

Tax Year 2025: Client Intake & Quality Review Sheet

- Tax documents such as Forms W-2, 1099, 1098, 1095, etc.
- Social security cards or ITIN letters for all persons on your tax return.
- Picture ID (such as valid driver's license) for you and your spouse.

- Please complete pages 1-2 of this form (**FRONT and BACK**).
- You are responsible for the information on your return. Please provide complete and accurate information.

Part I – Your Personal Information (If you are filing a joint return, enter your names in the same order as last year's return)

1. Your first name:		M.I.	Last name:		Social Security #:		Daytime Telephone #:	
2. Your spouse's first name:		M.I.	Last name:		Your spouse's Social Security #:		Your Spouse's Daytime Telephone #:	
3. Mailing address:				Apt #:	City:		State:	ZIP code:
4. Your Date of Birth:		5. Your Job Title:		6. Your email address:			7. Last year, were you a Full-Time student? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. Your spouse's Date of Birth:		9. Your spouse's Job Title:		10. Spouse's email address:			9. Last year, was your spouse a Full-Time student? <input type="checkbox"/> Yes <input type="checkbox"/> No	
10. Can anyone claim you or your spouse as a dependent? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure								
11. Have you, your spouse, or dependents been a victim of tax related identity theft or been issued an Identity Protection PIN? <input type="checkbox"/> Yes <input type="checkbox"/> No								

Part II – NEW TAX DEDUCTIONS 2025! (OBBBA)

Overtime Pay

- ☐ Yes – I received overtime pay in 2025. If checked please provide the following:
- ☐ OT is reported on my W2 ☐ I have my year end paystub detailing OT in 2025

Tips

- ☐ Yes – I am in a tip-based profession, and I did received tip income as part of my wages in 2025.
- ☐ Tip pay reflected on my W2. ☐ I have record and calculation my tip pay totaling: \$_____

New Vehicle Purchase Loan Deduction

- ☐ I **purchased** a brand-new car with financing. ☐ This new car is assembled in the U.S.
☐ This new car is for personal use. ☐ In 2025 I paid loan interest for this car: \$_____

Part III – Marital Status and Household Information

1. As of December 31, 2025, what was your marital status?

- ☐ Married ☐ Never Married/Single
- ☐ Divorced Date of final decree: _____
- ☐ Separated Date of separation: _____
- ☐ Widowed Year of spouse's death: _____

Will or has your spouse filed a tax return with the filing status Married Filing Separate? (MFS)

- ☐ Yes ☐ No
- a. If Yes, Did you get married in this year? ☐ Yes ☐ No
- b. Did you live with your spouse during any part of the last six months of the year? ☐ Yes ☐ No

2. List names, information, and answer questions for your dependents below.

[illegible]

Additional Information and Questions Related to the Preparation of Your Return			
1. If you are due a refund, would you like direct deposit? <input type="checkbox"/> Yes <input type="checkbox"/> No Bank Routing # Account # 			
2. Did you or anyone on your return have health insurance coverage through the Marketplace - Covered California - [Provide Form 1095-A] <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure			
3. CA State has mandated that beginning January 1, 2025, CA residents must have qualifying health insurance coverage. Do you have proof of insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure			
Check appropriate box for each question in each section.			
Yes	No	Unsure	Part III – Income – Last year, Did You (or your spouse) Receive
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Wages or Salary? (Form W-2) If yes, how many jobs did you have last year? You: _____ Your Spouse: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Retirement income or payments from Pensions, Annuities, and or IRA? (Form 1099-R)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Unemployment Compensation? (Form 1099-G)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Self- Employment income? (Form 1099-MISC, cash, virtual currency [Bitcoin], or other property or services) Cash Amount: \$ _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Refund of state/ local income taxes? (Form 1099-G)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Interest/ Dividends from: checking/savings accounts, bonds, CDs, brokerage? (Forms 1099-INT, 1099-DIV)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Alimony income or separate maintenance payments?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. Income (or loss) from the sale or exchange of Stocks, Bonds, Virtual Currency, or Real Estate? (Forms 1099-S, 1099-B)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. Disability income? (Such as payments from insurance, or workers compensation) (Forms 1099-R, W2)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. Gambling winnings? (Form W2-G)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11. Social Security or Railroad Retirement Benefits? (Forms SSA-1099, RRB-1099)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12. Income (or loss) from Rental Property?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	13. Other income? (Tip, Scholarships? [Forms W-2, 1098-T] , lottery, prizes, awards, jury duty, Sch K-1 , royalties, foreign income, other property, or services, etc.) Specify _____
Yes	No	Unsure	Part IV – Expenses – Last Year, Did You (or Your Spouse) Pay
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Alimony or separate maintenance payments? If yes, recipient S.S.# _____ Date of Agreement: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Contributions to a retirement account? <input type="checkbox"/> IRA (A) <input type="checkbox"/> 401K (B) <input type="checkbox"/> ROTH IRA (B) <input type="checkbox"/> Other _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. College or post-secondary educational expenses for yourself, spouse or dependents? (Form 1098-T)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Any of the following? <input type="checkbox"/> Medical & Dental (including insurance premiums) <input type="checkbox"/> Mortgage Interest (Form 1098) <input type="checkbox"/> Taxes (State, Real Estate, Personal Property, Sales) <input type="checkbox"/> Charitable Contributions
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Child or dependent care expenses such as daycare? If yes- You will need Name, EIN or SS#, Address of Care Provider & Amount Spent
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. For supplies used as an eligible educator such as teacher, teacher's aide, counselor, etc.?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Expenses related to self-employment income or any other income you received?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. Student loan interest? (Form 1098-E)
Yes	No	Unsure	Part V – Life Events – Last Year, Did You (or Your Spouse)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. (HSA) Have a Health Savings Account? (Forms 5498-SA, 1099-SA, W-2 with code W in box 12)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Buy, sell, or refinance your real estate? (main home or rental property) <i>Please be sure to bring this up with your tax preparer even if it is just a plan</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Adopt a child?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Have Earned Income Credit, Child Tax Credit or American Opportunity Credit disallowed in a prior year? If yes, for which tax year? _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Purchase and install energy efficient solar panels for your primary residence?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Receive the First Time Homebuyers Credit in 2008?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Make estimated tax payments or apply last year's refund to this year's tax? If so, how much? \$ _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. File a federal return last year containing a "capitol loss carryover" on Form 1040 Schedule D?

Tax Payer Signature: _____

Date: _____