



**2023 RETURNING TAX CLIENT FORM**

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

**Today's Date:** \_\_\_\_\_

**Preferred Email:** \_\_\_\_\_ **Email Type:** Personal Work

**Preferred Phone:** \_\_\_\_\_ **Phone Type:** Personal Work

**Did your principal residence change in 2023?** Yes No (Fill out below address fields ONLY IF YES)

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Did your marital status change in 2023?** Yes No

**Did you welcome a newborn baby in 2023?** Yes No (See second page if yes)

**Did your bank information change in 2023?** Yes No (See second page if yes)

**Did you sell any cryptocurrency in 2023?** Yes No

**Bought or sold property in past year?** Yes No

**Did you make any energy efficiency improvements such as furnace, central ac, hot water heater, insulation, windows, or exterior doors at your primary and/or secondary residence?**

Yes No

**Did you install renewable energy systems such as solar at your primary and/or secondary residence?**

Yes No

**Did you purchase an electric or hybrid vehicle in 2023?** Yes No

**Please describe any energy-related changes you made:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Anything else we should know?:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





How do you want to sign and receive your completed 2023 tax returns?\*

- DocuSign an electronic PDF via secure email
• Sign at the office and pick-up hard copies
• Mail hard copies with self-addressed stamped envelope to return signature forms.

\*If you request to sign via DocuSign, we will SHRED any of your physical documents after uploading a scan of the originals (we keep the electronic record of all documents). If you want your physical documents back instead of electronic copies of such documents, please choose the pick-up or mail hard copy options.

Optional Fields (please only fill in if relevant to your earlier answers)

Please provide your NEW bank information for Direct Deposit/Auto Debit:

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

Routing Number: \_\_\_\_\_

Full Bank Account Number: \_\_\_\_\_

Account Type: Savings Checking

New Child(ren) Information:

Child Legal Name: \_\_\_\_\_

Child Date of Birth: \_\_\_\_\_ Child Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Child Legal Name: \_\_\_\_\_

Child Date of Birth: \_\_\_\_\_ Child Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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