

## Miscellaneous Information

Name:

SSN:

Yes No

### Business Information

- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Did you start a new business or purchase any rental property during 2009?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Have you purchased any business assets (furniture, equipment, etc.) or converted any assets to business use? If yes, please list on an attached sheet the date placed in service, cost or basis of asset, business use percentage, etc. |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Did you dispose of any business assets (including real estate)? If yes, please list on an attached sheet the date removed from service, selling price and expense of sale.  |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Did you own rental property? What percentage of time did you spend managing your rentals? _____   |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Did you purchase any gasoline, diesel, or special fuels for non-highway business use?   |

Yes No

### Other Information

- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Were any tuition costs paid during 2009 (even if classes were attended in another year)?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Did anyone in your household attend higher education classes in 2009?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Did you incur a loss due to damaged or stolen property?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Did you purchase, sell, or refinance your principal home or your second home or make a home equity loan during the year? If yes, please provide all escrow, closing, and other pertinent documentation and information. |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. If yes to question 4, was the First-Time Homebuyer Credit taken on the home?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Did you purchase a home, for the first time, as a principal residence between April 8, 2008 and December 1, 2009? If yes, please provide closing documentation.   |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Did you purchase a new vehicle between February 18, 2009 and January 1, 2010?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. Did you make any gifts to any one person in 2009 in excess of \$13,000? If so, are you splitting this gift with your spouse?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. Did you pay wages to any household employees (babysitter, housekeeper, nanny, etc.)?  |

### To itemize deductions, bring receipts and documentation for these types of expenses:

- |                          |   |
|--------------------------|---|
| <input type="checkbox"/> | Prescriptions, first-aid  |
| <input type="checkbox"/> | State/local income taxes  |
| <input type="checkbox"/> | Mortgage interest   |
| <input type="checkbox"/> | Tax preparation fees  |
| <input type="checkbox"/> | Gambling losses (up to amount of winnings)  |
| <input type="checkbox"/> | Cash donations to charity (provide all receipts)  |
| <input type="checkbox"/> | Medical/Dental/Vision expenses and insurance premiums, mileage and lodging for seeking medical care (but not meals) |
| <input type="checkbox"/> | Real estate and personal property taxes paid in 2009  |
| <input type="checkbox"/> | Unreimbursed employee/work-related expenses (if self-employed, do not include items reported on Schedule C)         |
| <input type="checkbox"/> | Fair market value of property donated to charity  |
| <input type="checkbox"/> | Purchase price of new goods donated or used in volunteer work   |

Comments: \_\_\_\_\_

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