



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

Did you make any MONETARY charitable donations in 2023? (Cash, Credit, Checks)

Describe: _____

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?* (Circle your preferred method)

- 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:** ____ - ____ - ____

Child Legal Name: _____

Child Date of Birth: _____ **Child Social Security Number:** ____ - ____ - ____

