



9140 Ustick Road  
Boise ID, 83704  
208-377-4303

Appointment Date & Time

Take the time to review this questionnaire and mark the appropriate box for each question. Mark ?? if you are unsure or the answer is maybe. Your return will be prepared based on information you provide, so it is vital that this information is accurate and complete.

**Bring your questions, this questionnaire and supporting documentation** (anything in parentheses) to your appointment. With teamwork, we can prepare your return correctly and efficiently. **New clients**, please bring the most recent tax return you have filed.

Call **208-377-4303** to make your appointment. See you soon!

Yes	No	??	Last year, did you or your spouse
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Change your name, address, email address, phone number or marital status?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gain or lose any dependents, adopt or plan to adopt?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have children, family members or other people living with you?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have family members that you support financially?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have any children that lived with another parent or release an exemption to a non-custodial parent? (Form 8332 signed by the custodial parent)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have a dependent who received wages, investment income, Social Security, or other income?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inform the IRS of identity theft or receive a IP PIN? (IP PIN Letter from the IRS)

Yes	No	??	Healthcare - Last year, did you or your spouse
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have health insurance coverage for all 12 months of 2017 for all members of your household? (1095-A, 1095-B or 1095-C)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Purchase health insurance through YourHealthIdaho.org or other healthcare exchange? (1095-A)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Receive an exemption from YourHealthIdaho.org or other healthcare exchange website? (Exemption Letter)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Make withdrawals from or contribution to a Health Savings Account - <i>HSA</i> , Medical Savings Account - <i>MSA</i> , or Idaho Medical Savings Account? (1099-SA, 5498-SA or deposit record)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pay health insurance premiums or long-term care insurance premiums, including COBRA, Tricare or Medicare? (Bring summary totals)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pay significant medical expenses, enough to itemize, or will you file for the Circuit Breaker? If so, bring a summary of expenses. Include health insurance premiums, hospital bills, prescription drugs, copays, lab fees, eye glasses, hearing aids, dental, lodging, mileage, etc. Do not include expenses paid or reimbursed by insurance or from a Health Savings Account, Flex 125 Plan or other pretax funds.

Yes	No	??	<b>Income - Last year, did you or your spouse receive</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Salary, Wages, Tips, Bonuses, Commissions? (Form W-2)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tips not reported to your employer?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disability income from insurance or worker's compensation? (Form 1099-R, W-2)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unemployment compensation? (Form 1099-G)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Social Security or Railroad Retirement Benefits? (Form SSA-1099, RRB-1099)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Payments from IRAs, Pensions, Annuities? (Form 1099-R)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Refund of state income taxes? (Form 1099-G)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Self-employment income? (Form 1099-MISC, 1099-K and Income & Expense Summary*)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Payments for work performed that was not reported on Forms W-2 or 1099-MISC? This includes car sharing, freelancing, fashion sharing, crowdfunding and fantasy football.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Income or loss from the sale of equipment or items used in a trade or business?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interest or dividends from checking or savings accounts, CDs, bonds, stocks, brokerage accounts? (Form 1099-INT, 1099-DIV, 1099-OID)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Income or loss from the sale of stocks, bonds, real estate, or an interest in a Partnership or S Corp? (Form 1099-S, 1099-B, Closing Statement)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stock options or grants from an employer? Did you exercise options or grants or let them expire?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proceeds from investments, securities, calls, puts, or short sales not reported on 1099-B?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Income or loss from renting real estate or personal property? (Form 1099-MISC and Income & Expense Summary*)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rent out a room in your home or rent out your whole home, even for short term?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Income or loss from Partnerships, Royalties, S Corporations, Trusts, Estates? (Schedule K-1) You do not need the K-1s to make your appointment, you can provide them later.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Income or loss from Farming? (1099-MISC and Income & Expense Summary*)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Foreign income or income from any source outside the US?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gambling or lottery income? (Form W-2G) You can deduct losses up to total winnings.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Income from prizes, awards, jury duty, hobbies, online sales, bartering, inheritance, Alaska Permanent Fund Dividends, taxable scholarships, etc.?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Alimony income or separate maintenance payments? Do not include child support.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cancellation or forgiveness of any debts? (Form 1099-C, 1099-A)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reimbursement for previous or currently deductible expenses, for example, moving, job, medical, etc.?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Nontaxable income, disability, VA benefits, SSI or other income not described above?

\*See our website, [www.Adataxpros.com](http://www.Adataxpros.com), for Income & Expense Summary worksheets.

Yes	No	??	<b>Expenses - Last year, did you or your spouse pay</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Expenses related to producing income as self-employed, from a rental or other business expenses? (Expense Summary*)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contributions to or convert/rollover a retirement account, including IRA, 401K, Roth IRA, SEP, SIMPLE or other?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Child or dependent care expenses, e.g., daycare? (Statement from provider with EIN)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	State income tax <u>paid in</u> 2017, including amounts due from prior years?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Property tax including primary home, vacation home and investment property?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Irrigation tax or personal property tax including RV sticker fee?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sales tax from a large purchase, for example, vehicles, boats and airplanes?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Buy or refinance your home, vacation home or investment property? (Closing statement)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Home mortgage interest, points or home equity loan interest? (Form 1098)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Investment expenses, portfolio management fees, investment or margin interest?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cash charitable donations or charitable travel? (Receipts, mileage log)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Noncash charitable donations? (Receipts with date, description and fair market values)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job-related expenses not paid or reimbursed by your employer, for example, tools, union dues, travel, professional dues, home office, vehicle expenses other than to and from work? (Expense summary*)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other deductible expenses, e.g., tax prep fee, safe deposit box rental, gambling losses?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Moving expenses to relocate for work, for example mileage, storage fees, lodging?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Alimony or separate maintenance payments? Do not include child support. (Recipient's name & Social Security number)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Anyone to work in your home on a regular basis? For example, if you paid a nanny, housekeeper, babysitter, healthcare provider, or gardener, more than \$1,900 for the year, or \$1,000 in any quarter, you may have a household employee.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Incur casualty or theft losses, for example, fire, flood, damaged or stolen property?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Purchase a new plug-in electric vehicle?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Purchase fuel for non-highway vehicles used in farming or business?

Yes	No	??	<b>Education - Last year, did you or your spouse</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Withdraw funds from a 529 College Savings Plan or 530 Coverdell Education Savings Account? (1099-Q)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contribute to a 529 College Savings Plan or Coverdell Education Savings Account?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pay college or educational expenses for you or your dependents? (Form 1098-T, <b>AND</b> Account Statement from the school with detailed summary of payments, scholarships and charges, <b>AND</b> receipts for books and other required course materials)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pay student loan interest? (Form 1098-E)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Purchase classroom supplies or equipment or pay for professional development as a teacher, teacher's aide, or eligible educator?

Yes	No	??	Idaho Specific - Last year, did you or your spouse
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Live in Idaho all of 2017?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Work outside of Idaho or have other out-of-state income?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Maintain a home for an elderly or developmentally disabled family member?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Receive food stamps, reside in the US illegally, or were you incarcerated? This affects your grocery credit eligibility and we will need to know how many months.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Make out-of-state purchases including internet or mail order, where sales tax was not collected?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Make energy-efficient improvements to your home, e.g., windows, insulation, etc.?

Yes	No	??	Misc - Last year, did you or your spouse
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Were you blind, disabled, or turn 65 or 70 1/2?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	File a federal return last year with a loss carryover or net operating loss?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Receive a letter from the IRS or State Tax Commission? (Bring letters)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Make estimated Federal and/or State tax payments? (Amounts and dates)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Give gifts to anyone with an accumulated value of more than \$14,000 per recipient?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Receive the First-time Homebuyer Credit in 2008?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Declare bankruptcy, experience foreclosure or repossession of your home or other property? (1099-C)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Receive a distribution from or were the grantor of, or transferor to, a foreign trust?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Own foreign financial assets including property?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have a financial interest in or signature authority over a financial account located in a foreign country? Financial accounts include bank account, securities account, brokerage account, investment account and other financial assets.

Yes	No	??	This year, do you or your spouse
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Want your refund to be direct deposited? Routing number _____ Account number _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Would you like to have your refund applied to next year's taxes?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Expect significant changes in income or expenses in the next year?

What is the best phone number or email to contact you? \_\_\_\_\_

**Please do not email sensitive information.** Use our new Portal (SecureFilePro) to send and receive documents. The login link is on our website. [www.adataxpros.com](http://www.adataxpros.com)

As part of an effort to combat stolen-identity tax fraud, we are able to enter driver's license numbers or state-issued id card numbers with your return. Providing us with your identification is strictly voluntary and may help speed the processing of your return. Bring your ID if you want to use this extra security measure.