2022 New Client Questionnaire

Last Name:	
Taxpayer 1:	Taxpayer 2:
Date of Birth: / /	Date of Birth: / /
Home Address:	Email:
	, WI
Would you like a Tax Organizer sent next year fo	or 2023's tax return? Email Mail No
Did you pay any estimated taxes?	Yes (need dates and amounts)
For 2022, has your filing and/or marital status cl (If so, what changed? Please include divorce date, if	-
Name: SSN:	I'm claiming dependents (List below) N/A DOB: / / DOB: / / eded)
Do you own your primary home or rent? Over Rent amount per month \$ X No. over Was heat included in your rent? Yes	wn (need Form 1098 Mortgage Interest) Rent of months *If your income is less than \$24,680 No be sure to get a rent certificate fille out by your landlord(s).
Did you have Social Security Income?	need SSA Form)
Did you have Unemployment Income?	Yes (need 1099-G) No
Did you have student loan interest? Yes (ne	ed 1098E)
Did you participate in any Crypto Currency activ	ity?
Did you pay child care or private school tuition? (For daycare, we need facility name, Federal ID#, add For private school, we need the tuition statement ind	dress, and amount paid for each child.

(Please flip over & complete other side)

<u> </u>	r example: purchase or sale of home, passing of spouse, changes in dependent(s) etc.)	
	tra notes you'd like for us to know/ watch for:	
	Signature Date	
do	cuments) is correct, accurate and complete to the best of my knowledge. X	
	of the information provided by me in this questionnaire (or any other accompanying or required	
	Account # Checking or Savings	
	Bank Name Routing No	
Diı	rect Deposit Information:	
•	Did you receive any correspondence from any state or federal governing bodies last year? \[\sum \text{Yes (provide a copy of correspondence)} \] \[\sum \text{No} \]	
 Did you have any income from ownership of a business, rental property, or farm? Yes, I have a schedule C, E, or F Yes, I'm a shareholder/partner No (Please include income & expenses for schedules C, E, or F and last year's depreciation schedule. For shareholders/partners, we need K-1(s)) 		
•	Did you have supplemental health insurance or long-term care insurance? Supplemental Long-term care Neither (Please include amounts paid for each type of insurance, split by each taxpayer)	
•	Who provided your health insurance? ☐ Plan through employer ☐ Marketplace/ Obamacare (need form 1095-A) ☐ Neither	
•	Did anyone attend college last year?	
•	Did you make an HSA contribution that's not reported on your W-2? Yes No (We need this amount that was contributed if it was not done through your employer's payroll. If you took money out of your HSA account, please provide form 1099-SA)	
•	Did you contribute to an IRA or an Edvest/Tomorrow's Scholar account?	