

2014 TAX QUESTIONNAIRE

E-mail address _____

Telephone Number _____

Name	Relationship	College Student	Date of Birth	Social Security Number
TAXPAYER: _____	N/A	_____	___/___/___	-___-____
SPOUSE: _____	N/A	_____	___/___/___	-___-____
DEPENDENTS: _____	_____	_____	___/___/___	-___-____
_____	_____	_____	___/___/___	-___-____

CURRENT ADDRESS: _____

IF YOU WOULD LIKE YOUR REFUNDS (IF ANY) PAID BY DIRECT DEPOSIT, PLEASE COMPLETE THE FOLLOWING:

Bank Name: _____ (Mark One) Checking _____ Savings _____

Bank routing number: _____ Account number: _____

Please answer the following questions.

YES NO

- | | | |
|-------|-------|---|
| _____ | _____ | 1. Did you purchase or sell your principal residence during the year? |
| _____ | _____ | 2. Have you been notified by the IRS of changes to a prior year's return, or received any other tax correspondence? |
| _____ | _____ | 3. Did you receive, or expect to receive, a Schedule K-1 from a trust, estate, partnership, or S Corporation? |
| _____ | _____ | 4. Did you own an interest in a partnership or S Corporation? |
| _____ | _____ | 5. Did you receive any unemployment benefits? |
| _____ | _____ | 6. Did you receive any distributions from a retirement plan? |
| _____ | _____ | 7. Did you "roll over" a retirement plan distribution into another plan? |
| _____ | _____ | 8. Did you receive Social Security benefits or disability income? |
| _____ | _____ | 9. Did you sell any personal assets at a gain (i.e., car, boat, etc.)? |
| _____ | _____ | 10. Did you sell any real estate (other than your home) during the year? |
| _____ | _____ | 11. Did you receive proceeds from a prior year installment sale? |
| _____ | _____ | 12. Did you own any rental property during the year? |
| _____ | _____ | 13. Did you start or acquire a new business or rental property? |
| _____ | _____ | 14. Did you sell any part of an existing business, or sell business assets? |
| _____ | _____ | 15. Did you cease operating any business or rental property during the year? |
| _____ | _____ | 16. Did you use part of your home for business purposes? |
| _____ | _____ | 17. Do you pay for any health or long term care insurance through your business? |
| _____ | _____ | 18. Did you make any contributions, or plan to make contributions, to a traditional or Roth IRA for 2014? |
| _____ | _____ | 19. Did you make any contributions to HSA (Health Savings Account) in 2014? |
| _____ | _____ | 20. Did you pay expenses for the care of your child or other dependent so you could work? |
| _____ | _____ | 21. Did you lose property or have damage to a property due to a casualty, theft, or condemnation? |
| _____ | _____ | 22. Did you pay any educational tuition or fees? |
| _____ | _____ | 23. Did you pay any student loan interest? |
| _____ | _____ | 24. Did you make any federal or state estimated payments? |
| _____ | _____ | 25. Did you have any stock transactions during the year? |
| _____ | _____ | 26. Did you make any payments in 2014 through your business that would require you to file Form(s) 1099? |
| _____ | _____ | 27. Did all members of your family have health insurance in 2014? |
| _____ | _____ | 28. Was your insurance purchased through the Exchange or Marketplace? |
| _____ | _____ | 29. Did you receive a 1095-A Health Insurance Marketplace statement? |
| _____ | _____ | 30. Are you or members of your family exempt from Required Health Insurance coverage? |

I declare that, to the best of my knowledge and belief, I have answered the above listed questions truthfully and completely.

SIGNATURE: _____ DATE: _____