2008 Tax Questionnaire

Please COMPLETE and SIGN this questionnaire and RETURN this entire packet to us before we begin preparing your returns.

Please provide the following tax support documents when delivering your tax information to us for the preparation of your 2008 Individual Income Tax return. W-2s, 1099-INT, 1099-G, 1099-DIV, 1098-T, 1099-B, 1098-Mort Int, 1099-MISC, 1099-R, 1099-SSA, 1099-S, K-1s, and any other "important tax information" received by you. If you are uncertain whether we need it or not, provide the information and we will determine the tax impact.

Personal Information:

Taxpayer Name:		Taxpayer Date of Birth:	
Spouse Name:		Spouse Date of Birth:	
Home Phone:			

	Cell Phone	**Work Phone**	**Email Address**
Taxpayer:			
Spouse:			

	Yes	**No**
Were you married, divorced, or widowed at any time during the year?		
If you are married, do you and your spouse want to file separate returns?		
Did you move during 2008? If yes, provide information in the "previous" and "current" columns.		

	Previous (if you moved during 2008)	**Current**
Address:		
Dates residing at above address:	01/01/2008 -	- 12/31/2008
School District:		
Municipality:		

Electronic Filing Options:	**Yes**	**No**
If you qualify for electronic filing, would you like to file your return electronically with the IRS and the state? Please note that we do not offer Automatic Funds Withdraw. If you have a balance due, you will be required to mail in your payment with a check and a voucher.		
If you qualify for electronic filing, would you like have your copy of the tax return sent to you electronically in a PDF format?		
If you qualify for electronic filing, would you like have the supporting documentation used to complete your tax return sent to you electronically in a PDF format?		
If you have a tax refund, would you like it to be directly deposited into your bank checking account? If so, please attach a VOIDED CHECK to the questionnaire.		

Dependents:	**Yes**	**No**
Can you or your spouse be claimed as a dependent by another taxpayer?		
Were there any changes in dependents from the prior year?		

If yes and adding a dependent, please provide the following information. If more than one addition, please include on a separate attachment.

Name:	
Social Security No.:	
Date of Birth:	
No. of Months Living at Residence:	

If yes and losing a dependent, please identify below. If more than one deletion, please include on a separate attachment.

Name:	

Did you pay for childcare while you worked or looked for work?		

If yes, please provide the following information:

Provider's Name:			
Provider's Address:			
Social Security/EIN No.:			
Amounts Paid in 2008:	$		
Do you have any children under the age of 24 and were full time students with wages, interest, or dividend income over $900, or who have sold any stock in 2008?			
If yes, do you want us to prepare their return(s)?			
Did you adopt a child or begin adoption proceedings during 2008?			
Deduction Information:		**Yes**	**No**
Did you pay any student loan interest? If yes, include Form 1098-E.			
Did you pay real estate taxes on your principal residence? If yes, provide details on all real estate taxes paid in 2008 even if you have not previously filed Schedule A for itemized deductions.			
Did you make any large purchases, such as a motor vehicle or boat in 2008?			
If yes, please provide the invoice amount and sales tax paid on the transaction.			
Regarding charitable contributions, how much of your deductible contributions were made in the following forms:			
Cash:	Only list the total amount for which you have receipts. Receipts are required, regardless of the dollar amount, even for as little as a $1 contribution.	$	
Check:	For checks and credit cards, only list the amount you can substantiate with the following: (1) For separate contributions of $250 or more, you must have written acknowledgement from the charity, your canceled check is not enough; (2) For separate contributions under $250, either a bank record or a receipt is required.	$	
Credit Card:		$	
Clothing and household goods:	These must be in good condition or better. Only list the total amount you can substantiate with receipts if the contribution is $250 or greater. If over $500, please indicate the name and address of the charity:	$	
Did you pay union or professional dues? If yes, provide the amount and union/professional society name.			
Did you incur uniform costs? If yes, provide the amount.			
Do you have un-reimbursed business expenses such as supplies, travel, or meals and entertainment? If yes, provide amounts broken down by type of expense on a separate sheet and attach it to this packet.			
If you are self employed or your employer does not reimburse your business mileage, business car expenses need to be substantiated with mileage logs and trip sheets for each trip. Commuting miles between your home and a fixed work location are not considered deductible business miles.			
If yes, please provide the following information:			
Auto Make, Model, and Year:			
Date Placed in Service:			
Mileage From January 1, 2008 to June 30, 2008:			
Total Miles Driven:		Total Business Miles Driven:	
Mileage From July 1, 2008 to December 31, 2008:			
Total Miles Driven:		Total Business Miles Driven:	
Schedule D - Capital Transactions:		**Yes**	**No**
Did you sell any securities, bonds, or other investment property? If yes, please provide information related to the purchase including date(s) of purchase, # of shares acquired and cost of shares, # of shares sold, date(s) of sale, and sales price.			
Did you receive grants of stock options from your employer, exercise any stock options granted to you, or dispose of any stock acquired under a qualified employee stock purchase plan?			
If yes, please provide support (statements/schedules from your employer).			
Did you engage in any put or call transactions?			
Did you have any debts canceled, forgiven, or refinanced during 2008?			

Schedule D - Personal Residence Transactions:	**Yes**	**No**
Did you purchase or sell a personal residence in 2008? If yes, please attach the closing statements/settlement sheets. If you purchased a residence, what is the date you sold your previous residence?		
Have you refinanced a mortgage or taken out a home equity loan on your personal residence this year? If yes, did you use any of the proceeds for any other purpose than improving your principle residence?		

IRA/Pension Distributions:	**Yes**	**No**
Did you or your spouse withdraw any amounts from your Individual Retirement Account (IRA), Roth IRA, or pension plan?		
If yes, was it to acquire a principle residence or pay for qualified higher education expense?		
If yes, were any distributions from your IRA and/or Roth IRA distributed to a charitable organization?		
Did you or your spouse make a contribution to a retirement plan, 401k, SIMPLE, SEP, traditional IRA or Roth IRA that is not reported on your W-2 or K-1?		

If yes, indicate the type of plan and the amount contributed:

	Type of Plan:	Amount:
Taxpayer:		$
Spouse:		$

Did you or your spouse convert an existing IRA to a Roth IRA? If yes, provide details.		
Did you or your spouse turn age 70 ½ during the year and have money in an IRA or other retirement account without taking a distribution?		

Education:	**Yes**	**No**
Did you or your dependents incur any post-secondary education expense, such as tuition?		

If yes, indicate the dependent, the type of expenses, amount paid and year in school:

Dependent's name:	
Type of Educational Expenses:	
Amounts Paid in 2008:	
Student's year in school:	

Did you or your spouse withdraw amounts from a Qualified Education Program (Section 529 plan) or Coverdell Education Savings Account?		
Did you or your spouse make any contributions to a Qualified Education Plan (Section 529 plan) or a Coverdell Educational Savings Account during 2008?		

If yes, please enter the following information:

Name of Designated Beneficiary:	Social Security No.	State Sponsoring Plan	Type (Coverdell or 529 Plan)	Amount Contributed in 2008
				$
				$
				$

2008 Federal, State and Local Estimated Tax Payments:

	Federal		State		Local	
2008 Estimates Due:	Date Paid	Amount	Date Paid	Amount	Date Paid	Amount
1st Qtr. due 4-15-08		$		$		$
2nd Qtr. due 6-15-08		$		$		$
3rd Qtr. due 9-15-08		$		$		$
4th Qtr. due 1-15-09		$		$		$

Miscellaneous:	Yes	No
Did you receive an economic stimulus check from the federal government in 2008? If yes, provide the amount. If you do not provide an amount, we will assume you received the appropriate amount.		
Did you move to a different home because of a change in the location of your job?		
Did you or your spouse make any gifts, including birthday, holiday, anniversary, graduation, etc., with a total aggregate value in excess of $12,000 to any individual during the year?		
Did you or your spouse receive distributions from long-term care insurance contracts? If yes, include Form 1099-LTC.		
Did you purchase a new “hybrid” or alternate technology vehicle in 2008?		
If you have gambling winnings, do you have any gambling losses? If yes, provide the amount of gambling losses.		
Did you have any tax-exempt income?		
Did you receive any payments from insurance companies, legal settlements, disability payments, or other taxable income?		
Did you or your spouse have any transactions pertaining to a Health Savings Account (HSA) or Medical Savings Account (MSA) during 2008? If you received a distribution from an HSA or MSA, please attach Form 1099-HSA/MSA.		
2009 Tax Planning: Do you expect any of the following to occur in 2009?	**Yes**	**No**
A change in your marital status		
A change in the number of dependents		
A substantial change in your income		
A substantial change in your withholdings		
A substantial change in your deductions		
Authorization:	**Yes**	**No**
With your authorization, the IRS and certain states allow us to verify credits, payments, etc., for your tax account online. Do we have your authorization to view this information, if necessary?		

I (We) have submitted this information for the sole purpose of preparing my (our) tax return. Each item can be substantiated by receipts, canceled checks, or other documents. This information is true, correct, and complete to the best of my (our) knowledge.

If applicable, both taxpayer and spouse must sign.

Please print your names: ____

____ ___________________

Signature - Taxpayer Date

____ ___________________

Signature - Spouse (if applicable) Date

PLEASE RETURN THIS ENTIRE PACKET TO US.