

TAXPAYER INFORMATION:

First Name \_\_\_\_\_ Initial \_\_\_\_ Last Name \_\_\_\_\_  
Social Sec Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone (Cell) \_\_\_\_\_ Email \_\_\_\_\_

SPOUSE INFORMATION:

First Name \_\_\_\_\_ Initial \_\_\_\_ Last Name \_\_\_\_\_  
Social Sec Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Phone (Cell) \_\_\_\_\_ Email \_\_\_\_\_

DEPENDENTS:

Name	SSN	D.O.B.	Relationship	Months in home
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(Please attach separate statement for additional dependents)

**\*Copy of Social Security Cards are required for all NEW dependents / Driver’s License required for Taxpayer and Spouse\***

**FILING STATUS:**

\_\_\_ Single \_\_\_ Married filing **Joint** \_\_\_ Married filing **Separate** \_\_\_ Qualifying Widow \_\_\_ Head of Household  
Date of Divorce/Separation: \_\_\_\_\_ Date of Death: \_\_\_\_\_

**INCOME:**

**The following documentation and information, if applicable, is required to complete your tax return:**

- W2** (for EACH job held by each taxpayer during the year 2025)
- Tips or Overtime - **last paystub** issued in 2025
- Gambling Winnings – **W2G**
- Retirement Income – **1099-R**
- Interest Income / Dividends – **1099-INT or 1099-DIV**
- Stocks / Cryptocurrency – **1099-B Broker Statement**
- Corporate / Partnership Income / Estate or Trust – **Schedule K1**
- Self Employed Business Income – **1099-NEC / 1099-MISC / 1099-K\***
- Rental Income\*
- Social Security Benefits – **SSA 1099**
- Unemployment Income – **1099-G**
- Sale of Real Estate – **1099-S**
- HSA Distributions – **1099SA**
- Alimony Income \* (Does NOT include Child Support) ONLY if divorce was finalized **before 12/31/2018**
- Cash earnings or payment received for services provided in excess of **\$600**

***\*(please attach all supporting documentation or contact us directly for further consultation)***

**DEDUCTIONS:**

- Medical Expenses  Medical Miles driven in 2025 \_\_\_\_\_
- Vehicle Licensing Fee (auto license tags, etc.)  Property Taxes
- Home Mortgage Interest and/or Points paid – **Form 1098**
- Charitable Donations  
(If monetary donation of \$250 or more, please provide supporting documentation. If fair market value of items donated is equal to \$500 or more, additional information is required)
- Gambling Losses (limited up the amount of winnings, please attach supporting documentation)
- If disabled – Impairment related work expenses
- Student Loan Interest – **Form 1098-E**  Educator Expenses

**CREDITS:**

- Education Credit – **Must attach Form 1098-T**  
Was the student enrolled at least half-time for a minimum of one academic period during 2025? Y  N   
Was the student convicted of a felony before 12/31/25 for possession or distribution of a controlled substance?  
Y  N
- Child Care Credit  
Did you incur care costs for a dependent child under age 13 or for a disabled dependent or spouse during 2025?  
Y  N
- Premium Tax Credit – **Must attach Form 1095-A**  
Did you or your family hold health insurance coverage through the Marketplace (Obama Care)? Y  N
- Energy Credits} Did you make any energy efficient changes to your primary residence? Y  N   
(HVAC system, water heater, windows, skylights, exterior doors)
- Adoption Credit} Expenses incurred in the legal adoption of a child under age 18 or for the adoption of an incapacitated or special needs person Y  N

**The following items may have an impact on your return.  
Please read thoroughly and answer each.**

- Y  N  Purchased Health Insurance for yourself or a family member through the Health Insurance Marketplace (Exchange)? If so, must attach **Form 1095-A**.
- Y  N  Did you purchase and/or finance a vehicle on or after 01/01/2025? If so, must attach **Form 1098-VLI**
- Y  N  Was granted stock options by your employer and/or exercised employer stock options.

- Y  N  Traveled more than 100 miles from home and stayed overnight to perform duties as a National Guard member or reservist?
- Y  N  Lived or worked in a foreign country
- Y  N  Did you pay alimony (Child Support payments NOT included)  
Date of original divorce or separation agreement \_\_\_\_\_
- Y  N  Did you (or do you plan to before April 15, 2026) contribute to a traditional IRA or ROTH IRA?
- Y  N  Did you (or do plan to before April 15, 2026) contribute to a health savings account (**HSA**) for 2025?  
Self: \$\_\_\_\_\_ Spouse: \$\_\_\_\_\_ Type of health plan coverage: Self Only \_\_\_ Family \_\_\_
- Y  N  Did you make any monetary gifts totaling more than **\$19,000** to any individual during the year?  
o If yes, please provide recipients: Name / Address / Relationship / Total Monetary Amount
- Y  N  Did you have any debts cancelled or reduced by the creditors (credit cards, personal loans)?
- Y  N  Did you file for bankruptcy during 2025?
- Y  N  Did you have an interest in or signature authority over a financial account in a foreign country, such as a bank account, securities account, retirement account, trust account or other financial account?
- Y  N  At any time during 2025, did you receive, sell, send, exchange, or acquire any financial interest in any digital asset (Bitcoin, Crypto currency)?
- Y  N  Have you or your spouse received an Identity Protection Personal Identification Number (**IP PIN**) from the IRS? If yes, please provide the IRS Notice received or enter the six-digit code: **Self:** \_\_\_\_\_ **Spouse:** \_\_\_\_\_

**OTHER**

- Y  N  Do you authorize your preparer to discuss your federal tax return with the IRS?
- Y  N  Do you or your spouse want to designate \$3 to the Presidential Election Campaign Fund?

For **Direct Deposit** of your federal and/or state refund please provide the following:

Bank Name \_\_\_\_\_

Routing Number \_\_\_\_\_ Checking

Account Number \_\_\_\_\_ Savings

**Any additional information or notes to discuss with your tax professional:**

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