NEW CLIENT QUESTIONNAIRE

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☐ ☐ **1.** Do you have at least three years of prior tax returns available? *(Provide)*

☐ ☐ **2.** Did you receive a first-time homebuyer credit in 2008? If yes, do you still reside in that home?

☐ ☐ **3.** In 2020, did you have a qualified retirement plan distribution that you elected to report over three years?

☐ ☐ Have you reinvested or contemplated the reinvestment of part or all of any qualified retirement plan withdrawals made in 2020?

☐ ☐ **4.** Are you aware of any suspended losses from passive activities such as rental properties?
If uncertain, please provide all previous tax returns available starting with the year the property was acquired.

☐ ☐ **5.** Are you aware of any capital loss carryovers?

☐ ☐ **6.** Are there qualified business losses reported since 2022?

☐ ☐ **7.** Do you have any net operating losses? *(If so, please provide information dating back to when the loss was first incurred.)*

☐ ☐ **8.** Did you report any charitable contribution carryovers on previous returns? If yes, please provide substantiation of the contribution showing the date, the donee, the amount, and the type of charitable gift (e.g., cash, non-cash, capital gain property).

☐ ☐ **9.** Do you have any tax credit carryovers from past years, such as a foreign tax credit or a minimum tax credit? *(Please provide)*

☐ ☐ **10.** Were any of your debts forgiven in past years? How was any exclusion from income addressed?

☐ ☐ **11.** Are any basis calculations available for your investments? *(Please provide them.)*

☐ ☐ **12.** Do you have any depreciable assets? *(If yes, please provide depreciation schedules.)*

☐ ☐ **13.** Do you have any investments in partnerships or S corporations? *(If yes, please provide the basis of your investments in them.)*

☐ ☐ **14.** Have you taken any education credits in prior years? *(If yes, when were they taken and for which individual in the household?)*

☐ ☐ **15.** Have you created an IRS online account to access your tax records?

Sign: _____   Date: _____