



MarciAnne Lelinski, CPP, PHR

Welcome to the newly updated Client Questionnaire! To minimize any chance of missing taxable items or deductions, I require that this form be completed in full (**both sides**). Please select Yes, No, or N/A (if this item doesn't pertain to you) for each question below. At least one taxpayer must sign the form. If you have any questions, never hesitate to contact me. I appreciate your past business and look forward to seeing you again this year. ~ Marci Lelinski

During 2024 did you or your spouse...

	Yes	No	N/A
Taxpayer(s)			
Get married, separated or divorced?			
Change jobs?			
Receive or pay any alimony?			

	Yes	No	N/A
Dependents			
Have a baby or adopt a child?			
Have a parent that you provided more than half of their support?			
Pay tuition for your child(ren) to attend a private K-12 school?			
Pay any childcare / day care?			
Have a Dependent Care Flex Spending account through work?			
Did you (or they) pay any post-high school tuition for your dependent?			

	Yes	No	N/A
Housing			
Buy or sell a home?			
Pay rent for your residence?			
Amount of rent paid: _____			
Was heat included in your rent?			
Pay mortgage interest for your primary or secondary residence?			
Pay home equity loan interest used to buy/build/improve your home?			
Pay property taxes for your primary residence?			

	Yes	No	N/A
Miscellaneous			
Start a new business, rental home or rent your personal property?			
Receive any correspondence from IRS or WI Dept. of Revenue?			
Give >\$18,000 worth of cash, goods or property to an individual or Trust?			

	Yes	No	N/A
Additional Income (self/dependent)			
Receive any Unemployment Compensation?			
Sell stocks, bonds or property			
Cash out any retirement accounts or IRAs?			
Did your dependent earn more than \$14,600 in wages?			
Did your dependent earn more than \$1300 in interest and/or dividends?			
Take in non-personal payments of \$5000 or more through Venmo?			

	Yes	No	N/A
Deductions			
Pay interest on a school loan?			
Take any college or technical school classes?			
Make any cash or item donations to a non-profit business or church?			
Pay for very high medical bills (over 10% of total income)?			
Pay out of pocket (not through your paycheck) for health insurance?			
Pay for Long Term Care Insurance (nursing home insurance)?			
Buy a new or used electric vehicle?			

PLEASE CONTINUE TO THE BACK OF THIS FORM. ALL QUESTIONS AND BLANKS MUST BE COMPLETED.

Government Required Questions

At any time during 2024, did you receive (as a reward, award, or payment for property or service) a digital asset or financial interest in a digital asset (Crypto)? **Yes No (circle one)**

At any time during 2024 did you sell, exchange or otherwise dispose of a digital asset, or financial interest in a digital asset (Crypto)? **Yes No (circle one)**

Did you make purchases from other states, while physically in Wisconsin, that you did not pay sales tax on? **Yes No (circle one)** If Yes, what was the total purchase amount? _____

Marketplace Insurance Questions

If you did **NOT** have Marketplace insurance check here and skip :

Did you take any advanced premium tax credit in 2024? **Yes No (circle one)**

Have you included your Marketplace tax form (Form 1095-A)? **Yes I'll send it (circle one - it is required)**

General Information

Did you or your spouse renew your driver's license in 2024? If so, please complete information below.

Who renewed: _____ Issue Date: _____ New Expiration Date: _____

Who renewed: _____ Issue Date: _____ New Expiration Date: _____

Please update your occupations if they have changed since 2023:

Name of person changing: _____ New occupation: _____

Name of person changing: _____ New occupation: _____

Even if nothing has changed, please complete the following:

Current Address: _____

Best Phone Number(s): _____ Whose is it? _____

Is it a CELL PHONE or LANDLINE (Circle one) Do you prefer: TEXT CALL EMAIL (Circle preference)

Best Contact Email Address(es): _____

Direct Deposit

Which account would you like to use for your refund/tax due?

_____ Same account as last year

Confirm: Bank Name _____ Checking or Savings (circle one)

_____ New account

Bank Name: _____ Checking or Savings (circle one)

Routing Number: _____ Account Number: _____

Permission to Prepare Sign-off

By signing below, I acknowledge that:

- * The answers and information I am supplying to ML Accounting for the preparation of my individual tax returns are true and correct to the best of my knowledge.
- * I have not received any additional taxable income that I am not including in these workpapers.
- * I agree to have my refunds deposited to, or tax due withdrawn from, the account listed above.
- * I give my permission for my tax returns to be prepared by ML Accounting for filing.
- * I understand that I will be contacted with questions and my results (refund or tax due) and my permission will be required before my returns are filed.

Taxpayer Signature / Date

Taxpayer Signature / Date