose of a business during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you acquire a new or additional interest in an LLC, partnership, or corporation?	<input type="checkbox"/>	<input type="checkbox"/>
Did you sell, exchange, or purchase any real estate during the year? (send closing statements)	<input type="checkbox"/>	<input type="checkbox"/>
Did you sell any stock during the year? (send original cost, sale price, dates of purchase and sale)	<input type="checkbox"/>	<input type="checkbox"/>
Did you participate in puts, calls, or "short the box" stock transactions?	<input type="checkbox"/>	<input type="checkbox"/>
Did you take out a home equity loan or line of credit this year or refinance any property? (send closing statements)	<input type="checkbox"/>	<input type="checkbox"/>
Did you purchase a hybrid (gas/electric) auto? If yes, list make, model and year.	<input type="checkbox"/>	<input type="checkbox"/>
<b>Income Information</b>		
Did you have any foreign income or pay any foreign taxes?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any income from property sold prior to this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any lump-sum payment from a pension or profit sharing plan?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any rollovers or withdrawals from any retirement account?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any disability or unemployment income?	<input type="checkbox"/>	<input type="checkbox"/>
Did you cash in any U.S. Savings bonds?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive employer-provided educational assistance?	<input type="checkbox"/>	<input type="checkbox"/>
Did your college student receive educational benefits?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive a 1099-Q for a distribution from 529 plan? If yes, attach form.	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive a damage award for personal injury, sickness or discrimination?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive executor fees or jury duty fess? If yes, amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive or pay alimony (not child support)? If yes, amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
<b>Deduction Information</b>		
Did you incur an unreimbursed casualty or theft loss greater than 10% of your income?	<input type="checkbox"/>	<input type="checkbox"/>
Do you qualify for any Social Security benefits such as retirement, death, disability or Medicare? (send statement)	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a donee acknowledgment to substantiate cash or check charitable contributions of \$250 or more and proof of <u>all</u> charitable contributions?	<input type="checkbox"/>	<input type="checkbox"/>

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	<b>Yes</b>	<b>No</b>
Did you have an unreimbursed employee expenses or an allowances?	<input type="checkbox"/>	<input type="checkbox"/>
Did you use your car on the job, for other than commuting?	<input type="checkbox"/>	<input type="checkbox"/>
Did you work out of town during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you have educational expenses for you or your dependent(s)?	<input type="checkbox"/>	<input type="checkbox"/>
Did medical expenses exceed 7.5% of your income?	<input type="checkbox"/>	<input type="checkbox"/>
Did you have any moving or job-seeking expenses?	<input type="checkbox"/>	<input type="checkbox"/>
Are you a teacher or school administrator who provided school supplies in your job?	<input type="checkbox"/>	<input type="checkbox"/>
Do you own or invest in a business that would be considered manufacturing?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay sales tax on a car, boat, motor home, manufactured home, truck, motorcycle, or plane purchased for personal use? If yes, amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a Health Saving Account (HSA) or a Medical Saving Account (MSA)? If yes, provide the deductible \$ _____ contributions \$ _____ qualified withdrawals \$ _____ and if single _____ or married _____ coverage	<input type="checkbox"/>	<input type="checkbox"/>
If you worked for yourself, did you pay health insurance premiums for yourself and your family? If yes, amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>

**Credit Information**

Have you started any adoption process?	<input type="checkbox"/>	<input type="checkbox"/>
Did you start a new pension plan this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make energy efficient improvements to your home in 2009?	<input type="checkbox"/>	<input type="checkbox"/>
Did you buy a new car on or after February 17, 2009?	<input type="checkbox"/>	<input type="checkbox"/>
Did you purchase a new home in 2009?	<input type="checkbox"/>	<input type="checkbox"/>

**Miscellaneous Information**

Are you military?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make 2009 gifts of more than \$13,000 to any individual?	<input type="checkbox"/>	<input type="checkbox"/>
Did you engage in any bartering transactions?	<input type="checkbox"/>	<input type="checkbox"/>
Are you covered by a pension plan?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any Roth or traditional IRA contributions?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever made a non-deductible IRA contribution?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have extra cash to contribute more into retirement?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have stock options?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive correspondence from federal, state, or local tax authorities? If yes, explain: _____	<input type="checkbox"/>	<input type="checkbox"/>
Do you want to allocate \$3 to the Presidential Election Campaign Fund?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay a household employee?	<input type="checkbox"/>	<input type="checkbox"/>
Would you like to have your refund direct deposited? (send voided check for account info)	<input type="checkbox"/>	<input type="checkbox"/>
Do you expect significant changes in income, expenses or dependents for 2009? If yes, explain _____	<input type="checkbox"/>	<input type="checkbox"/>
Did you live in the Katrina or Wilma Hurricane disaster area?	<input type="checkbox"/>	<input type="checkbox"/>
Did you have an interest in or have signature authority over any foreign financial account?	<input type="checkbox"/>	<input type="checkbox"/>
New Clients – Did you take a first time homebuyer credit in 2008?	<input type="checkbox"/>	<input type="checkbox"/>

**State Information**

Did you contribute to a 529 Plan? If yes, what state plan? _____; amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
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