Form M	2024 Income Tax Questionnaire		
	All questions are for year 2024	Yes	No
	FAMILY & TAXES		
1. Filing Status: Single	e/Married filing jointly/Married filing separatly/Head of Household/Qualifying surviving spouse		
2. I/We have depende	ent children. Please also fill out Form Purple and possibly Form Blue questionnaires		
3. I/We have children who are student age 19 or older on 12-31-2024, or disabled that live with us.			
4. I/We or my dependent have tuition expenses to attend a college or technical school in 2024. (Provide 1098T)			
5. I/We received alimony, gifts over \$18,000 or other Non 1099 income.			
6. I/We have accounts in Canada or other foreign countries over US\$10,000? Provide detail if Yes			
7. I/We have transactions (buy, sell, exchange, receipt) using Digital Assets , such as Bitcoin.			
8. I /We sold stocks, bonds, real estate (other than home) or other property.			
9. I/We have or acquired a business, rental property, or an interest in a partnership or corporation.			
10. Also fill out the Fo	orm Green Business/Rental questionnaire if Yes to Question 9		
11. I/We are involved	in bankruptcy, foreclosure, repossession or had debt cancellation. (ie. Credit cards)		
12. I/We expect our 2025 income and withholdings to be different than 2024. If yes, why?			
13. I/We made quarterly estimated tax payments. Provide detail if Yes			
14. I/We want the 2024 refund applied to the 2025 estimated taxes.			
15. I/We want our refund direct deposited. (Provide a cancelled check) Please circle Same or New account			
16. I/We want the ba	lance due to IRS and/or the state direct debited. (Provide cancelled check)		
	VERMONT AND OTHER STATES		
17. List everyone that	t lives in your house		
18. I/We received child support, VA benefits, disability, or gifts over \$6,500.			
19. I/We have receipts or other documentation for charitable contributions.			
20. I/We purchased non-taxed items other than clothing. (Furniture, lawnmowers, personal items, etc)			
21. If Yes to Question 20, I/we want to pay Use Tax based on the "Use Tax Table" / actual purchases. (circle one)			
22. I/We still live in th	ne same home as 2023.		
23. Did you receive FEMA assistance?			
24. Do you have heal	th insurance from market place (Government Supported Plan) Provide Form 1095A if yes		
25. Do you have heal	th insurance? Yes / No Does your spouse? Yes / No Do you have Medicaid? Yes / No		
	HOMEOWNERS		
26. I/We purchased	or sold a home. (Circle one) (Provide Closing Statement)		
_	y improvements to our home. (Solar or wind/geo-thermal, doors, windows, etc)		
28. My/Our home wa	as rented out or used for business. (Fill out Form Green questionnaire)		
	RETIREMENT		
29. I/We have person	nally contributed to 2024 IRA. (Not including payroll deduction) Provide document		
30. I/We want Ark CP	A Group Inc to calculate the retirement amount and agree to pay fee \$65.00 for the calculation		
31. I/We agree to par	rticipate in the Audit and Correspondence Protection Plan. Annually \$29 Ask for details		
I/We understand tha	t It is my/our responsibility to keep all documents/records related to my/our tax returns.		
To the b	est of my/our knowledge, the information I/we have given is accurate and complete		
Taxpayer		025	
Mailing Address:			
Email:	@ Telephone:		
Ark CPA Grou	p Inc. 375 East Main Street Newport, VT 05855 802.334.8322 office@arkcpagroup.com		