

SETH ENTERPRISES
CLIENT QUESTIONNAIRE

Please check the appropriate box and include all necessary details

Yes **No**

Personal Information

- Did your marital status change during the year? If yes, explain _____ Yes No
- Did your residence change during the year? Yes No
- Can you be claimed as a dependent by another taxpayer? Yes No
- Were you or your spouse permanently disabled in 2007? Yes No

Dependent Information

- Were there any changes in dependents from the prior year? If yes, explain _____ Yes No
- Do you have any children under age 18 with investment income in excess of \$850? Yes No
- Did you, or will you, contribute to a Sec 529 plan or Coverdell Education Savings account this year? Yes No
- Did you maintain a home for someone not claimed as a dependent? Yes No
- Did you pay for child care (baby sitting, day care)? If yes, provide name, address, Soc Sec#/EIN, and amount paid to each provider per child. Yes No

Purchases, Sales and Debt Information

- Did you start or dispose of a business during the year? Yes No
- Did you acquire a new or additional interest in a partnership or S Corporation? Yes No
- Did you sell, exchange, or purchase any real estate during the year? If yes, provide HUD1 closing statements Yes No
- Did you dispose of any stock/mutual fund during the year? Provide original cost, sales price, and purchase/sale dates Yes No
- Did you participate in puts, calls or "short the box" stock transactions? Yes No
- Did you take out a home equity loan or line of credit this year OR refinance any property? Provide HUD1 closing stmt. Yes No

Income Information

- Did you have any foreign income or pay any foreign taxes? Yes No
- Did you receive any income from property sold prior to this year? Yes No
- Did you receive interest or dividend income on accounts jointly held with another taxpayer (except spouse & children) Yes No
- Did you receive any lump-sum payments from a pension or profit-sharing plan? Yes No
- Did you make any rollovers, withdrawals, or conversions from any retirement account? Yes No
- Did you receive any disability or unemployment income? Yes No
- Did you cash in any US Savings bonds? Yes No
- Did you receive employer-provided educational assistance? Yes No
- Did your college student receive educational benefits? Yes No
- Did you receive a damage award for personal injury, sickness, or discrimination? Yes No
- Did you pay or receive alimony (not child support)? Yes No
- Did you receive rental income? If yes, refer to Tax Document Checklist (pg 3) for required information. Yes No

Deductions

- Did you make mortgage insurance premium payments on a Mortgage Insurance contract started in 2007? Yes No
- Did you incur an unreimbursed casualty or theft loss greater than 10% of your income? Yes No
- Do you have a home equity loan/line of credit that exceeds \$100,000 (\$50,000 if single/MFS)? Yes No
- Did you qualify for Social Security benefits such as retirement, death, disability or Medicare? Yes No
- For cash or check contributions over \$250 each, do you have written acknowledgement from the charity? Yes No

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	Yes	No
Did you have any unreimbursed employee expenses or an allowance?	<input type="checkbox"/>	<input type="checkbox"/>
Did you use your car on the job (other than for commuting)?	<input type="checkbox"/>	<input type="checkbox"/>
Did you work out of town for part of the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you have educational expenses for you or your dependent(s)?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay any student loan interest this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did medical expenses exceed 7.5% of your income?	<input type="checkbox"/>	<input type="checkbox"/>
Did you have any moving or job-seeking expenses?	<input type="checkbox"/>	<input type="checkbox"/>
Did you purchase a car, boat or plane? If yes, bring documentation showing sales taxes paid.	<input type="checkbox"/>	<input type="checkbox"/>
Are you a teacher who has unreimbursed supplies? If yes, amount \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a Health Savings Account (HSA) or Medical Savings Account (MSA)? If yes, attach Form 1099-SA Also provide (a) deductible \$, (b) contribution \$, (c) qualified withdrawals	<input type="checkbox"/>	<input type="checkbox"/>
If you worked for yourself, did you pay health insurance premiums for yourself and family? If yes, premium amount for year \$ _____	<input type="checkbox"/>	<input type="checkbox"/>
Did you incur early withdrawal penalty on your certificates of deposit?	<input type="checkbox"/>	<input type="checkbox"/>

Tax Credit Information

Have you started an adoption process?	<input type="checkbox"/>	<input type="checkbox"/>
Did you start a new pension plan this year for your business?	<input type="checkbox"/>	<input type="checkbox"/>
Did you purchase a hybrid (gas/electric) auto? If yes, list make, model, and year	<input type="checkbox"/>	<input type="checkbox"/>
Did you make energy-efficient home improvements to your personal residence?	<input type="checkbox"/>	<input type="checkbox"/>
Did you own or invest in a business that would be considered manufacturing?	<input type="checkbox"/>	<input type="checkbox"/>

Miscellaneous Information

Are you in the military?	<input type="checkbox"/>	<input type="checkbox"/>
Did you or your spouse make gifts of more than \$12,000 to any individual?	<input type="checkbox"/>	<input type="checkbox"/>
Do you (and/or your spouse) want to allocate \$3 to the Presidents Election Campaign Fund?	<input type="checkbox"/>	<input type="checkbox"/>
Did you engage in any bartering transactions?	<input type="checkbox"/>	<input type="checkbox"/>
Are you covered by a pension plan (even if you do not contribute)?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make any Roth or traditional IRA contributions?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever made a non-deductible IRA contribution?	<input type="checkbox"/>	<input type="checkbox"/>
Could you contribute more into retirement before April 15 (if qualified to do so)?	<input type="checkbox"/>	<input type="checkbox"/>
Do you own stock options? Did you exercise any in 2007?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a household employee?	<input type="checkbox"/>	<input type="checkbox"/>
Has the IRS, state or local taxing authority sent any notices/ correspondence? If yes, explain _____	<input type="checkbox"/>	<input type="checkbox"/>
Would you like to have your refund deposited directly to your bank account? If yes, please attach a voided check.	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a bank account, trust, or other financial accounts in a foreign country?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a current will and power of attorney for health care and financial decisions?	<input type="checkbox"/>	<input type="checkbox"/>
Do you expect significant changes in income, expenses or dependents in 2008? If yes, explain _____	<input type="checkbox"/>	<input type="checkbox"/>