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**Advantage Tax & Financial Services**  
[www.AdvantageTaxService.net](http://www.AdvantageTaxService.net)

## 2025 New Client Income Tax Questionnaire & Organizer

*The questionnaire is a guideline to help us prepare your taxes as well as help to inform you on any documentation you may need or may be missing. This questionnaire is not meant to replace tax documentation.*

**Please read carefully and fill out to the best of your knowledge**

Taxpayer Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Spouse Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ City/St/Zip: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_ Mobile Work Home (Check one)

Alternate Phone: \_\_\_\_\_ Mobile Work Home (Check one)

Email: \_\_\_\_\_

By giving a cell number, I agree to receive marketing and informational text messages throughout the year from Advantage Tax & Financial Services at the number I provided. Msg & data rates may apply. Reply STOP to no longer receive messages and text HELP for additional assistance. View our Terms of Service and Privacy Policy.

### Dependent Children:

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Did your **marital status change** in 2025? ☐ **Yes** ☐ **No** If yes, Divorce Date: \_\_\_\_\_

Did you have any **Changes to Dependents** from your 2024 tax return? ☐ **Add** ☐ **Remove**

**Dependent** – Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

### YES - NO

1. ☐ ☐ Do you or your spouse have an **Identity Theft Pin #**?\*\*If yes, attach paperwork\*\*

2. ☐ ☐ Would you like your refund to be **Direct Deposited** into a bank account?

Checking \_\_\_\_\_ Savings \_\_\_\_\_

Bank Name: \_\_\_\_\_

Routing #: \_\_\_\_\_ Account #: \_\_\_\_\_

Deposit slips **WILL NOT** be accepted as they have different routing numbers than checks.

This information must be **VERIFIED ANNUALLY** due to constant banking changes

If Banking information is not received then your **REFUND WILL COME AS A PAPER CHECK**

3. How would you like to **RECEIVE A COPY** of your tax return?

☐ Hard Copy

☐ SmartVault

☐ Mail (\$5 fee)

4. How did you hear about us?

☐ Internet Search    ☐ Drive by    ☐ Referral (Name of Referral \_\_\_\_\_)

YES - NO

5. ☐ Did you (or your spouse) make any **ESTIMATED TAX PAYMENTS** for 2025?

	Federal		State	
<b>1<sup>st</sup> Quarter</b>	Amount_____	Date_____	Amount_____	Date_____
<b>2<sup>nd</sup> Quarter</b>	Amount_____	Date_____	Amount_____	Date_____
<b>3<sup>rd</sup> Quarter</b>	Amount_____	Date_____	Amount_____	Date_____
<b>4<sup>th</sup> quarter</b>	Amount_____	Date_____	Amount_____	Date_____

YES - NO

6. ☐ Did you receive a W2? If yes, how many W2's? \_\_\_\_\_

**A. IF OVERTIME OR TIPS WERE RECEIVED AND NOT NOTATED ON YOUR W-2 THEN WE WILL NEED A LETTER FROM YOUR EMPLOYER IN ORDER TO UTILIZE THE NEW ADDITIONAL DEDUCTION (BOX 8 AND/OR BOX 14 ON YOUR W-2)**

7. ☐ Did you (or your spouse) **RECEIVE INTEREST (1099-INT)** from a bank account or other financial institution? (Includes regular, tax exempt and bond interest)

8. ☐ Did you (or your spouse) **RECEIVE DIVIDENDS (1099-DIV)** from investments?

9. ☐ Did you (or your spouse) **RECEIVE OR PAY ALIMONY** in 2025?

**\*If Yes** – Amount Received \$\_\_\_\_\_ **OR** Amount Paid \$\_\_\_\_\_

**\*\*If Received:** Payor's name:\_\_\_\_\_

Payor's SSN:\_\_\_\_\_ Date Divorce was finalized:\_\_\_\_\_

10. ☐ Did you (or your spouse) **SELL STOCK, SECURITIES OR MUTUAL FUNDS? (1099-B)**

11. ☐ Did you (or your spouse) **SELL OR PURCHASE** a principal residence, 2<sup>nd</sup> home, timeshare, cottage, etc?

**\*\*If YES, please provide date and a copy of closing documentation\*\***

12. ☐ Did you (or your spouse) **RECEIVE PAYMENTS** from an **IRA, ROTH IRA, PENSION, PROFIT SHARING OR OTHER QUALIFIED PLAN? (1099-R)**

13. ☐ Did you (or your spouse) **PURCHASE, SELL OR HAVE INCOME** from a **RENTAL PROPERTY? (Schedule E)**

**\*\*If YES, please provide a detailed income and expense summary for each property.**

**Outline can be found on our website\*\***

14. ☐ Did you (or your spouse) **OPERATE A SOLE PROPRIETORSHIP, SINGLE MEMBER LLC or OTHER UNINCORPORATED BUSINESS** during 2025? **(Schedule C)**

**\*\*If YES, please provide a detailed income and expense summary. Outline can be found on our website.\*\***

15. ☐ Did you (or your spouse) **RECEIVE UNEMPLOYMENT BENEFITS** in 2025? **(1099-G)**

16. ☐ Did you (or your spouse) **RECEIVE SOCIAL SECURITY BENEFITS** in 2025? **(SSA-1099)**

**YES - NO**

17. ☐ Did you (or your spouse) **ACQUIRE INTEREST IN OR HAVE INCOME** from **PARTNERSHIPS, ESTATES, TRUSTS OR S-CORPORATIONS?** (K-1 from 1120S, 1065 or 1041)
18. ☐ Did you (or your spouse) have any **GAMBLING INCOME** in 2025? (W-2G)
- a. What were your gambling losses for the year? \$\_\_\_\_\_ \*proof of losses required
19. ☐ Did you (or your spouse) **RECEIVE INCOME** from any of the following situations? If yes, check those which apply.
- i. ☐ Gambling winnings **NOT REPORTED** on form W-2G?
  - ii. ☐ Other income reported on **1099-MISC** Box 3?
  - iii. ☐ Qualified tuition Program earnings? (**1099-Q**)
  - iv. ☐ **Child's investment income** in excess of **\$2,200.00**?
  - v. ☐ **Jury Duty** income?
  - vi. ☐ **Cancelled Debt?** (1099-C OR 1099-A)
  - vii. ☐ Any Foreign Bank/Investment accounts?
  - viii. ☐ Other income? If yes, provide notes below

*\*\*Notes pertaining to **INCOME OR EARNINGS** not covered in above questioning\*\**

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**ADJUSTMENTS TO INCOME AND EARNINGS**

20. ☐ Did you (or your spouse) make contributions or receive distributions from any of the following? If yes, check those which apply.
- i. ☐ **SEP or Simple IRA contributions** (not IRA or Roth)
  - ii. ☐ Self-employed health insurance premiums?
  - iii. ☐ **IRA or ROTH IRA** contributions? (**Form 5498**)
  - iv. ☐ Student loan interest **PAID?** (**Form(s) 1098-E**)

**IF YOU FEEL YOU MAY ITEMIZE, CONTINUE. IF NOT, SKIP TO QUESTION #31**

*\*\*Due to changes in tax code there may be more of an opportunity for itemization going forward*

21. ☐ Did you (or your spouse) pay medical expenses **OUT OF POCKET?** (Not including expenses reimbursed or paid from an HSA)
22. ☐ Did you (or your spouse) pay **REAL ESTATE TAXES?** (Includes any home or property you have stake in) **\*\*If yes please include the paid tax bill\*\***
23. ☐ Did you (or your spouse) pay any **PERSONAL PROPERTY TAXES?** (Plate fees for Auto, boat or other vehicles)

**YES - NO**

24. ☐ Did you (or your spouse) pay **ANY OTHER TAXES** you think may be deductible? (**Provide supporting documentation**)
25. ☐ Did you (or your spouse) make payments on a **1<sup>st</sup> or 2<sup>nd</sup> MORTGAGE, REFINANCE OR TAKE OUT A HOME EQUITY LOAN?** (*Equity loan must have been used for property improvements*)
26. ☐ Did you (or your spouse) make **PAYMENTS ON A MORTGAGE** that was **NOT REPORTED** on form 1098? (Land contract or other)

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Address: \_\_\_\_\_

27. ☐ Did you (or your spouse) make **CASH CONTRIBUTIONS** to any **CHARITY** in 2025? *\*\*If yes, please provide statements from the charity\*\**
28. ☐ Did you (or your spouse) make **NON-CASH CONTRIBUTIONS** to any **QUALIFIED CHARITIES** in 2025? *\*\*If yes, please provide the receipts\*\**
29. ☐ Did you (or your spouse) **DONATE A VEHICLE** to a **QUALIFIED CHARITY** in 2025? *\*\*If yes, please provide a statement from the charity and form 1098-C\*\**

**OTHER DEDUCTIONS AND MISC. EXPENSES**

**YES - NO**

30. ☐ Did you receive **HEALTH INSURANCE THROUGH THE MARKETPLACE?** *\*\*If yes, Please provide the 1095-A form\*\**
31. ☐ Did you **purchase a vehicle** in 2025 and utilize financing?

*\*If yes, Interest paid \_\_\_\_\_*

32. ☐ Are there **other Expenses** you feel may be deductible?

If yes, please list: \_\_\_\_\_

33. ☐ Are you a **RENTER?** *\*\*Michigan residents only\*\**

a. Landlord Name: \_\_\_\_\_

b. Landlord Address: \_\_\_\_\_

c. Monthly Rent: \_\_\_\_\_ Number of Months Rented: \_\_\_\_\_

34. ☐ Did you and/or your spouse contribute to any **529 college savings** account in 2025? (*must be a plan sponsored in your state of filing*)
35. ☐ Did you (or your spouse) pay **HIGHER EDUCATION EXPENSES** that were not covered by scholarships or qualified tuition plans? *\*\*If yes, please provide all forms 1098-T, 1099-Q or any other relevant records pertaining to the tuition paid\*\**

**DISCLAIMER:** New due diligence rules require that, in addition to the 1098-T, you **MUST** also provide proof of payment in the form of a statement from the school or cancelled checks and receipts for tuition and qualified expenses\*\*

**YES - NO**

36. ☐ ☐ Do you (or your spouse) have an **HSA ACCOUNT**?  
a. If yes, did you use it? *\*\* If also yes, please provide form 1099-SA\*\**
37. ☐ ☐ Did you(or your spouse) pay **CHILD CARE EXPENSES**? *\*\*If yes, Please provide documentation from the care provider\*\**

**ANY ADDITIONAL NOTES OR INFORMATION WE SHOULD BE AWARE OF?**

[illegible]



# Advantage Tax & Financial Services

Helping you prepare today & relax tomorrow

Date: \_\_\_\_\_ 2026

Client Name(s): \_\_\_\_\_

You have requested our firm's assistance with preparation and filing of your 2025 Federal and State income tax returns. In addition to preparing your returns for filing, we will supply you with a hard or electronic copy of the returns for your records.

We are required by law to file most income tax returns electronically. If your return cannot be filed electronically, or you request a waiver from the electronic filing requirement, we may require your approval and signature on a waiver document. In this case, we will supply you with paper copies and envelopes for sending to the appropriate Federal and State agencies.

You agree to pay our fee once your returns are completed and provide us with a signed e-file authorization form. Unless other arrangements have been made in advance, we require full payment of preparation fees before we file your returns.

We will prepare your returns based on information you provide. You agree that you will provide all requested documents and answer all questions truthfully and completely, so we can accurately prepare your returns. Preparation of your tax returns does not imply any verification or other assurances related to the information you provide, and we will not perform any auditing functions related to this engagement. You acknowledge that it is your responsibility to provide all documentation and verification of items on your returns in the case of an audit or other inquiry from a government agency. Note that some items such as auto expenses, travel expenses, business income and expenses and certain charitable contributions require contemporaneous written records to allow a deduction. You also agree to inform us of any foreign bank accounts or investment accounts you own or have signature authority over.

Information you provide will be kept confidential. However, our discussions are not protected by any form of attorney-client privilege. We will advise you to consult with an attorney at any time we feel it may be appropriate.

This agreement covers only the preparation of your tax return and one mid-year review. It does not apply to services related to an audit of the return by a government agency, additional correspondence, or other services that may be required after filing of your returns. If additional services are required, additional fees may be incurred. These fees will be notated within the invoice of the tax return.

## **\*\*IMPORTANT\*\***

We **MUST** have the Client Questionnaire filled in completely to begin the preparation of your returns. Any returns received after April 1<sup>st</sup> will be subject to an additional \$100 fee.

1. YES ☐ NO ☐ *At any time during 2025, did you (or your spouse) receive, sell, send, exchange or otherwise acquire any financial interest in any virtual currency (such as cryptocurrency)?*
2. YES ☐ NO ☐ *At any time during 2025, did you or your spouse have access to or signature authority over any foreign bank or investment accounts?*
3. MAIL ☐ or EMAIL ☐ *How would you like to receive or annual letter and questionnaire?*

I (we) have read and agree to the terms of this agreement and acknowledge receiving a copy of Advantage Tax Service's Office Privacy Policy.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Preparer Initial

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date