



2025 CLIENT QUESTIONNAIRE

Client Name:	Date:
Email:	Phone:
COMPLETE THIS SECTION ONLY IF YOU HAVE A NEW ADDRESS OR PHONE	
NEW Address:	NEW Phone:
	Date of Move:
DIRECT DEPOSIT INFORMATION	
Is the account a CHECKING or SAVINGS account? (<i>CIRCLE ONE</i>)	
Routing Number:	Account Number:
PLEASE ANSWER THE FOLLOWING QUESTIONS. CIRCLE YES OR NO AND PROVIDE DOCUMENTATION IF NEEDED.	
1. Are you claiming the same dependent(s) as last year?	YES / NO
2. Do you have a Business/LLC/Rental ?	YES / NO
3. Do you have any miscellaneous income ? (<i>Gambling, UBER, Airbnb, Online, etc.</i>) If yes, provide 1099-Misc, 1099-NEC or 1099-K (see enclosed client letter for details on 1099-K).	YES / NO
4. Do you have any energy efficient home improvements or did you purchase an electric vehicle this year? If yes, provide details.	YES / NO
5. Have you or your dependents received/sold/exchanged any form of crypto currency ?	YES / NO
6. Does anyone in your household have health insurance through the Government Marketplace ? If yes, provide form 1095-A.	YES / NO
7. Do you have accounts that you are authorized to draw from that are held in a foreign bank account ?	YES / NO
8. Are you the beneficiary or executor for any trusts or estates this year?	YES / NO
9. Did you have time off of work or receive unemployment this year? If yes, provide your unemployment 1099.	YES / NO
10. Are you divorced and paying/receiving alimony ? If yes, provide the date of your alimony decree:	YES / NO
11. Did you have any debt forgiven this year (<i>loans, credit cards, home, etc.</i>)? <i>Note: forgiven is different than paid off.</i>	YES / NO
12. Did you make any contributions or distributions to or from a 529 plan (<i>college savings</i>)? If yes, provide statements.	YES / NO
13. Did you pay tuition for college education ? If yes, provide form 1098-T and college financial transcript.	YES / NO
14. Did you donate to any charity ? If yes, provide documentation or a summary.	YES / NO
15. Did you make contributions to or withdrawals from a non-payroll IRA this year? If yes, was it a Traditional or a Roth (circle one).	YES / NO
16. Did you start receiving Social Security in 2025 ?	YES / NO
17. Do you have a Health Savings Account (<i>not a flexible spending account</i>)? If yes, provide amount in/out and balance as of 12/31/2025.	YES / NO
18. Do you have daycare expenses for kids under age 13 or disabled? If yes, provide name, address, and tax ID number of provider.	YES / NO
19. Did you make estimated tax payments for 2025 (<i>IRS/State/City/School District</i>)? If yes, provide check(s) amount and date(s) paid.	YES / NO

*REMINDER THAT IF YOU HAVE ANY **TAX CREDITS** OR FILE AS **HEAD OF HOUSEHOLD**,
WE WILL NEED DOCUMENTATION AS OUTLINED IN THE ATTACHED LETTER.*