



2025 TAX RETURN QUESTIONNAIRE & CHECKLIST

Name: _____ Date: _____

Please review the following questions. If you answer yes to any of the questions, please provide details.

Y	N	PERSONAL INFORMATION
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Did your name, address, telephone number or e-mail address change during the year?

Did your marital status change during the year?

Please list your current occupation: _____ and your spouse's: _____

If you owe a balance due, do you want the payment direct drafted from your bank account when the return is filed?

If you have an overpayment do you want the funds deposited in your Bank Account?

If yes, then please provide the following information:

Bank Name: _____ Account Number: _____

Routing Transit Number: _____ Checking Savings

Authorized Signature: _____

If filing a joint return, please circle the owner of this account: Taxpayer Spouse Joint

Did you upload to us a copy of your (and your spouse's) driver's license? Upload docs to:

Returning Clients: https://login.atomanager.com/atom_anc/WebInfo.aspx

New Clients: https://login.atomanager.com/atom_anc/ProspectMessage.aspx

Is this the first year we are preparing your Tax Returns?

If so, please provide us:

- Prior Year's Tax Return
- Any Federal/State Tax Correspondence you received

Did you have any foreign income or pay any foreign taxes?

Y	N	DEPENDENTS
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Could you be claimed as dependent on another person's tax return?

Were there any changes in your dependents compared to last year?

If so, please provide:

Dependent Name: _____ months lived at home: _____

SSN: _____ DOB: _____

Dependent Name: _____ months lived at home: _____

SSN: _____ DOB: _____

Dependent Name: _____ months lived at home: _____

SSN: _____ DOB: _____

Dependent Name: _____ months lived at home: _____

SSN: _____ DOB: _____

Did all of your dependents live with you 6 months or more?

Can another person qualify to claim any of your dependents?

FORMS CHECKLIST	
W-2(s)	
1099-INT Interest Income	
1099-DIV Dividends	
1099-B Sale of Stocks	
1099-G State or Local Refunds/ Unemployment Compensation	
1099-K Payment Card and Third Party Network Transactions	
1099-R Retirement Distributions	
1099-C Cancellation of Debt	
1099-MISC Miscellaneous Income	
1099-Q Qualified Education Programs	
1099-S Sale of Real Estate	
1099-SA Distributions from an HSA, Archer MSA, or Medicare Advantage MSA	
1099-SSA Social Security Statement	
1098-E Student Loan Interest	
1098-T Tuition Statement	
1098 Mortgage Interest State- ment Banks or Individuals	
W-2G Gambling Winnings	
1095-A, B or C Health Insurance Statement	

Important: please provide a document, record letter, or statement from a 3rd Party for proof to receive Child Tax Credits/other Credits (3rd Party = School, Doctor, Daycare, Insurance, Pastor, Landlord, Social Services)

Y	N	PURCHASES, SALES AND DEBT
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- Did you purchase a new or used business vehicle? If yes, please provide purchase receipt.
- Did you buy or sell any stocks, bonds or other investment property?
- Does anyone owe you money on a business loan that has become uncollectible?
- Did you purchase, sell or refinance your principal home, second home or rental property?
- Did you start a new business during the year?
- Did you have any debts cancelled or forgiven (e.g., credit card, mortgage)?

Y	N	RETIREMENT PLANS
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- Did you receive a distribution from a retirement plan (401(k), IRA, SEP, SIMPLE)?
- Did you contribute to an IRA or Roth IRA or SEP? (Please circle the type)
If yes, Taxpayer Amount: _____ Spouse's Amount: _____

Y	N	SHARING ECONOMY
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- Did you receive income or incur expenses associated with car sharing (Lift, or Uber)?
- " " " " (Upwork, Airbnb, Crowdfunding or Fashion Sharing Sites)?

Y	N	EDUCATION
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- Did you receive funds from an Education Savings Account or a Qualified Tuition Program?
- Did you contribute to a 529 plan(s)?
If yes, how much did you contribute for each child? If so, please list amounts, names, and social security numbers: _____
- Did you, your spouse or a dependent incur tuition expenses to attend college?
- Did you purchase any required text books or pay any required fees?
- Do you have a student loan? Please include your 1098-E
- Did you incur any expenses working as a teacher, counselor, or principal for classes K-12?

Y	N	DEDUCTIONS
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- Did you pay for childcare or daycare?
If yes, provide names of dependents, name, address and identification number of providers (EIN or SSN), and amount paid for each dependent.
- Did you make any charitable contributions and can you substantiate these contributions?
If yes, please list amounts and to whom paid (you must request a letter or a receipt from any organization for any single contribution over \$250.00).

Y	N	NEW INCOME & DEDUCTION OPPORTUNITIES (FORM SCHEDULE 1-A RELATED)
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<input type="checkbox"/>	<input type="checkbox"/>
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Did you receive tip income in 2025?

<input type="checkbox"/>	<input type="checkbox"/>
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If Yes, follow-up: Were the tips received in an occupation identified by the IRS as "customary and regular" for tipping?

If Yes, follow-up: What was the total amount of qualified tip income received and documented?
Amount: _____

<input type="checkbox"/>	<input type="checkbox"/>
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Did you receive overtime pay in 2025?

<input type="checkbox"/>	<input type="checkbox"/>
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If Yes, follow-up: Was this overtime pay calculated at a rate exceeding your regular pay rate (e.g., time-and-a-half) and required by the Fair Labor Standards Act?

If Yes, follow-up: What was the total amount of this qualified overtime premium pay?
Amount: _____

<input type="checkbox"/>	<input type="checkbox"/>
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Did you pay interest on a loan used to purchase a new vehicle for personal use in 2025?

<input type="checkbox"/>	<input type="checkbox"/>
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If Yes, follow-up: Was the vehicle's final assembly completed in the United States? (This information can be verified via the VIN on the NHTSA VIN Decoder website or the vehicle information label)

If Yes, follow-up: What was the total amount of interest paid in 2025?
Amount: _____

<input type="checkbox"/>	<input type="checkbox"/>
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Were you (or your spouse, if filing jointly) age 65 or older by December 31, 2025?

Y	N	CHILDREN AND DEPENDENTS
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<input type="checkbox"/>	<input type="checkbox"/>
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Was a new child born between January 1, 2025, and December 31, 2025?

<input type="checkbox"/>	<input type="checkbox"/>
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If Yes, follow-up: Do the child and both parents have valid Social Security numbers?

<input type="checkbox"/>	<input type="checkbox"/>
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If Yes, follow-up: Do you want to file Form 4547 with your tax return to elect the \$1,000 federal seed contribution to a "Trump Account" for this child?

<input type="checkbox"/>	<input type="checkbox"/>
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Did you incur expenses related to an adoption in 2025?

If Yes, follow-up: What were the total qualified adoption expenses? (Up to \$5,000 may be refundable) Amount: _____

Y	N	INVESTMENT AND OTHER ITEMS
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<input type="checkbox"/>	<input type="checkbox"/>
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Did you sell, exchange, or otherwise dispose of any cryptocurrency or digital assets in 2025?

<input type="checkbox"/>	<input type="checkbox"/>
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If Yes, follow-up: Do you have a Form 1099-DA from your crypto exchange detailing the transactions?

<input type="checkbox"/>	<input type="checkbox"/>
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Did you purchase a new or used electric vehicle (EV) or fuel cell vehicle (FCV) in 2025?

<input type="checkbox"/>	<input type="checkbox"/>
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If Yes, follow-up: Was the purchase completed on or before September 30, 2025? (Credits were eliminated for vehicles purchased after this date)

<input type="checkbox"/>	<input type="checkbox"/>
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Did you make contributions to a state-established governmental paid family leave program in 2025?

<input type="checkbox"/>	<input type="checkbox"/>
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Did you make any non-cash contributions to a Scholarship Granting Organization (SGO) for K-12 education? (A new federal credit is available for cash donations starting in 2027, but check if state credits apply for 2025)

Y N

ESTIMATED TAXES

Did you make any estimated tax payments for the tax year?

If yes, please list all amounts and dates paid for federal, state, and local estimated tax payments made.

	FEDERAL		RESIDENT STATE	
	Date Paid	Amount	Date Paid	Amount
Overpayment applied from prior year return				
First Quarter				
Second Quarter				
Third Quarter				
Fourth Quarter				

Y N

MISCELLANEOUS

Did you receive any Schedule K-1(s) from Partnership(s), S-Corp(s), Estate(s), Trust(s), etc.?

Were you and all your dependents covered by health insurance all year?

Please provide all Forms 1095-A, 1095-B or 1095-C received for ALL household members

Note: health coverage info is still required on many state tax returns.

Have you contributed to a Health Savings Account?

Did you have any financial interest in, or signature authority over a foreign account? (i.e. stocks, bonds, mutual funds, partnerships, interests, etc.) held in foreign financial institutions that exceeded \$10,000 in value at any time during the year?

Do you own any rental property? If yes, please download and complete "Rental Property Worksheet" at www.anchoraccountingandtax.com/forms

Do you own a small business and/or earn self-employment income? If yes, please download and complete "Business Worksheet" at www.anchoraccountingandtax.com/forms

Did you purchase merchandise (either online, or by telephone, or by direct mail) from an out-of-state supplier/vendor, and pay no sales tax?

To the best of my knowledge the information enclosed in this document is correct and includes all income, deductions, and other information necessary for the preparation of this year's income tax returns for which I have adequate records.

Taxpayer

Date

Spouse

Date