



INDIVIDUAL TAX QUESTIONNAIRE

TAXPAYER INFORMATION

First Name

MI

Last Name

Tax ID # / SSN

IPPIN (If Applicable)

Email Address

Phone

Address

City

State

Zip Code

Occupation

Date of Birth

Were you legally married as of the end of the year?

Yes No

If yes, do you wish to file your return as Married Filing Joint (MFJ)?

Yes No

SPOUSE INFORMATION

First Name

MI

Last Name

Tax ID # / SSN

IPPIN (If Applicable)

Email Address

Phone

Address (if different)

City

State

Zip Code

Occupation

Date of Birth

DEPENDENT INFORMATION

Please provide detailed information for each of your dependents to ensure accurate and complete processing of your tax return. For every dependent, include their Full Name, Tax Identification Number (TIN) or Social Security Number (SSN), Identity Protection Personal Identification Number (IP PIN) if applicable, Date of Birth, and their Relationship to you as the taxpayer.

Full Name	TIN/SSN	RELATIONSHIP	DOB	IP PIN

ACCOUNT INFORMATION

To facilitate any direct debits or direct deposits associated with your tax return, please provide your bank account details. Note that we will only schedule payments or arrange for direct deposits after you have reviewed, signed, and confirmed the amounts on your return. Any bank account information not specified in this questionnaire will not be used during the return preparation process. This ensures that all financial transactions related to your tax return are conducted securely and according to your confirmed instructions

Use account information for:

- Direct deposit of refund
- Direct debit of balance due

Account type:

- Checking
- Savings

Name of Financial Institution

Routing Number

Account Number

ESTIMATED TAX PAYMENTS

Please provide details of any estimated tax payments made for the tax year. For each payment, specify whether it was for federal or state taxes. If it was a state payment, indicate the state name. Additionally, include the amount paid and the date of payment for each.

Date	Jurisdiction (IRS or List State)	Amount Paid

LIFESTYLE & TAXES

Please answer each of the following questions to the best of your knowledge.

Are either you or your spouse legally blind?	<input type="radio"/> Yes	<input type="radio"/> No
Did you pay or receive alimony during the tax year?	<input type="radio"/> Yes	<input type="radio"/> No
Did you purchase health insurance through a public exchange/marketplace? (Provide Form 1095-A.)	<input type="radio"/> Yes	<input type="radio"/> No
Will there be any significant changes in income or deductions next year, such as retirement?	<input type="radio"/> Yes	<input type="radio"/> No
Did you pay anyone for domestic services (e.g., nanny, housekeeper, cook, caretaker) in your home?	<input type="radio"/> Yes	<input type="radio"/> No
Did you purchase a new or used energy-efficient, hybrid, or electric car, truck, or van?	<input type="radio"/> Yes	<input type="radio"/> No
Are you involved in bankruptcy, foreclosure, repossession, or had any debt (including credit cards) cancelled?	<input type="radio"/> Yes	<input type="radio"/> No
Are you a member of the military?	<input type="radio"/> Yes	<input type="radio"/> No
Were you a citizen of or lived in a foreign country?	<input type="radio"/> Yes	<input type="radio"/> No
Do you own or have financial interest in a foreign bank or financial account?	<input type="radio"/> Yes	<input type="radio"/> No
Would you like to allow your tax preparer or another person to discuss your return with the IRS?	<input type="radio"/> Yes	<input type="radio"/> No

CHILDREN & EDUCATION

Please answer each of the following questions to the best of your knowledge.

Were any children born or adopted during the tax year?	<input type="radio"/> Yes	<input type="radio"/> No
Were any children attending college?	<input type="radio"/> Yes	<input type="radio"/> No
Did you pay any tuition for a private school for a dependent or take classes yourself?	<input type="radio"/> Yes	<input type="radio"/> No
Did you pay for child or dependent care so you could work or go to school?	<input type="radio"/> Yes	<input type="radio"/> No
Do you have any children who have unearned income of \$1,250 or more?	<input type="radio"/> Yes	<input type="radio"/> No
Did you make any contributions to a 529 plan during the tax year?	<input type="radio"/> Yes	<input type="radio"/> No

INVESTMENTS

Please answer each of the following questions to the best of your knowledge.

How much did you, or will you, contribute to a Traditional IRA for the tax year?	\$	
How much did you, or will you, contribute to a Roth IRA for the tax year?	\$	
Did you roll over any amounts from a retirement account during the tax year?	<input type="radio"/> Yes	<input type="radio"/> No
Did you sell or transfer any stock or sell rental or investment property?	<input type="radio"/> Yes	<input type="radio"/> No
Did you receive any income from an installment sale?	<input type="radio"/> Yes	<input type="radio"/> No
Did you have any investments become worthless or were you a victim of investment theft during the tax year?	<input type="radio"/> Yes	<input type="radio"/> No
Were you granted, or did you exercise, any employee stock options during the tax year?	<input type="radio"/> Yes	<input type="radio"/> No
Did you (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (Digital assets include cryptocurrencies, NFTs, and stablecoins)	<input type="radio"/> Yes	<input type="radio"/> No

DEDUCTIONS

Please answer each of the following questions to the best of your knowledge.

How much did you, or do you plan to, contribute to an HSA for the tax year?	\$	
Did you pay any interest on a loan for a boat or RV that has living quarters?	<input type="radio"/> Yes	<input type="radio"/> No
Did you pay sales taxes on a major purchase during the tax year, such as a vehicle, boat, or home?	<input type="radio"/> Yes	<input type="radio"/> No
Did you make any charitable contributions during the tax year?	<input type="radio"/> Yes	<input type="radio"/> No

BUSINESS

Please answer each of the following questions to the best of your knowledge.

Did you work from a home office or use your car for your business?	<input type="radio"/> Yes	<input type="radio"/> No
Did you receive income from a sharing/gig economy activity (e.g. Airbnb, Uber, etc.)?	<input type="radio"/> Yes	<input type="radio"/> No
Do you own a business or an interest in a partnership, corporation, LLC, farming activities, or other venture?	<input type="radio"/> Yes	<input type="radio"/> No

HOME

Please answer each of the following questions to the best of your knowledge.

Did you purchase or sell a main home during the year?	<input type="radio"/> Yes	<input type="radio"/> No
If you sold a home, did you claim the First-Time Homebuyer Credit when it was purchased?	<input type="radio"/> Yes	<input type="radio"/> No
Did you refinance a mortgage or take a home equity loan?	<input type="radio"/> Yes	<input type="radio"/> No
Did you use any mortgage loan proceeds for purposes other than to buy, build, or substantially improve your home?	<input type="radio"/> Yes	<input type="radio"/> No
Did you make any new energy-efficient improvements to your home?	<input type="radio"/> Yes	<input type="radio"/> No

STATE INFORMATION

Please provide a list of all states where you had residency at any point during the tax year or where you may have a state filing requirement. This could include states where you earned income, owned property, or conducted business. For each state, include the dates of residency, if applicable, and any additional details relevant to determining your state tax obligations. If you are unsure whether you have a filing requirement in a specific state, include it anyway, and we will help you determine your obligations.

NOTES

Please provide additional details or notes relating to the preparation of your return.

SOLE PROPRIETORSHIPS

Please provide details for each of your sole proprietorships relevant to the tax year.

Business Name	EIN (if applicable)

Please answer 'Yes' to the following questions if it applies to any of your sole proprietorship businesses. If multiple businesses are relevant for a question, consider the collective scenario when answering or provide additional details in the notes.

Was the primary purpose of the business activity to realize a profit?	<input type="radio"/> Yes <input type="radio"/> No
Did you materially participate (involved in a regular, continuous, and substantial basis) in the operation of this business?	<input type="radio"/> Yes <input type="radio"/> No
Did you pay any family members for business services?	<input type="radio"/> Yes <input type="radio"/> No
Did you make any payments of \$600 or more to subcontractors, attorneys, accountants, directors, etc.?	<input type="radio"/> Yes <input type="radio"/> No
If Yes, did you issue Form 1099-NEC?	<input type="radio"/> Yes <input type="radio"/> No
Did you make, or do you plan to make, any contributions to a self-employed retirement plan?	<input type="radio"/> Yes <input type="radio"/> No
Did you pay for your own health/dental insurance?	<input type="radio"/> Yes <input type="radio"/> No
Did you have any employees?	<input type="radio"/> Yes <input type="radio"/> No
Did you have any bartering transactions during the tax year?	<input type="radio"/> Yes <input type="radio"/> No

RENTAL PROPERTIES

Please provide details for each of your rental properties relevant to the tax year. For each property, include the following information: the full Address, the Type of Property (options being Single Family Residence, Multi-Family Residence, Vacation/Short-Term Rental, Commercial, Land, or Self-Rental), and the number of Personal Use Days during the year.

Address of property	Type of Property