Licensed Enrolled Agent Tax Strategist



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Tax Payer: Spouse:			
	Yes	No	PERSONAL INFORMATION
1a.			Are you an existing EYS Taxes client?
1b.			Does EYS have a copy of your prior year tax return?
1c.	\bigcirc		Will all of your tax documents be available and provided to EYS by April 1s
2a.			What is your marital status as of 12/31/2024?
2b.			Were there any changes to your marital status in 2024?
2c.	N	/A	Did you get married in 2024?
2d.	N	//A	Did you get divorced in 2024?
3.			Were there any changes to your Address in 2024?
4a.			Did you have any Dependencies in 2024?
4b.			Do you need EYS to file any tax returns for your dependents?
4c.			Were there any changes to your dependents in 2024?
			INCOME
5.			Did you received any W-2's for 2024?
6.			Did you receive any Interest, Dividend, or Capital gain income?
7.			Did you or a dependent receive any Social Security income for 2024?
8.			Did you receive a Distribution/rollover from a retirement account, pension, or annuity?
9.			Did you receive any Gambling Income for 2024?
10.			Did you own any Rental Properties during 2024?
11.			Did you receive any K-1's for any businesses not prepared by EYS for 2024?
12a.			Were you Self-Employed (received 1099-NEC income) during 2024?
12b.	N	7/A	Did you Use a portion of your Home exclusively for self-employed business purposes during 2024?

EYS

Tax Payer:			
	Yes	No	INCOME
12c.	N/	'A	Did you Use your Vehicle for self-employed business purposes during 2024?
12d.	N/	'A	Did you purchase your own Health Insurance Policy during 2024?
12e.	N/A		Did you/would you like to Contribute to a Self- employed retirement plan (solo 401k, SEP IRA, Simple IRA, profit-sharing plan, etc.) for 2024?
13a.			Did you Sell a House during 2024?
13b.			Was the house you sold being used as a Rental Property?
14.			Did you have any Other Income for 2024?
			DEDUCTIONS
15.			Did you Own a Home during 2024?
16.	\bigcirc	\bigcirc	Did you make any Charitable Contributions during 2024?
17.			Did you Own a Car or Boat during 2024?
18.			Did you pay for any substantial Medical Expenses out of pocket during 2024?
19.			Did you/a dependent pay any Student Loan Interest or Education Expenses during 2024?
20.			Did you/would you like to contribute to a Traditional IRA for 2024?
21.			Did you/would you like to contribute to a Roth IRA for 2024?
22.			Did you/would you like to contribute to an HSA outside of your payroll for 2024?
23.			Are there any Other Deductions you think you might be eligible for that were not mentioned previously?
			CREDITS
24.	\bigcirc		Did you purchase an Electric Vehicle during 2024?
25.			Did you have Solar Panels or an Electric Vehicle charging station installed during 2024?
26.			Did you pay for any Child Care for any dependent under 13 during 2024?
27.			Are there any Other Credits you think you might be eligible for that were not previously mentioned?



Tax Payer:		er:	
	Yes	No	MISCELLANEOUS
28.			Were you or your spouse Active Duty Military during 2024?
29.			At any time during 2024 did you own, purchase, or sell any Digital Assets (cryptocurrencies, NFTs, etc.)?
30.			At any time during 2024 did you or your spouse have signature authority over a Foreign Bank Account?
31.			Did your state/country of Primary Residence change during 2024?
32.			Did you make any Estimated Tax Payments for 2024?
33.			If applicable, would you like any refunds to be Directly Deposited into a bank account?
34.			If applicable, would you like any amounts due with your return Automatically Withdrawn from a bank account? your tax returns?
35.			If applicable, would you like any estimated tax payments Automatically Withdrawn from a bank account?
36.			Did you make any Non-Charitable Gifts over \$17,000 (\$34,000 if married filing joint) to any single individual during 2024?
37.			Is there any Additional Information you'd like to provide that you think would be helpful in preparing your tax returns?



Γax Payer:									
Based on y	our res	sponses	in the que	stio	nnaire abo	ve, please provi	de us	with	
	t	he follo	wing docu	mer	its and info	ormation:			
New Address Inform	ation								
Street Unit									
City State Zip Cod	e								
Country (If not US)									
New Dependent Info	ormati	on							
Name			Date of Birth Social S			curity Number	Rela	Relationship	
No. Financial Institu	tion 2	Address	A/c Num	ıber	A/c Type	Max balance in	1 2024	Currence	
Estimated Tax Paym	ents F	or 2024							
Amount - Federal	Da	te Paid	State	A	mount - St	tate	D	ate - Paid	
	2								
Electronic Banking I	ntorm	ation							
Type of Account:									
Financial Institution									
Routing Number:									



Tax Payer:	
Based	on your responses in the questionnaire above, please provide us with
	the following documents and information:
1b. Please upload	a copy of your prior year tax return.
4b. Please upload	all tax documents for your dependent's tax return.
5. Please upload	all W-2's.
6. Please upload	all 1099-DIV, and any brokerage account 1099 for accounts not managed by EYS
7. Please upload	all Social Security statements (Form SSA-1099).
8. Please upload	all retirement account distributions/rollovers (Form 1099-R).
9. Please upload	all your gambling income.
10. Please upload	all rental income and expenses PER property, including any tax forms received
for the income	and expenses.
12b.Please provide	e the total interior square footage of your home and the square footage
of the portion	of your home used EXCLUSIVELY for business purpose
total Se	qure Footage: Business Squre Footage:
12c. Please provide	e the total mileage driven and the total business mileage driven.
	Total mileage: Business mileage:
7	e the amount you paid out of pocket for health insurance premiums.
	Ith insurance:e the amount you'd like to contribute to your self-employed retirement account
_	ndicate MAX to have EYS calculate the maximum allowable contribution).
Already cont	
•	the seller's closing statement and original buyer's closing statement, along with
	received pertaining to the sale of the home.
-	e the amount of improvements made to the property.
_	vements:
14. Please upload	any other income you received, including the relevant tax documents.
15. Please upload	the amount of mortgage interest (Form 1098) as well as the amount of property
taxes paid duri	ng 2024.
16. Please upload	the cash and non-cash charitable contributions during 2024.
17. Please upload	the personal property taxes paid during 2024.
18. Please provide	the amount of medical expenses paid out of pocket during 2024.
Prescription	ons:
Doctors &	Dentists:
Hospitals	& Nursing Homes:
Long-term	Care Premiums:



Tax Payer:	
Based	on your responses in the questionnaire above, please provide us with
	the following documents and information:
19. Please upload t	the amount of student loan interest (Form 1098-E) or education expenses
(Form 1098-T)	paid during 2024.
20. Please provide	the amount already contributed and the amount you'd like to contribute to a
traditional IRA	A for 2024 (or write MAX to have EYS calculate the maximum allowable
contribution).	Already contributed:
21 Place mayida	Additional contribution: Max: The amount contributed/would like to contribute to a Roth IR A for 2024 (or
-	the amount contributed/you'd like to contribute to a Roth IRA for 2024 (or
Already contribut	have EYS calculate the maximum allowable contribution). ed: Additional contribution: Max:
J	the amount you'd like to contribute outside of your W-2 to an HSA for 2024
_	to have EYS calculate the maximum
	y contributed: Max:
23. Please upload a	any additional information relating to any other deductions to which you may
qualify for 202	4.
24. Please upload t	the make, model, year, and VIN number for the electric vehicle purchased during
2024.	
25. Please upload t	the total cost of solar panel/electric vehicle charging station installation during 202
26. Please upload to provider.	the cost of childcare per dependent, including the name, address, and tax ID of the
27. Please upload a	additional information relating to any other credits you think you may qualify for
during 2024.	
31. Please provide	additional information relating to where and when you moved during 2024.
36. Please provide	additional information relating to the gift and recipient during 2024.



2024 | 1040 | US | Tax Organizer

Tax Payer:	
Based	on your responses in the questionnaire above, please provide us with
	the following documents and information:
27 Pl :1	
tax returns.	/upload any additional information you think would be helpful in preparing you
	Date
	Date

*To submit the form scroll down and click "SUBMIT" button.

This page contains submit button, Please press it to submit form.

SUBMIT