



2009 Questionnaire

Note: This form must be completed and signed by the taxpayer(s). Changes made during return preparation must be noted on this form. This form must be retained in the client file.

Taxpayer Name _____ Social Security # _____ Date of Birth _____
As it appears on Social Security Card

Spouse Name _____ Social Security # _____ Date of Birth _____
As it appears on Social Security Card

Home Address _____ Home Ph _____
Street City State ZIP Work Ph _____

Can you or your spouse be claimed on another person's return?.....Yes or No

Do you plan to Itemize Deductions this year?.....Yes or No

Are you filing a State return this year? _____ If so, State _____ County _____ City _____

School District (if applicable) _____

Did you earn any income in another state? _____ If so, State _____ County _____ City _____

May the IRS discuss this return with the preparer?.....Yes or No

Taxpayer's Occupation _____ Spouse's Occupation _____

Can any other person(s) claim your qualifying children?.....Yes or No

Do you or your spouse wish to donate \$3 to the Presidential Election Fund? Taxpayer:.....Yes or No
(Checking Yes will not change your tax or reduce your refund) Spouse:.....Yes or No

Was your home in the US for more than half of the year?.....Yes or No

Did you recently purchase a home between 06/30/08 - 06/30/10, if so Purchase Price _____ Date _____
additional info _____

Filing Status (Circle one)

If you are married, you must file Married Filing Joint or Married Filing Separate unless you are separated and have not lived together at any time after June 30

1. **Single** – (Unmarried as of December 31st)
2. **Married Filing Joint** – (Married on Dec 31st ~ includes both incomes both must sign ~ both responsible for payment of tax, if any)
3. **Married Filing Separate** – (Married as of Dec 31st ~ report own income ~ give **name and SSN** of spouse)
4. **Head of Household** – (you can file as Head of Household only if you were unmarried or considered unmarried on the last day of the year. You also must have paid more than half the cost of keeping up a home that was the main home for more than half the year (except temporary absences, such as school) for you and any qualifying persons.
5. **Widow(er) with Dependent Children** – (dependent required ~ pay over half of household costs ~ must be single ~ may use this status up to 2 years after spouse's death.
Spouse's date of death _____

Taxpayer(s) signature(s): _____ Date ____/____/____

Dependents Full Name(s)	Age	Birth Date	SSN	Relationship	Status* Disabled Student	Months in Home
		__/__/____			A B C D <input type="checkbox"/> <input type="checkbox"/>	
		__/__/____			A B C D <input type="checkbox"/> <input type="checkbox"/>	
		__/__/____			A B C D <input type="checkbox"/> <input type="checkbox"/>	
		__/__/____			A B C D <input type="checkbox"/> <input type="checkbox"/>	
		__/__/____			A B C D <input type="checkbox"/> <input type="checkbox"/>	
		__/__/____			A B C D <input type="checkbox"/> <input type="checkbox"/>	

***Dependent STATUS (circle one)** **A)** Dependent child who lives with you. **B)** Dependent child who lives apart due to divorce or separation. **C)** Dependent but not your child who lives with you. **D)** Non dependent child who lives with you.

Child Care Information

Number of children in Day Care _____

Providers Name	Address	ID Number (SSN/EIN)	Amt Paid
		EIN?	\$
		EIN?	\$
		EIN?	\$

Amount Paid per child – Child 1 \$ _____ Child 2 \$ _____ Child 3 \$ _____ Child 4 \$ _____

Do you have deductions for any of the following items for this year? (You must have documentation for each deduction)

Alimony Traditional IRA Contributions Real Estate and/or Personal Property Taxes
 Student Loan Interest Educational Expenses Home Mortgage Interest
 Moving Expenses Medical Expenses Charitable Contributions Un-reimbursed Job Expenses

How did you hear about our services? _____

Where did you have your taxes prepared last year? _____

How many income documents are you providing? (W2s, 1099s, etc) _____

Do you owe any IRS debts, unpaid child support, student loans, state taxes, or any defaulted loans?.....Yes or No

If you took EIC last year, was the EIC reduced or disallowed for any reason other than math or clerical error? Yes or No

I, the undersigned, hereby certify that all of the information provided above is true and correct to the best of my knowledge. I further certify that all of the documents and information required to properly complete my tax return have been supplied to the preparer.

Taxpayer's signature: _____ Select 5 digit PIN # _____ Date __/__/____

Spouse's signature: _____ Select 5 digit PIN # _____ Date __/__/____