

2025 CLIENT PROFILE FOR TAX YEAR 2024

GENERAL INFORMATION

TAXPAYER NAME: _____

SOCIAL SECURITY: _____

BIRTH DATE: _____

ADDRESS **(STREET NUMBER & NAME)**: _____

APARTMENT **(PROVIDE APARTMENT NUMBER ONLY)**: _____

CITY: _____ STATE: _____ ZIP: _____

IF YOU LIVE IN ONE OF THESE STATES; AL, AZ, AR, CA, CT, D.C., GA, HI, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MS, MO, NJ, NY, NC, OH, OK, OR, PA, RI, VT, VA, WV, WI **LIST THE COUNTY YOU/SPOUSE LIVE IN BELOW:**

RESIDENT STATE AS OF 12/31/2024? _____

DAYTIME TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

ABOUT HOW MUCH DID YOU GET BACK ON YOUR 2023 TAXES FILED IN 2024)

(If filing joint, list the total 2023 federal return amount you received with your spouse.)

SPOUSE NAME: _____

SOCIAL SECURITY: _____

BIRTH DATE: _____

ADDRESS **(STREET NUMBER & NAME)**: _____

APARTMENT **(PROVIDE APARTMENT NUMBER ONLY)**: _____

CITY: _____ STATE: _____ ZIP: _____

RESIDENT STATE AS OF 12/31/2024? _____

DAYTIME TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

FILING STATUS (CHOOSE ONLY ONE STATUS BY MARKING AN "X" ON THE LINE)

SINGLE: _____ (MEANS; YOU ARE FILING WITH NO DEPENDENTS)

MARRIED FILING JOINTLY: _____ (MEANS; LEGALLY MARRIED FILING WITH A SPOUSE)

MARRIED FILING SEPERATELY: _____ (MEANS; LEGALLY MARRIED NOT FILING WITH YOUR SPOUSE)

HEAD OF HOUSEHOLD: _____ (MEANS; UNMARRIED FILING WITH CHILDREN)

QUALIFYING SURVIVING SPOUSE: _____ (MEANS; FILING FOR YOU & A DECEASED SPOUSE)

NONRESIDENT ALIEN: _____

If you selected "Married Filing Separate," did your spouse live with you at any time during 2024?

If so, mark here with an "x" _____.

DEPENDENTS

NAME: _____

DATE OF BIRTH: _____

SSN: _____ RELATIONSHIP: _____ MONTHS IN HOME: _____

Was this individual a U.S. citizen, U.S. national, or U.S. resident alien? _____

Does this child have an IP PIN Number? If so, please list it: _____

Is the dependent disabled? _____

NAME: _____

DATE OF BIRTH: _____

SSN: _____ RELATIONSHIP: _____ MONTHS IN HOME: _____

Was this individual a U.S. citizen, U.S. national, or U.S. resident alien? _____

Does this child have an IP PIN Number? If so, please list it: _____

Is the dependent disabled? _____

NAME: _____

DATE OF BIRTH: _____

SSN: _____ RELATIONSHIP: _____ MONTHS IN HOME: _____

Was this individual a U.S. citizen, U.S. national, or U.S. resident alien? _____

Does this child have an IP PIN Number? If so, please list it: _____

Is the dependent disabled? _____

NAME: _____

DATE OF BIRTH: _____

SSN: _____ RELATIONSHIP: _____ MONTHS IN HOME: _____

Was this individual a U.S. citizen, U.S. national, or U.S. resident alien? _____

Does this child have an IP PIN Number? If so, please list it: _____

Is the dependent disabled? _____

PLEASE NOTE YOUR 2024 INDIVIDUAL TAX RETURN PREPARED IN 2025 WILL BE FROM THE INFORMATION YOU HAVE PROVIDED.

WE WILL NOT AUDIT OR VERIFY THE INFORMATION FURNISHED TO US.

YOU, THE TAXPAYER, ARE ULTIMATELY RESPONSIBLE FOR THE PREPARATION AND FILING OF YOUR TAX RETURN.

IN THE EVENT YOU LISTED A SPOUSE, PLEASE NOTE THAT EVEN THOUGH A SIGNATURE IS NOT REQUIRED BY THEM ON THE CLIENT PROFILE, THEY ARE REQUIRED TO VERIFY THE INFORMATION LISTED ON THE RETURN BY SIGNING IT BEFORE IT CAN TRANSMIT TO THE IRS.

I, THE TAXPAYER NAMED ABOVE, HAVE PROVIDED THE TAX PREPARER THE ATTACHED TAX INFORMATION TO THE BEST OF MY KNOWLEDGE. THIS INFORMATION IS TRUE, CORRECT AND COMPLETE.

TAXPAYER SIGNATURE:

TAX DECLARATION

PLEASE ANSWER EACH QUESTION BELOW WITH, YES OR NO.

1. Have/Will you provide photocopies of you and or spouse driver's license and social security card and social security card for all dependents on the return? _____
2. Do you/spouse/ or any dependent have an IP PIN Number? _____
If yes, please list. _____
3. Have or will you provide all the W2's for all the jobs you worked at? _____
4. Are you legally married based on your state's legal definition of marriage? _____
5. If yes, did your spouse live in your home at any time during July through December? _____
6. Can someone else claim you/spouse as a dependent? _____
7. Did you/spouse receive any kind of military pay earnings? _____
8. Did you/spouse receive any self-employment income? _____
9. Did you/spouse receive income from rental property? _____
10. Did you/spouse receive unemployment income? _____
11. Did you/spouse receive any money from the sale of stocks? _____
12. Did you/spouse receive any Social Security Income? _____
13. Did you/spouse take any money from your 401K? _____
14. Did you/spouse or any dependents have health insurance through the marketplace? (If yes please explain.) _____
15. Did you/spouse pay any childcare expenses? _____
16. Did you/spouse or any dependents on the attend college? _____
17. Do you/spouse have any mortgage interest? _____
18. Did you/spouse file taxes last year? _____
19. Do you/spouse owe any money to the IRS? _____
20. Do you/spouse owe any state taxes? _____

21. Have you/spouse received any letters from the IRS? _____

22. Did you / or anyone in your household have insurance through the marketplace? _____ If yes, were you provided A 1095-A tax document? _____

23. Did you purchase an electric vehicle in 2024 or a vehicle weighing over 6000lbs? _____ If yes what is the year/make and model and tentative credit issued by the manufacturer? _____

I declare that I understand the above questions [numbers 1 through 23] and have answered them truthfully to the best of my ability.

TAXPAYER SIGNATURE:

PLEASE ANSWER EACH STATEMENT BELOW WITH; YES, NO

I would like to receive my federal refund by check. _____

I would like to receive my federal refund by direct deposit. _____

IF YOU LISTED "YES" BY DIRECT DEPOSIT PLEASE LIST YOUR BANKING INFO BELOW. IF YOU LISTED "NO" PLEASE PUT "N/A" IN THE SPACES LISTED FOR BANK INFO BELOW.

BANK NAME: _____

BANK ROUTING NUMBER: _____

BANK ACCOUNT NUMBER: _____

I would like to receive my federal refund as an advance. _____

If you selected yes, please inquire with your local branch for more details.

TAXPAYER SIGNATURE:

DATE SIGNED:
