

## 2011 Taxpayer Questionnaire

Please check the appropriate box and include all necessary details.

We are searching for deductions. Please be complete!

Did any of these things happen during 2011?

### Personal Information

	Yes	No
Did your marital status change? If yes, explain: _____	<input type="checkbox"/>	<input type="checkbox"/>
Did your mailing address or residence change from last year?	<input type="checkbox"/>	<input type="checkbox"/>
Can you be claimed as a dependent by another taxpayer?	<input type="checkbox"/>	<input type="checkbox"/>
Are you or any dependent declared disabled or blind?	<input type="checkbox"/>	<input type="checkbox"/>
Did you change any bank accounts that have been used to direct deposit (or direct debit) funds from (or to) the IRS or other taxing authority from last year?	<input type="checkbox"/>	<input type="checkbox"/>

### Dependent Information

Were there any changes in dependents you claimed from last year?	<input type="checkbox"/>	<input type="checkbox"/>
Name all dependents: _____		
Do you have any children (under age 19 or college students under the age 24 with unearned income in excess of \$1,900)?	<input type="checkbox"/>	<input type="checkbox"/>
Did you contribute to a Coverdell Education Savings Account this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay for child care (babysitting, daycare) while you worked or looked for work? If yes, please provide provider name, address, social security number/EIN, and amount paid.	<input type="checkbox"/>	<input type="checkbox"/>

### Buy or Sell Information and Debt Information

Did you buy, sell, or exchange any real estate? (Send all closing statements)	<input type="checkbox"/>	<input type="checkbox"/>
Did you abandon or have foreclosed any real estate? (Send Form 1099-A and/or 1099-C)	<input type="checkbox"/>	<input type="checkbox"/>
Did you sell or write off any stock? (Send original cost, sale price and dates)	<input type="checkbox"/>	<input type="checkbox"/>
Did you sell any stock this year from a mutual insurance company that became a stock company in prior years?	<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 buy or sell an interest in any other investments (ex. K-1's)?	<input type="checkbox"/>	<input type="checkbox"/>
Did you buy a hybrid (gas/electric), alternative motor, or electric motor energy efficient vehicle? If yes, list make, model and year.	<input type="checkbox"/>	<input type="checkbox"/>
Did you take out a home equity loan or line of credit this year or refinance any real estate? (Send closing statements)	<input type="checkbox"/>	<input type="checkbox"/>

### Income Information

Were you a grantor or transferor for a foreign trust, have an interest in or a signature or other authority over a bank account, securities account, or other financial account in a foreign country, or pay any foreign taxes?	<input type="checkbox"/>	<input type="checkbox"/>
Did you carry \$10,000 in a foreign bank account for even one day during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you earn any income in a foreign country?	<input type="checkbox"/>	<input type="checkbox"/>
Did you have any minimum tax credits on your tax return in 2007 (new clients only)?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any income during the year from property sold prior to this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive or rollover any retirement account money?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any disability or unemployment income?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any tip income that was not reported to your employer?	<input type="checkbox"/>	<input type="checkbox"/>
Did any of your life insurance policies mature, or did you surrender any policies?	<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 or other educational benefits?	<input type="checkbox"/>	<input type="checkbox"/>
Did you take money out from a 529 plan? If yes, whose name was on the account and how much? (Send Form 1099-Q)	<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 fees? 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"/>
Do you qualify for any Social Security benefits such as retirement, death, disability or Medicare? (Send Form 1099-SSA or other statement)	<input type="checkbox"/>	<input type="checkbox"/>

### Deduction Information

Did medical expenses exceed 7.5% of your income?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay long-term care (nursing home) premiums for yourself or your family?	<input type="checkbox"/>	<input type="checkbox"/>
Was any of your health insurance premiums subsidized by an employer or other source?	<input type="checkbox"/>	<input type="checkbox"/>

	Yes	No
Did you have a Health Savings Account (HSA)?		
If yes, provide the deductible \$ _____ contributions \$ _____		
qualified withdrawals \$ _____ and if single ____ or family ____ coverage.	<input type="checkbox"/>	<input type="checkbox"/>
Did you keep all your sales tax receipts for this year (not required)?		
If yes, total sales tax paid \$ _____	<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"/>
Did you pay real estate taxes for any property?	<input type="checkbox"/>	<input type="checkbox"/>
If you own your residence, is it overvalued for real estate purposes?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay mortgage interest for your residence or a second residence? (Send Form 1098)	<input type="checkbox"/>	<input type="checkbox"/>
Did you have to pay interest on a non-retirement investment portfolio?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay any student loan interest this year? (Send Form 1098-E)	<input type="checkbox"/>	<input type="checkbox"/>
Did you have to pay private mortgage insurance (PMI)?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a donee acknowledgment to substantiate all cash or check charitable contributions of \$250 or more <u>and proof of all</u> charitable contributions (cash and non-cash)?	<input type="checkbox"/>	<input type="checkbox"/>
Did you donate a vehicle or boat? (Send Form 1098-C)	<input type="checkbox"/>	<input type="checkbox"/>
Did you have any unreimbursed employee expenses or an allowance?	<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 any moving or job-seeking expenses?	<input type="checkbox"/>	<input type="checkbox"/>
Did you incur unreimbursed casualty or theft losses greater than 10% of your income?	<input type="checkbox"/>	<input type="checkbox"/>
Did you incur any non-business bad debts this year?	<input type="checkbox"/>	<input type="checkbox"/>
Are you a teacher or school administrator who bought school supplies in your job?	<input type="checkbox"/>	<input type="checkbox"/>

### College and Credit Information

Did you pay any college expenses? If yes, provide annual summary of charges and payments received from school, and a list of checks written (Send Form 1098-T)	<input type="checkbox"/>	<input type="checkbox"/>
Have you started any adoption process?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make energy efficient improvements to your home this year?		
What kind? _____	<input type="checkbox"/>	<input type="checkbox"/>
Do you purchase gasoline for off road use in your business?	<input type="checkbox"/>	<input type="checkbox"/>

### Planning Questions

Are you covered by a pension plan?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any retirement contributions?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make or would you consider a ROTH conversion?	<input type="checkbox"/>	<input type="checkbox"/>
Do you need help with your retirement planning?	<input type="checkbox"/>	<input type="checkbox"/>
Do you need help with life, disability long-term care or health insurance planning?	<input type="checkbox"/>	<input type="checkbox"/>
Do you need help with your education planning?	<input type="checkbox"/>	<input type="checkbox"/>
Do you need help with your estate planning?	<input type="checkbox"/>	<input type="checkbox"/>
Is your will out of date or non-existent?	<input type="checkbox"/>	<input type="checkbox"/>
Is your power of attorney for healthcare and financial decisions out of date or non-existent?	<input type="checkbox"/>	<input type="checkbox"/>
Do you need help with your investment planning?	<input type="checkbox"/>	<input type="checkbox"/>
Do you need help with your recordkeeping?	<input type="checkbox"/>	<input type="checkbox"/>

### Miscellaneous Information

Did you receive correspondence from federal, state, or local tax authorities? (Send the letters)	<input type="checkbox"/>	<input type="checkbox"/>
Do you have employer provided stock options that you can exercise or sell?	<input type="checkbox"/>	<input type="checkbox"/>
Were you ever in the military?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any 2011 gifts this year of more than \$13,000 to any one individual?	<input type="checkbox"/>	<input type="checkbox"/>
Did you engage in any bartering transactions?	<input type="checkbox"/>	<input type="checkbox"/>
Do you want to allocate \$3 to the Presidential Election Campaign Fund?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a household employee?	<input type="checkbox"/>	<input type="checkbox"/>
Would you like to have your refund direct deposited into your bank account?		
(Send voided check for routing and account numbers)	<input type="checkbox"/>	<input type="checkbox"/>
Do you <b>NOT</b> have a current will and power of attorney for health care and financial decisions? Approximate date of will if you do have one _____	<input type="checkbox"/>	<input type="checkbox"/>
Can you afford to pay all your taxes?	<input type="checkbox"/>	<input type="checkbox"/>

	Yes	No
Did you file bankruptcy or have debts forgiven or cancelled this year? (Send Form 1099-C)	<input type="checkbox"/>	<input type="checkbox"/>
Did you have any gambling income and do you have proof of losses?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, send proof of losses for review.	<input type="checkbox"/>	<input type="checkbox"/>
Do you expect significant changes in income, expenses or dependents for 2012?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, explain: _____	<input type="checkbox"/>	<input type="checkbox"/>
Were you a victim of identity theft, whereby the IRS issued you an IP PIN?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please provide _____	<input type="checkbox"/>	<input type="checkbox"/>
<b>Business Owners Only</b>		
Did you start up or shut down a business during the year?	<input type="checkbox"/>	<input type="checkbox"/>
If you were self-employed, did you pay health insurance premiums? If yes, amount \$ _____	<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 start a NEW employee pension plan this year?	<input type="checkbox"/>	<input type="checkbox"/>
Have all required 1099s been filed and issued? If no, would you like our assistance?	<input type="checkbox"/>	<input type="checkbox"/>
Did you maintain mileage logs for all vehicles driven for business purposes?	<input type="checkbox"/>	<input type="checkbox"/>
Do you keep records to support business purpose for all travel, meals, and entertainment expenditures?	<input type="checkbox"/>	<input type="checkbox"/>
Do you maintain records to support all business expense reimbursements issued to all owners and employees?	<input type="checkbox"/>	<input type="checkbox"/>
Did you buy fuel to operate business equipment or off-road vehicles?	<input type="checkbox"/>	<input type="checkbox"/>
Did you hire any new employees between 2/2/10 - 12/31/10? If yes, did any of those hired remain employed with you for at least 1 year?	<input type="checkbox"/>	<input type="checkbox"/>
Do you need coaching for your small business?	<input type="checkbox"/>	<input type="checkbox"/>
<b>Ohio Information</b>		
Do you want to allocate \$1 to the Ohio Political Party Fund?	<input type="checkbox"/>	<input type="checkbox"/>
Did you live and work in Ohio all year?	<input type="checkbox"/>	<input type="checkbox"/>
Are you in an unsubsidized health insurance plan where your current or former employer does not pay for any part of the plan's cost and does not reimburse you?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, how much did you pay \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
Ohio requires you to pay sales tax on any purchases made from out-of-state companies, including purchases made over the internet or by catalogue. Did you make any purchases from out-of-state companies which you would like to report?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, Total Purchases \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
Did you contribute to or distribute from the Ohio College Advantage Plan or other state plans (529 Plan)? If yes, what state plan? _____	<input type="checkbox"/>	<input type="checkbox"/>
Amount contributed \$ _____ Amount distributed \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
Is anyone in your family attending an Ohio college during their 1st or 2nd year?	<input type="checkbox"/>	<input type="checkbox"/>
Were you a displaced worker that paid for training to get a new job?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make a political contribution to any qualified state race?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, which one(s) and how much? \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
Did you make equity investments in Ohio businesses to qualify for the InvestOhio credit?	<input type="checkbox"/>	<input type="checkbox"/>
Did you purchase an Ohio specialty license plate (ex. wildlife, CASA/GAL), where a portion of the cost is considered a charitable donation?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, which license plate and how much? _____	<input type="checkbox"/>	<input type="checkbox"/>
Do you want to donate to the military injury relief fund? If yes, how much \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
Do you want to donate to conservation of Ohio endangered wildlife?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, how much \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
Do you want to donate to Ohio nature preserves? If yes, how much \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
If age 65 or older or disabled and you own a home, are you claiming a homestead exemption for real estate tax?	<input type="checkbox"/>	<input type="checkbox"/>
If you own a home, are you claiming the 2 1/2% reduction for real estate tax?	<input type="checkbox"/>	<input type="checkbox"/>
<b>Local Information</b>		
Did you live or work in a city limit during 2011? If yes, list all: _____	<input type="checkbox"/>	<input type="checkbox"/>
Did you live in a township that has been annexed into a city during 2011?	<input type="checkbox"/>	<input type="checkbox"/>
Did you live in a school district that charges a separate tax during 2011?	<input type="checkbox"/>	<input type="checkbox"/>