

**Sauppé Tax Service LLC**  
**New Client Tax Questionnaire 2025**

Name (1st, Last): \_\_\_\_\_ Spouse: \_\_\_\_\_

Taxpayer Soc. Sec# \_\_\_\_\_ Spouse Soc. Sec. # \_\_\_\_\_

Taxpayer Date of Birth \_\_\_\_\_ Spouse DOB: \_\_\_\_\_

Address: \_\_\_\_\_

City, St, & Zip: \_\_\_\_\_

Is this your Main Home Y or N If no, please provide address for main home

Primary Phone # \_\_\_\_\_ Secondary Phone# \_\_\_\_\_

E-mail: \_\_\_\_\_

Routing # \_\_\_\_\_ Bank Account # \_\_\_\_\_

Marital Status as of 12/31/25    **SINGLE    MARRIED    WIDOWED** (circle one)

**Eligible Dependents for 2025**

Please list all eligible dependents for 2025. \*\*Your child born prior to 1/1/2006 must be a full-time student for at least five months during the year and under the age of 24 all year. Any child who does not meet this age/student test or any other dependent must be a relative, usually must be a member of your household, must have income below \$5,200 for the year, and you usually must have contributed more than 50% of their support...

<b>Dependent Name</b>	<b>Date of Birth</b>	<b>Social Security #</b>	<b>Dependent Relationship to Taxpayer</b>	<b>Months in 2025 Lived with you</b>	<b>Months in 2025 a Full Time Student</b>	<b>Taxpayer paid more than 50% of support</b>	<b>Permanently and totally disabled</b>
						<b>YES</b> <b>NO</b>	<b>YES</b> <b>NO</b>
						<b>YES</b> <b>NO</b>	<b>YES</b> <b>NO</b>
						<b>YES</b> <b>NO</b>	<b>YES</b> <b>NO</b>
						<b>YES</b> <b>NO</b>	<b>YES</b> <b>NO</b>

Estimated tax payments (EFTs or checks written by you) FOR 2025, including payments in the first quarter of 2026. This does **NOT** mean withholding from W-2's or 1099's

<b>Federal</b>	<b>State</b>	<b>City</b>	<b>School Dist/REAL ESTATE</b>				
<b>DATE</b>	<b>AMOUNT</b>	<b>DATE</b>	<b>AMOUNT</b>	<b>DATE</b>	<b>AMOUNT</b>	<b>DATE</b>	<b>AMOUNT</b>

Because of IRS regulations, your federal and state returns will be electronically filed unless you complete and return a required IRS waiver of electronic filing prior to our completion of your return. Any refund on these returns will be deposited into the bank account shown above and any balance due will be deducted from this account on April 15<sup>th</sup>. By signing below you are confirming that you have included all income received during the year and that you have read the terms of engagement provided to you and agree with all items.

Signature of taxpayer \_\_\_\_\_ Signature of spouse \_\_\_\_\_

Taxpayer occupation \_\_\_\_\_ Spouse occupation \_\_\_\_\_  
 Please turn over - continued on back.

All of these questions pertain to the 2025 year. Any YES answers will require complete details and documentation.

1	Did you receive tip or overtime income in 2025? If yes, provide all pertinent details.	YES	NO
2	Did you contribute cash or items to a charity in 2025 that you wish to claim on your tax return? If YES, you <b>MUST</b> complete the Charitable Deduction Recap (available on our website).	YES	NO
3	Did you purchase any goods online or through catalogs that did NOT include sales tax? If yes, please indicate total amount purchased \$_____.	YES	NO
4	Do you have written documentation for all business miles? If yes, you <b>MUST</b> complete the mileage section on the bottom of this form. If no, you cannot claim mileage.	YES	NO or N/A
5	Do you have any bartering or trading income or any other income to report (i.e., jury duty, prizes, awards, gambling winnings)? If yes, please provide all details.	YES	NO
6	Did you pay child care expenses? If yes, please include documentation from the provider that shows amount paid, dependent covered, time period covered, and ID number of provider.	YES	NO
7	Did you buy or sell a home this year <b>or</b> refinance an existing home? If yes, please provide the settlement statement from the purchase, sale, or refinance. If a refinance, you <b>MUST</b> provide documentation on how the loan proceeds were used.	YES	NO
8	Do you have a Health Savings Account? If yes, indicate any amounts you contributed <b>OUTSIDE</b> of work, and provide details, including the 1099SA form, for any withdrawals made during the year. <i>Include proof that these distributions were spent on qualified medical care by providing the medical bills or a detailed recap showing medical provider, date, and amount.</i>	YES	NO
9	Did you, or any of your dependents, contribute to <b>or</b> make a withdrawal from any state 529 plan? If yes, please provide copies of all pertinent documents including the 1099Q if received.	YES	NO
10	Did you pay any student loan interest? If yes, submit copies of all 1098Es received.	YES	NO
11	Did you have any student loan amounts forgiven in 2025? If yes, please provide all details. You may or may not have received a 1099C for the debt cancelled.	YES	NO
12	Did you pay any post-secondary (beyond high school) expenses for you, your spouse, or your dependents? This does NOT include student loan interest. If yes, you <b>must</b> provide Form 1098T and <b>DETAILED</b> documentation on all amounts paid during the year.	YES	NO
13	If you answered YES to question 12, do any of the students involved have a felony drug conviction? If yes, provide details.	YES	NO or N/A
14	If you own rental property or had your own business (even on a small scale), did you make any payments that would require you to file any 1099 forms and you filed the forms?	YES	NO or N/A
15	Did you purchase a car in 2025 and did you finance it? If you answered yes to either of these questions, please provide the invoice for the purchase and the complete details on the car loan.	YES	NO or N/A
16	Do you have any children under the age of 24 with unearned ( <b>not</b> from a job) income over \$2,700? If yes, please provide details.	YES	NO
17	Did you make a gift or gifts to any individual during the year worth \$19,000 or more? If yes, provide name of recipient, address, description of item(s) given, and amount.	YES	NO
18	Did you get insurance through the Marketplace (healthcare.gov)? If yes, provide Form 1095A.	YES	NO
19	Did you, your spouse, or any of your dependents, receive, sell, exchange, gift or otherwise dispose of any financial interest in virtual currency (this includes nonfungible tokens or NFTs)?	YES	NO
20	Do you, your spouse, or any of your dependents, have funds in a foreign bank account or give/receive a distribution from a foreign trust?	YES	NO
21	If any of these situations apply to you check all that apply and provide all pertinent details. Legally blind <u>      </u> Paid an individual for domestic service in your home <u>      </u> Purchased any items that qualify for the energy credits <u>      </u> Contributed to a retirement account <b>outside</b> of work <u>      </u> A full time teacher who purchased supplies for the classroom <u>      </u> Be sure to include all paperwork relating to these items.	YES	NO

#### 2025 Mileage Recap

1 <sup>st</sup> Business	2 <sup>nd</sup> Business	Charitable	Medical	Moving	Personal	Total All Miles**

\*\*The total **must** equal the sum of the other categories and should be the total of all miles driven during the year.

Car Information: Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_

Your signature(s) on page one verifies that this log is a true and accurate reflection of mileage for 2025 and that you have the records to substantiate this mileage.