

2018

1040

US

Miscellaneous Questions

MISCELLANEOUS QUESTIONS

If any of the following items pertain to you or your spouse for 2018,
please check the appropriate box and include all pertinent details.
Attach additional schedules if necessary.

PERSONAL INFORMATION

YES

NO

Did your marital status or address change during the year?

Could you be claimed as a dependent on another person's tax return for 2018?

What is your occupation?

What is your spouse's occupation? (If appl)

DEPENDENTS

Were there any changes in dependents? If yes, describe.

Were any of your unmarried children who might be claimed as dependents 19 years of age or older at the end of 2018?

Did you have any children under age 18 on January 1, 2019 with interest and dividend income in excess of \$700, or total investment income in excess of \$1400?

HEALTH INSURANCE INFORMATION

Did you have health insurance coverage for the entire year? (COMPLETE ACA FORM 1)

Was any member of your household (spouse and/or dependents) not covered for any part of the year? (COMPLETE ACA FORM 2)

If you or anyone in your household did not have coverage for the entire year, Do you believe you meet meet one of the exemptions for health insurance coverage? (COMPLETE ACA FORM 2)

INCOME

Did you receive unreported tip income of \$20 or more in any month?

Did you cash any Series EE U.S. savings bonds issued after 1989 and pay qualified higher education expenses for yourself, your spouse, or your dependents?

Did you receive any disability income?

Did you have any foreign income or pay any foreign taxes?

PURCHASES, SALES AND DEBT

Did you start a business or farm, purchase rental or royalty property, or acquire an interest in a partnership, S corporation, trust, or REMIC?

Did you purchase or dispose of any business assets (furniture, equipment, vehicles, real estate, etc.), or convert any personal assets to business use?

Did you buy or sell any stocks, bonds or other investment property? Specify the sale of any collectibles (e.g. artwork, gems, stamps, coins) and any qualified small business stock.

Did you purchase, sell, or refinance your principal home or second home, or did you make a home equity loan?

Did you have any debts cancelled or forgiven?

Did anyone owe you money which had become uncollectible?

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RETIREMENT PLANS

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

Did you receive a distribution from a profit-sharing plan, retirement plan, or individual retirement arrangement (including Traditional, Roth, and Education IRAs)?

<input type="checkbox"/>	<input type="checkbox"/>
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Did you convert from a Traditional IRA to a Roth IRA?

<input type="checkbox"/>	<input type="checkbox"/>
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Did you contribute to a Traditional, Roth, or Education IRA?

ITEMIZED DEDUCTIONS

<input type="checkbox"/>	<input type="checkbox"/>
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Did you incur a loss because of damaged or stolen property?

<input type="checkbox"/>	<input type="checkbox"/>
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Did you work out of town for part of the year or did you use your car on the job (other than to and from work)?

<input type="checkbox"/>	<input type="checkbox"/>
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Do you plan to deduct Employee Business Mileage on your 2018 return? If so, you must provide a written statement as to the mileage you wish to deduct. (See attached statement.)

<input type="checkbox"/>	<input type="checkbox"/>
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Do you plan to deduct Charitable Contributions on your 2018 return? If so, you must provide a written statement as to the contributions you wish to deduct. (See attached statement)

MISCELLANEOUS

<input type="checkbox"/>	<input type="checkbox"/>
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Are you retired military?

<input type="checkbox"/>	<input type="checkbox"/>
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Do you, or your spouse (if applicable) want to allocate \$3 to the Presidential Election Campaign Fund?

<input type="checkbox"/>	<input type="checkbox"/>
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May the IRS discuss this return with the preparer?

<input type="checkbox"/>	<input type="checkbox"/>
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Did you have an interest in or signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account?

<input type="checkbox"/>	<input type="checkbox"/>
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Did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust?

<input type="checkbox"/>	<input type="checkbox"/>
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Did you have a medical savings account (MSA), a Medicare + Choice MSA, or acquire an interest in a MSA or a Medicare + Choice MSA because of the death of the account holder? Or, were you a policyholder who received payments under a long-term care (LTC) insurance contract or received any accelerated death benefits from a life insurance policy?

<input type="checkbox"/>	<input type="checkbox"/>
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Did you incur moving expenses due to a change of employment?

<input type="checkbox"/>	<input type="checkbox"/>
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Did you incur any adoption expenses?

<input type="checkbox"/>	<input type="checkbox"/>
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Did you engage the services of any household employees?

<input type="checkbox"/>	<input type="checkbox"/>
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Were you notified or audited by either the Internal Revenue Service or State taxing agency?

<input type="checkbox"/>	<input type="checkbox"/>
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Did you or your spouse make any gifts to an individual that total more than \$10,000, or any gifts to a trust?

<input type="checkbox"/>	<input type="checkbox"/>
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FOR NEW CLIENTS: What/who referred you to this firm?

_____ Newspaper (please specify) _____

_____ TV/Radio (please specify) _____

_____ Referral (please specify) _____

_____ Other (please specify) _____

Initial