



Welcome to ML Accounting! I appreciate the opportunity to prepare your 2024 income taxes. In order to better serve my clients and minimize any chance of missing taxable items or deductions, I require that this form be completed in full (**both sides**). Bring this completed form, your 2023 tax return, and all of your 2024 tax documents to your Drop Off appointment. If you have any questions, never hesitate to contact me. ~ Marci Lelinski

* Important Note: Use the Taxpayer fields for a single person, or the person listed first on prior year return if married *

Taxpayer's Full Name: _____

Spouse's Full Name: _____

Current Address: _____

Taxpayer's Phone: _____ Is this a: LANDLINE CELL WORK (circle one)

Spouse's Phone: _____ Is this a: LANDLINE CELL WORK (circle one)

Best Contact Email Address: _____

Do you prefer to be contacted via: PHONE CALL TEXT EMAIL (circle preference)

Taxpayer's Birthdate _____ Spouse's Birthdate _____

Taxpayer's Occupation _____ Spouse's Occupation _____

Please list any dependents here, including their name, birthdate, relationship to you and SSN:

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- * I agree to have my refunds deposited to, or tax due withdrawn from, the account listed below.
- * 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

Spouse Signature / Date

AREA RESERVED FOR ID VERIFICATION (Please bring your license or State photo ID with you)

Direct Deposit

For security, speed, and tracking purposes, I HIGHLY recommend direct deposit/withdrawal for any refunds or amounts due. Please enter account information below.

Bank Name: _____ Checking or Savings (circle one)

Routing Number: _____ Account Number: _____

*** Please attach a voided check to this sheet ***

Please select Yes, No, or N/A (if this item doesn't pertain to you) for each question below.

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?			

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)**