Annual Individual Taxpayer Questionnaire For Drop-Off/Virtual Returns

Please complete this form in it's entirety. This is required EVERY year for drop off and virtual tax prep.

If you are having your taxes prepared at an in-person appointment, do not complete this form.

Taxpayer			Tax ID # *	
First Name *M.I.* *Last Name*	Email			IP PIN
Occupation	Date of birth		Are you new to our firm? Yes No	
Address	City		State	Zip
County	Primary phone		Secondary phone	
Driver's License *No.*	*State*	*Issue Date*	*Exp. Date*	

Spouse			Tax ID # *	
First Name *M.I.* *Last Name*	Email			IP PIN
Occupation	Date of birth		Are you new to our firm? Yes No	
Address (If different from Taxpayer)	City		State	Zip
County	Primary phone		Secondary phone	
Driver's License *No.*	*State*	*Issue Date*	*Exp. Date*	

If you moved during 2025, enter your previous address.	Date of move

Marital status on 12/31/25: Single Married Separated Surviving Spouse Registered Domestic Partnership (RDP)

Were you divorced or separated during the year? Yes No Were there any deaths in the family? Yes No

Note: Individuals in registered domestic partnerships (RDPs) and civil unions are not considered married for federal tax purposes.

Names of dependent children *Child's full name*	*Tax ID # **	*IP PIN*	*Date of birth*	*Months lived in home in 2025*	*Relationship*	*College student?*

Did any of the children have unearned income of $1,350 or more? Yes No Do any of the children have a disability? Yes No

Is it anticipated that a different taxpayer will seek to claim a child listed above as their dependent for tax year 2025? Yes No

Other dependents or people who lived with you

Name	*Tax ID # **	*IP PIN*	*Date of birth*	*Months lived in home in 2025*	*Relationship*	*Income*

Bank information: Use for Direct deposit of refund Direct debit of balance due *Name of bank*

Checking *Savings*	*Routing transit number*	*Account number*

Ask your tax preparer for information about depositing a refund into an IRA account or splitting the deposit into more than one account.

*A Tax ID # is a Social Security Number (SSN), adoption taxpayer identification number (ATIN), or an individual taxpayer identification number (ITIN).

Questions — All Taxpayers

(Provide related statements or other documentation.)

"You" refers to both taxpayer and spouse — ask your preparer if you are unsure about a question.

LIFESTYLE & TAXES	Yes	No	Are either you or your spouse legally blind?	
	Yes	No	Have you received any notice from the IRS or state revenue department within the past year? If yes, provide a copy.	
	Yes	No	Did you pay or receive alimony in 2025? *Paid* *Received* $	*Recipient's SSN* / *Date of divorce or separation*
	Yes	No	Did you purchase health insurance through a public exchange/marketplace? (Provide Form 1095-A.)	
	Yes	No	Will there be any significant changes in income or deductions next year, such as retirement?	
	Yes	No	Did you pay anyone for domestic services (e.g., nanny, housekeeper, cook, caretaker) in your home?	
	Yes	No	Did you purchase an energy-efficient, hybrid, or electric vehicle?	
	Yes	No	Are you involved in bankruptcy, foreclosure, repossession, or had any debt (including credit cards) cancelled?	
	Yes	No	Are you a member of the military?	State of residency
	Yes	No	Were you a citizen of or did you live in a foreign country?	Foreign country
	Yes	No	Do you own or have financial interest in a foreign bank or financial account? *Maximum value in 2025* $	
	Yes	No	Would you like to allow your tax preparer or another person to discuss your return with the IRS? *Designee's name* *Phone number* *PIN (any five digits)*	
CHILDREN & EDUCATION	Yes	No	Were any children born or adopted in 2025? *(Provide statement for other expenses.)*	
	Yes	No	Were any children attending college? *(Provide Form 1098-T and Form 1098-E.)*	
			Year in college — Paid by you: *Tuition* $ — *Books* $ — *Student loan interest* $	
			Paid by student: *Tuition* $ — *Books* $ — *Student loan interest* $	
	Yes	No	Did you pay for child or dependent care so you could work or go to school? *(Provide statement if applicable)*	
			Name of provider	*EIN or SSN*
			Address	*Amount paid* $
	Yes	No	Did you contribute to or take money from a 529 plan in 2025? If yes, provide details.	
INVESTMENTS	Yes	No	Did you, or will you, contribute any money to an IRA for 2025?	Traditional IRA Roth IRA
	Yes	No	Did you roll over any amounts from a retirement account in 2025?	
	Yes	No	Did you sell or transfer any rental or investment property?	
	Yes	No	Did you receive any income from an installment sale?	
	Yes	No	Did you have any investments become worthless or were you a victim of investment theft in 2025?	
	Yes	No	Were you granted, or did you exercise, any employee stock options during 2025?	
	Yes	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)*	
DEDUCTIONS	Yes	No	Did you, or do you plan to, contribute money by April 15, 2026 to an HSA for 2025? If yes, provide details.	
	Yes	No	Did you pay any interest on a loan for a boat or RV that has living quarters? If yes, provide details.	
	Yes	No	Did you make any political contributions in 2025?	
	Yes	No	Did you make any charitable contributions in 2025? If yes, provide details.	
	Yes	No	Did you pay interest on a loan for a new vehicle purchased after 2024? If yes, provide details.	
	Yes	No	Did you receive tip income? If yes, provide details.	
	Yes	No	Did you receive overtime pay? If yes, provide earnings records and/or paystubs.	
BUSINESS	Yes	No	Did you own 100% of your own business your business?	
	Yes	No	Did you receive income from a sharing/gig economy activity (e.g. Airbnb, Uber, etc.)?	
	Yes	No	Do you own a business or an interest (less than 100%) in a partnership, corporation, LLC, or other venture?	
HOME	Yes	No	Did you purchase or sell a main home during the year? If yes, provide closing statement.	
	Yes	No	Did you refinance a mortgage or take a home equity loan? If yes, provide closing statement.	
	Yes	No	Did you use any mortgage loan proceeds for purposes other than to buy, build, or substantially improve your home?	
	Yes	No	Did you make any new energy-efficient improvements to your home? If yes, provide details.	

State information Full-year resident Part-year resident Nonresident	County Lived in
States of residence during 2025 and dates	Do you rent or own your home? Rent Own
	Total rent paid $ Includes heat? Yes No

Income Worksheet

Provide to your preparer all Forms W-2, 1099-INT, 1099-DIV, 1099-R, 1099-MISC, 1099-NEC, 1099-K, and other income reporting statements. Do not list dollar amounts for the following forms. Your preparer will report the appropriate amounts.

Indicate “T” for taxpayer, “S” for spouse, “J” for joint — Provide additional statements if more room is needed

Forms W-2 — *Wage and Tax Statement*

T/S	Employer name	T/S	Employer name
	1)		4)
	2)		5)
	3)		6)

Forms 1099-INT — *Interest Income*

T/S/J	Name of issuer	T/S/J	Name of issuer
	1)		4)
	2)		5)
	3)		6)

Forms 1099-DIV — *Dividends and Distributions*

T/S/J	Name of issuer	T/S/J	Name of issuer
	1)		4)
	2)		5)
	3)		6)

Forms 1099-R — *Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, Etc.*

T/S	Name of issuer	T/S	Name of issuer
	1)		4)
	2)		5)
	3)		6)

If the distribution is before age 59½, give a reason to determine if an exception to penalty applies.

Tax-Exempt Interest (such as municipal bonds — include statement)

Payer	$	Payer	$

Other Income

State tax refund	$	Unreported tips	$
Unemployment compensation	$	Other	$
Social Security (taxpayer) — provide SSA-1099 or RRB-1099	$		$
Social Security (spouse) — provide SSA-1099 or RRB-1099	$		$
Gambling income — provide Form W-2G	$		$
Business income (see *Sole Proprietorship Tax Organizer)*		Stock sales	See *Sales and Exchanges Worksheet,* below.
Rental income (see *Rental Property Tax Organizer)*		Sale of other property	

Sales and Exchanges Worksheet

Provide information about sales of other property below, provide Forms 1099-B or other supporting statements for stock transactions

Description of property	*Purchase date*	*Cost/basis*	*Sale date*	*Sale price*
		$		$
		$		$
		$		$

Notes:

- When stock is sold, you will usually receive Form 1099-B, *Proceeds From Broker and Barter Exchange Transactions,* reporting the proceeds from the sale. However, your statement will not always provide the cost/basis information necessary to compute gain or loss. If the statement does not contain the cost/basis information, you must provide it. You may need to contact your broker for questions about cost/basis and purchase dates of your stock accounts.
- Often, “transfers” of stock or mutual funds within a brokerage account are actually sales of one type of stock and purchase of another. Even if you did not receive any cash from the transaction, you may have taxable gain or loss.
- If your stock dividends are automatically reinvested, the dividends will be taxable even though you did not receive any cash. The transaction is treated as if you had received cash and purchased additional stock. When the stock is sold, the amount reinvested over the years is taken into account. You may need to contact your broker for questions about the amount of reinvested dividends.
- If you sold property other than stock, your taxable gain or loss will be determined by your cost/basis. The cost/basis is usually the original purchase price plus improvements (the cost of repairs and maintenance are not taken into account for cost/basis).

Questions—All Taxpayers		(Provide related statements or other documentation)
Deductions SELF EMPLOYED TAXPAYERS ONLY		
YES	**NO**	If yes to either of the below, please complete the home office and/or auto expense worksheet (available upon request)
☐	☐	Did you work from a home office (that is exclusively used for your business) ***and are self employed***?
☐	☐	Did you drive your vehicle for business purposes, keep a mileage log, ***and are self employed?***
General Questions		
☐	☐	Do you want to electronically file your tax return(s) if possible?
☐	☐	Do you want to designate $3 of tax funds to the Presidential Election Campaign Fund?
☐	☐	Are you or your spouse *(if filing jointly) a dependent of another person?*
☐	☐	Did you receive **federal retirement** income from civil service? *(If yes, provide dates employed and retirement date)*

Itemized Deductions: Taxpayers who itemize deductions for federal and/or state

Deductions must exceed $15,750 Single, $31,500 Joint, $23,625 Head of Household, or $15,750 Married Filing Separate to be a federal tax benefit.
Deductions must exceed $2,835 Single, $5,670 Joint, $4,560 Head of Household, or $2,835 Married Filing Separate to be an Oregon tax benefit.

Charitable Contributions. Use table below or attach summary in similar format.
If over $500 in noncash donations, provide details/ receipts showing a summary of what you gave, the value of your donation and the total (apx) cost of the items when you obtained them. Rules require that the taxpayer retain documentation for all contributions. Please don't give us blank goodwill receipts.

Money given	$
Noncash contributions (FMV). Clothing or household items must be in good used condition or better.	$
Did you transfer funds from an IRA directly to a charity? Yes ☐ No ☐	$
# of volunteer/charitable miles driven (log needed)	
Did you donate a vehicle? (*if yes provide details)*	Attach documentation

Medical Expenses. Must exceed 7.5% of income to be a benefit, unless you are 66 or older. Include cost for dependents. **Do NOT include costs that were reimbursed or paid by insurance, FSA or HSA**

Dentists		Hospitals	$
Doctors		Insurance Premiums	$
Equipment		Prescriptions	$
Eyeglasses		Other	
Hearing Aids		Medical Miles	

Taxes and Interest Paid. Report property taxes and mortgage interest not on form 1098 below (otherwise attach form 1098)

Address	Taxes Paid $	Interest Paid $
Address	Taxes Paid $	Interest Paid $
Address	Taxes Paid $	Interest Paid $

Ask about supplemental forms for:
- Rental income/expenses
- Small business income/expenses
- Home Office worksheet
- Auto Expense worksheet
- Farm worksheets
- Personalized organizer with prior yr data

Educator Expenses. Classroom expenses of teachers, counselors, and principals up to $300 each.	$
Self employed SEP, SIMPLE, and qualified plans. Contributions for 2025 made through 4/15/26.	$
Self employed health insurance. Sole proprietors, partners, and 2% S corp shareholders if not eligible for employer coverage.	$
Student loan interest. Paid for taxpayers and dependents	$
Moving expenses for Military members, their spouses and dependents on active duty that move pursuant to a military order and incident to permanent change of station.	$

Other Deductions or Questions

Estimated Tax Payments — Tax Year 2025

Installment	*Date paid*	*Federal*	*Date paid*	*State*
First		$		$
Second		$		$
Third		$		$
Fourth		$		$
Amount applied from 2024 overpayment		$		$
Total		$		$

Tax Preparation Checklist

Please provide the following documentation:

- ☐ All Forms W-2 (wages), 1099-INT (interest), 1099-DIV (dividends), 1099-B (proceeds from broker or barter transactions), 1099-DA (digital assets), 1099-R (pensions and IRA distributions), 1099-SA (HSA), SSA-1099 (Social Security), Schedules K-1 from partnerships, S corporations, estates and trusts, and other income reporting statements, including all copies provided from the payer.
- ☐ Form 1095-A (for health insurance purchased through a public exchange/marketplace).
- ☐ If you are a new client, provide copies of last year's tax returns.

- ☐ Copy of the closing statement if you bought, sold, or refinanced real estate.
- ☐ Mileage worksheet for any automobile expenses claimed, including total mileage, commuting mileage, and business mileage.
- ☐ Detail of estimated tax payments made, if any.
- ☐ Income and deductions categorized on a separate sheet for business or rental activities.
- ☐ List of itemized deductions categorized on a separate sheet for medical, taxes, interest, charitable, and other deductions.
- ☐ Copy of all acknowledgment letters received from charitable organizations for contributions made in 2025.
- ☐ Worksheets for rentals, business income/expenses, home office or other auxiliary worksheets as needed.

Taxpayer Responsibilities

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review your documentation.
- You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the returns carefully before signing to make sure the information is correct.
- Fees must be paid before your tax returns are delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer may be required for preparation of returns.
- You should keep a copy of your tax return and any related tax documents. You may be assessed a fee if you request a duplicate copy in the future.

Signatures. By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities. For a joint return, both taxpayers must sign.

Taxpayer	*Spouse*	*Date*