

Client Information Sheet

Check ☒ the box to indicate same as prior year.

Tax Year _____

Taxpayer _____ DOB _____ SS# _____

☐ Spouse _____ DOB _____ SS# _____

☐ Current address: _____

☐ If filing state return, Taxpayer State _____ License # _____ Issue Date _____ Exp Date _____

☐ If filing state return, Spouse's State _____ License # _____ Issue Date _____ Exp Date _____

Contract Information

☐ Home phone _____ ☐ Cell _____ ☐ Work _____

☐ Taxpayer email _____ ☐ Spouse email _____

Dependents (or persons living in your household eligible to be claimed)

☐ Name _____ DOB _____ SS# _____

☐ Name _____ DOB _____ SS# _____

☐ Name _____ DOB _____ SS# _____

Are any of the above at least part time college students? _____

General Questions

Did you or your spouse receive Unemployment in 2025? If yes, provide statement ☐ Yes ☐ No

Did you **buy and/or sell a house** in 2025? If yes, provide closing statement ☐ Yes ☐ No

Did you **buy or sell any stock** in 2025? If yes, provide 1099 ☐ Yes ☐ No

Did you buy, sell, exchange, or send any **virtual currency**? If yes, provide document ☐ Yes ☐ No

Did you start a **new business or rental property** this year? If yes, provide documents ☐ Yes ☐ No

Did you buy any **clean energy new or used vehicle**? If yes, provide registration ☐ Yes ☐ No

Did you buy a **new car assembled in USA** in 2025 and finance it? If yes, provide documents ☐ Yes ☐ No

Did you install any **alternative energy equipment** in your residence such as a solar water heater, solar electricity equipment (photovoltaic) or fuel cells? If yes, provide the certificate ☐ Yes ☐ No

Did you install any **alternative energy** improvements or energy property in your residence? ☐ Yes ☐ No
such as exterior doors, windows, insulation, central air conditioning or water heater? If yes provide details

Please continue on reverse side

- Did you pay **sales tax** on any major purchases in 2025? ☐ Yes ☐ No
- Did you pay for **childcare** while you worked or looked for work? *If yes provide details* ☐ Yes ☐ No
- Did you donate to a **qualified charity**? (Go Fund Me or Personal do not apply) ☐ Yes ☐ No
- Were you or any dependents enrolled at least part time in any **higher education**? ☐ Yes ☐ No
If yes, provide Form 1098-T (Tuition)
- Did you make any **gifts** over \$19,000 to any individual in 2025? ☐ Yes ☐ No
- Do you have a **medical or health saving account**? *If yes, provide statement* ☐ Yes ☐ No
- Do you have a **foreign bank** account? ☐ Yes ☐ No
- Did you or your dependents become **disabled** during the year? *If yes, provide doctor certification* ☐ Yes ☐ No
- Did you have **marketplace health insurance** during 2025? *If yes, provide Form 1095A* ☐ Yes ☐ No
- Were you notified by the IRS or your State of any **changes to a tax return**? *If yes, provide letter* ☐ Yes ☐ No
- Were you paid **overtime** or receive any **tips** during 2025? *If yes, provide last pay stub* ☐ Yes ☐ No
- If you are 73 or older, have you started your **mandatory retirement withdraws**? ☐ Yes ☐ No
- Did you bring us **all tax forms** (W-2, 1099's etc) you received for income in 2025? ☐ Yes ☐ No
- Do you anticipate any significant **changes in income** in **2026**? ☐ Yes ☐ No

Please explain _____

Preferences

Refund from IRS ☐ Direct Deposit ☐ IRS issued credit card
Balance Due to IRS ☐ Direct Debit ☐ Mail in check

Bank Account information for IRS withdraw or deposit

☐ Bank name _____ ☐ Account type - Checking _____ Saving _____ Joint _____
☐ Account number _____ ☐ Routing number _____

Did you pay quarterly estimated income tax payments (Not payroll taxes)

1 st Estimated Payment Date _____	Amount Paid _____
2 nd Estimated Payment Date _____	Amount Paid _____
3 rd Estimated Payment Date _____	Amount Paid _____
4 th Estimated Payment Date _____	Amount Paid _____

The information and documents provided are, to the best of my knowledge, true, correct and complete.

Taxpayer _____ Date _____
Signature

Taxpayer _____ Date _____
Signature