

## Tax Plan Client Survey

### Filing Status:

- Single
- Head of Household
- Married filing Jointly
- Married filing Separately

### Income and Tax: (Optional)

AGI:

*Form 1040, Line 38*

\_\_\_\_\_

Taxable Income:

*Form 1040, Line 43*

\_\_\_\_\_

AMT:

*Form 1040, Line 45*

\_\_\_\_\_

*This information is used to estimate potential tax savings from implementing these strategies. If no income or tax information is available, no specific savings estimates will be possible.*

### Your Family:

Code*	First Name	Last Name	Birthdate
T			

\*Codes: T = Taxpayer S = Spouse C = Child D = Other Dependent

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

City, State, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Home & Lifestyle

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Rent your home</li> <li><input type="checkbox"/> Own your home</li> <li><input type="checkbox"/> Plan to buy a second home</li> <li><input type="checkbox"/> Own a 2<sup>nd</sup> home (State: _____)</li> <li><input type="checkbox"/> Plan to retire to that home/state</li> <li><input type="checkbox"/> Active duty in U.S. military</li> <li><input type="checkbox"/> Member of clergy</li> <li><input type="checkbox"/> Working abroad</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Plan to marry (within 12 months)</li> <li><input type="checkbox"/> Plan to divorce (within 12 months)</li> <li><input type="checkbox"/> Expect a baby (within 12 months)</li> <li><input type="checkbox"/> Pay daycare costs</li> <li><input type="checkbox"/> Pay or receive alimony or child support</li> <li><input type="checkbox"/> Saving for college</li> <li><input type="checkbox"/> Paying college tuition</li> <li><input type="checkbox"/> Supporting parents financially</li> <li><input type="checkbox"/> Owe \$10,000+ in unsecured debt</li> </ul> |
|---|--|

## Employment Benefits

**Self**

**Spouse**

*Check the box if you or your spouse receives benefits from an **outside employer** only. If you're self-employed or you own your own business, use the next section.*

Annual salary + bonus or commission

Retired, or retiring within 12 months

SIMPLE IRA or SAR-SEP

401(k) plan

403(b) plan

Flexible spending account: healthcare

Flexible spending account: daycare

Health Savings Account

Incentive stock options

Nonqualified stock options

Restricted stock

Employee stock purchase plan

Nonqualified deferred compensation

Employer stock in retirement plan

Unreimbursed employee business expenses

## Your Business

**Business #1**

**Business #2**

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### Ownership and Income:

Business name

What percentage of this business do you own yourself?

What percentage of this business does your spouse own?

What is this business's net income?

*"Net Income" includes net profit from a sole proprietorship, ordinary income from a partnership or LLC, and net profits from S and C corporations. Don't include salary you draw from your corporation or guaranteed payments you draw from your partnership or LLC.*

Startup (less than 2 years old)

Part-time or sideline business

Personal service business

*Check here if your business's principal activity involves personal services in the fields of health, law, engineering, architecture, accounting, actuarial science, performing arts, or consulting.*

Business owns capital equipment (machinery, vehicles, etc.)

Business owns or occupies real estate

Business occupies a home office

I/we intend to sell this business

I/we intend to leave this business to family

### Choice of Entity: (Check *all* that apply)

Proprietorship or single-member LLC

Partnership or multi-member LLC

S corporation

C corporation

### Salaries and Employees:

Yourself (salary or guaranteed payments only)

*Enter your salary as reported on Form W2 if your business is incorporated or "guaranteed payments" you draw from your partnership or LLC.*

Your spouse (salary or guaranteed payments only)

Minor child or children

Adult child or children

Non-family employees

Non-family payroll (annual amount)

*"Payroll" includes employees only, and not independent contractors.*

### Benefit Plans Offered:

Group health insurance

Health Savings Accounts

Medical expense reimbursement plan

Flexible spending account: healthcare

Flexible spending account: daycare

Education assistance plan

Nonqualified deferred compensation plan

SIMPLE IRA

SEP-IRA

Profit sharing/money purchase plan

401(k) plan

Defined benefit plan

## Your Investments

Self	Spouse	<b>Objectives:</b>
<input type="checkbox"/>	<input type="checkbox"/>	Collect Social Security (amount)
<input type="checkbox"/>	<input type="checkbox"/>	Invest primarily for income
<input type="checkbox"/>	<input type="checkbox"/>	Invest primarily for growth
<input type="checkbox"/>	<input type="checkbox"/>	Invest for both income and growth
<input type="checkbox"/>	<input type="checkbox"/>	Manage IRA or qualified retirement plan assets
<input type="checkbox"/>	<input type="checkbox"/>	Manage Roth IRA assets
<input type="checkbox"/>	<input type="checkbox"/>	Own permanent life insurance or annuities
		<b>Taxable Accounts:</b>
		<i>Check if you hold any of these investments <b>outside</b> IRAs or qualified retirement plans:</i>
<input type="checkbox"/>	<input type="checkbox"/>	Cash, CDs, or money market funds
<input type="checkbox"/>	<input type="checkbox"/>	Taxable bonds (or bond funds)
<input type="checkbox"/>	<input type="checkbox"/>	Municipal bonds (or municipal bond funds)
<input type="checkbox"/>	<input type="checkbox"/>	Stocks (or stock funds)
<input type="checkbox"/>	<input type="checkbox"/>	Real estate investment trusts (including mutual funds)
<input type="checkbox"/>	<input type="checkbox"/>	Options, futures, or commodities
<input type="checkbox"/>	<input type="checkbox"/>	Oil & gas, equipment leasing, or timber investments
<input type="checkbox"/>	<input type="checkbox"/>	Low-income housing tax credits
		<b>Advanced Strategies:</b>
<input type="checkbox"/>	<input type="checkbox"/>	Pay asset-management or financial planning fees
<input type="checkbox"/>	<input type="checkbox"/>	Invest on margin
<input type="checkbox"/>	<input type="checkbox"/>	Periodically or regularly rebalance your portfolio
<input type="checkbox"/>	<input type="checkbox"/>	Day-trade or use market-timing strategies
<input type="checkbox"/>	<input type="checkbox"/>	Sell stocks short
<input type="checkbox"/>	<input type="checkbox"/>	Hold \$100,000+ gains in your portfolio
<input type="checkbox"/>	<input type="checkbox"/>	Hold \$100,000+ gain in a single security
<input type="checkbox"/>	<input type="checkbox"/>	Hold \$100,000+ in unrealized portfolio losses
<input type="checkbox"/>	<input type="checkbox"/>	Hold \$100,000+ in capital loss carryforwards
		<b>Real Estate Investments:</b>
		<i>Check these boxes for real estate investments, not your primary or second home.</i>
<input type="checkbox"/>	<input type="checkbox"/>	Own real estate in your personal name (individually)
<input type="checkbox"/>	<input type="checkbox"/>	Own real estate in your personal name (jointly with your spouse)
<input type="checkbox"/>	<input type="checkbox"/>	Own real estate through an LLC/S corp (individually)
<input type="checkbox"/>	<input type="checkbox"/>	Own real estate through an LLC/S corp (jointly with spouse)
<input type="checkbox"/>	<input type="checkbox"/>	Own real estate through an LLC/S corp (with nonfamily partners)
<input type="checkbox"/>	<input type="checkbox"/>	Own real estate as a limited partner
<input type="checkbox"/>	<input type="checkbox"/>	Wholesale or “flip” property (individually)
<input type="checkbox"/>	<input type="checkbox"/>	Wholesale or “flip” property (through LLC or S corporation)
<input type="checkbox"/>	<input type="checkbox"/>	Invest in mortgage notes or tax lien certificates
<input type="checkbox"/>	<input type="checkbox"/>	Report farm income or loss
<input type="checkbox"/>	<input type="checkbox"/>	Qualify as a “real estate professional”