

PERSONAL INFORMATION

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|---|--|-----|----|
| 1 | Did your marital status change last year?.....
If yes, explain..... | Yes | No |
| 2 | Do you want to allow your tax preparer to discuss this year's return with the IRS?.....
If no, enter another person (if desired) to be allowed to discuss this return with the IRS.
Caution: Review any transferred information for accuracy.
Designee's Name.....▶
Phone Number.....▶ _____ Personal Identification Number (5 digit PIN).....▶ _____ | Yes | No |
| 3 | Do you or your spouse plan to retire this tax year?..... | Yes | No |
| 4 | Were you or your spouse permanently and totally disabled last year?..... | Yes | No |
| 5 | Enter date of death for taxpayer or spouse: Taxpayer: _____ Spouse: _____ | | |
| 6 | Were you or your spouse a member of the U.S. Armed Forces during last year?..... | Yes | No |

DEPENDENT INFORMATION

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|-----|---|-----|----|
| 7 a | Do you have dependents who must file?..... | Yes | No |
| b | If yes, do you want us to prepare the return(s)?..... | Yes | No |
| 8 a | Do you have children who are under age 19 or a full time student under age 24 with investment income greater than \$1,900?..... | Yes | No |
| b | If yes , do you want to include your child's income on your return?..... | Yes | No |
| 9 | Are any of your dependents not U.S. citizens or residents?..... | Yes | No |
| 10 | Did you provide over half the support for any other person during last year?..... | Yes | No |
| 11 | Did you incur adoption expenses during last year?..... | Yes | No |

IRA AND PENSION PLAN

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|----|--|-----|----|
| 12 | Did you receive payments from a pension or profit-sharing plan?..... | Yes | No |
| 13 | Did you receive a total distribution from an IRA or other qualified plan that was partially or totally rolled over into another IRA or qualified plan within 60 days of the distribution?..... | Yes | No |
| 14 | Did you convert all or part of a regular IRA into a Roth IRA?..... | Yes | No |
| 15 | Did you contribute to an Education Savings Account?..... | Yes | No |

ITEMS RELATED TO INCOME/LOSSES

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|------|---|-----|----|
| 16 | Did you receive any disability payments last year?..... | Yes | No |
| 17 | Did you receive tip income not reported to your employer?..... | Yes | No |
| 18 a | Did you buy, sell, refinance, or abandon a principal residence or other real property last year?.....
(Attach copies of any escrow statements or Forms 1099) | Yes | No |
| b | Are you planning to purchase a home soon?..... | Yes | No |
| 19 | Did you incur any casualty or theft losses during last year?..... | Yes | No |
| 20 | Did you incur any non-business bad debts?..... | Yes | No |

PRIOR YEAR TAX RETURNS

- | | | | |
|----|--|-----|----|
| 21 | Were you notified by the Internal Revenue Service or state taxing authority of changes to a prior year's return?.....
If yes , enclose agent's report or notice of change. | Yes | No |
| 22 | Were there changes to a prior year's income, deductions, credits, etc. which would require filing an amended return?..... | Yes | No |

