

Client Information Sheet - Individual

Taxpayer Spouse

First Name: _____

First Name: _____

Last Name: _____

Last Name: _____

Occupation: _____

Occupation: _____

Date of Birth: _____

Date of Birth: _____

Dependent of another: Y or N

Dependent of another: Y or N

Social Security Number: _____

Social Security Number: _____

Primary Phone: _____

Primary Phone: _____

Email Address: _____

Email Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Questionnaire

Do you own/partner in a Business? Y or N

Are you a veteran? Y or N

Did you receive/give any gifts in 2022? Y or N

Are you clergy? Y or N

Did you trade cryptocurrency in 2022? Y or N

Do you receive K-1s? Y or N

Do you own Rental Properties? Y or N

- If yes, how many hours did you spend on rental activities in total, in 2022? _____

Do you have any interest in a foreign financial account, or receive any gifts from overseas? Y or N

IMPORTANT – ALL REFUNDS/PAYMENTS WILL BE SET UP FOR DIRECT DEPOSIT/WITHDRAWAL UNLESS OTHERWISE NOTED BELOW:

Direct Deposit / Withdrawal

Refund direct deposited to bank account on file? Y or N

Automatic payment of balance due with bank account on file? Y or N

Dependents

(Please list anyone who you believe can be claimed as a dependent)

First Name	Last Name (If different)	Date of Birth	SSN	Relation	Months at home	Disabled	Student
_____	_____	_____	_____	_____	_____	Y or N	Y or N
_____	_____	_____	_____	_____	_____	Y or N	Y or N
_____	_____	_____	_____	_____	_____	Y or N	Y or N