

# Sauppé Tax Service LLC

## New Client Tax Questionnaire 2014

Name (F,L): \_\_\_\_\_ Spouse: \_\_\_\_\_

Taxpayer Soc. Sec# \_\_\_\_\_ Spouse Soc. Sec. # \_\_\_\_\_

Taxpayer Date of Birth \_\_\_\_\_ Spouse DOB: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, & Zip: \_\_\_\_\_

Primary Phone # \_\_\_\_\_ Secondary Phone# \_\_\_\_\_

E-mail: \_\_\_\_\_

Routing # \_\_\_\_\_ Bank Account # \_\_\_\_\_

### Eligible Dependents for 2014

Please list all eligible dependents for 2014. \*\*Your child born prior to 12/31/1995 must be a full-time student for at least five months during the year and under the age of 24 all year. Any child who does not meet this age/student test or any other dependent must be a relative, usually must be a member of your household, must have income below \$3,950 for the year, and you usually must have contributed more than 50% of their support.

<i>Name</i>	<i>Date of Birth**</i>	<i>Social Security #</i>	<i>Eligible for 2014</i>	<i>Child Care Expenses***</i>
			YES NO	\$
			YES NO	\$
			YES NO	\$
			YES NO	\$

\*\*\* Be sure to include documentation and receipts for all child care expenses

Estimated tax payments (EFT's or checks written by you) FOR 2014, including payments in the first quarter of 2014. This does NOT mean withholding from W-2's or 1099's

Federal		State		City		School Dist/REAL ESTATE	
DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT	DATE	AMOUNT

Because of IRS regulations, your federal and state returns will be electronically filed unless you complete and return the required IRS waiver of electronic filing prior to the completion of your return. Any refund on these returns will be deposited into the bank account you provide via a void or cancelled check (do NOT send a deposit slip). By signing below you are confirming that you have included all income received during the year and that you have read the terms of engagement provided to you and agree with all items.

Signature of taxpayer \_\_\_\_\_ Signature of spouse \_\_\_\_\_

Taxpayer occupation \_\_\_\_\_ Spouse occupation \_\_\_\_\_

Please turn over - continued on back.

1	What was your marital status on 12/31/2014? _____ Was this the same status on 12/31/2013?	YES	NO
2	In 2014, did you have a foreign bank account and/or give or receive a distribution from a foreign trust?	YES	NO
3	Did you purchase any goods online or through catalogs in 2014 that did NOT include sales tax? If yes, please provide copies of all invoices for these purchases.	YES	NO
4	Do you have written documentation for all business miles? If yes, you MUST complete the mileage section on the bottom of this form. If no, you cannot claim mileage.	YES	NO or N/A
5	Did you pay or receive alimony in 2014? If yes, complete provide details	YES	NO
6	Did you pay child care expenses? If yes, please include provider's name, address, and social security number, and show total paid in dependent section on the front.	YES	NO
7	Did you have any substantial (net out of pocket expenses greater than 10% of your AGI) casualty or theft losses in 2014 that were NOT covered by insurance?	YES	NO
8	Did you buy a new home this year or refinance an existing home? If yes, please provide the settlement statement from the purchase or refinance.	YES	NO
9	Did you make contributions in 2014 to a charity that you wish to claim on your tax return? If yes, please complete the charitable donation recap found on our website.	YES	NO
10	Did you contribute to any state 529 plan in 2014? If yes, please provide copies of the statements showing the plan sponsor, beneficiary, and total contributed for the year.	YES	NO
11	Did you pay any student loan interest? If yes, submit copies of all 1098E's received.	YES	NO
12	Did you pay any post-secondary (beyond high school) expenses for you, your spouse, or your dependents? This does NOT include student loan interest. If yes, please provide Form 1098T and <b>DETAILED</b> documentation on all amounts paid during this year.	YES	NO
13	If you answered YES to question 12, do any of the students involved have a felony drug conviction? If yes, provide details.	YES	NO
14	If you own rental property or had your own business (even on a small scale), did you make any payments in 2014 that would require you to file Forms 1099?	YES	NO or N/A
15	If you answered yes to question 14, did you or will you file all required Forms 1099?.	YES	NO or N/A
16	Did you receive a distribution from a Health Savings Account? If yes, please provide details on all medical bills you paid during the year for you or any dependents.	YES	NO
17	Do you have any children under the age of 18 with unearned ( <u>not</u> from a job) income over \$300? If yes, please provide details.	YES	NO
18	Did you make a gift to any individual during the year worth \$14,000 or more? If yes, provide name of recipient, address, description of item given, and amount.	YES	NO
19	If you are a full-time teacher, did you pay for any supplies for your classroom in 2012? If yes, please provide details on items purchased and amounts.	YES	NO or NA
20	Did you purchase a car, boat, truck, or motor home in 2014? If yes, please provide a copy of the invoice showing make and model of car and sales tax paid.	YES	NO
21	Did you (taxpayer or spouse) contribute to a retirement account during 2014? If yes, please provide the year end statement for any accounts with new money added.	YES	NO
22	Are you, your spouse, and ALL eligible dependents shown on the front of this form covered by a qualified health insurance plan for all of 2014? If one or more individuals was not covered for all 12 months, please provide details including any exemption certificates you may have.	YES	NO
23	Did you obtain insurance through the Marketplace (healthcare.gov)? If so you MUST include Form 1095-A	YES	NO

#### 2014 Mileage Recap

1 <sup>st</sup> Business	2 <sup>nd</sup> Business	Charitable	Medical	Moving	Personal	Total All Miles

Car Information: Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_

Your signature(s) on page one verifies that this log is a true and accurate reflection of mileage for 2012 and that you have the records to substantiate. The total of all the separate categories should equal the amount shown in the "Total" box (for example. 1<sup>st</sup> Business 1733 miles, Medical 210, Personal 9379 for a Total of 11,322 miles).