CLIENT INFORMATION SHEET

Curran's Tax Service rod@curranstax.com 765.362.2522 fax 765.362.1482 2106 Indpls Rd, Crawfordsville IN 47933 TAX YEAR 2024 PAGE 1 YOUR INFORMATION Your Full Name Social Security Number Birth Date Occupation in 2024 SPOUSE'S INFORMATION Spouse's Full Name Social Security Number Birth Date Occupation in 2024 ADDRESS & CONTACT INFORMATION Address City State Zip Best Phone Best time to call **Email Address** County of Residence January 1, 2024 Please provide DL for ease in State US Citizen/Resident Alien/Non-res. Alien filings and identity protection. *Please Circle That Which Applies* **FILING STATUS** Did you pay for over half the cost of keeping up your home during Married Divorced: year _ 2024? If married, did you live apart from your spouse during the last 6 ☐ Yes ☐ No months of 2024? Upkeep expenses include rent, utilities, food eaten in the home, mortgage interest, real estate taxes, and insurance on the home. If you Yes No use payments you received under any public assistance program to pay By answering "Yes," you are confirming that if requested by the for part of the cost of keeping up your home, you cannot count them as IRS, you can provide documentation that verifies your spouse did not money you paid. However, you must include them in the total cost of live with you during the last 6 months of the year, such as a lease keeping up your home to figure if you paid over half the cost. agreement, utility bills, a letter from a clergy member, or a letter from social services. By answering "Yes," you are confirming that if requested by the IRS, you can provide documentation that verifies you paid for over half the cost of keeping up your home, such as rent receipts, utility bills, gro-Can you be claimed as a dependent on someone else's tax return? cery receipts, and other household bills. Yes No **DEPENDENTS** # Months Lived Claiming for First Name Last Name Birth Date Social Security Number Relationship to You 2024 ? with You 2024 If requested by the IRS, can you provide documentation that shows evidence of the relationship between you and each of your dependents listed above (birth certificates, marriage certificates, court documents, letters from authorized placement agencies, etc.)? Yes No If requested by the IRS, can you provide evidence that each of your dependents lived with you for the number of months stated above

Care provider name & Fed ID #

during 2024 (school, medical, childcare provider, social service records, etc.)?

I have daycare expenses

Yes

No

If you are claiming a dependent child on your tax return, in order for us to meet certain requirements set forth by the IRS, you are required to accurately and thoroughly answer all questions listed below. If applicable, be sure to provide a detailed explanation for each child you are claiming. Your tax preparer will review each question that pertains to your situation during the preparation of your tax return.

Are you claiming a child who was between 19 and 23 years of age at the end of months during 2024? If yes, please list the educational institution and the months									
Yes No If "Yes", which ones? Year in College (Freshman, Sophomore, etc) 1098T req.	Was a student convicted of a felony for possession or distribution of a controled substance in 2024? Yes No								
Are you claiming a child who is permanently and totally disabled? If requested by the IRS, can you provide documentation that verifies the child is permanently and totally disabled, such as a note from a doctor, healthcare provider, or social service program?									
Yes No									
Did any of the dependents you are claiming earn more than \$4200 in wages in 20	024?								
Yes No If "Yes", which ones?									
Can anyone else claim any of your dependents? * Indicate if someone else can claim any of your dependents for Earned Income Credit									
Yes No If "Yes", which ones?	Will they try to claim this dependent? \square Yes \square No								
Are you claiming a child who lived with any other adult relative, including other parent for more than half the year during 2024? If yes, please list each adult relative who lived in the same home as the child for more than half the year, their relationship to the child. TIE-BREAKER RULES MAY APPLY									
Yes No									
Did the child live in a household with parents who are not married?									
Are you claiming a child who is not your own son or daughter? If yes, please explain why the parents of the child are not claiming the child.									
Yes No *Proof of residence may be required* Please make no	te of step-children.								
Have you ever had Earned Income Credit, Child Tax Credit, Additional Child Tax Credit, or American Opportunity Credit disallowed or reduced in a previous year? Have you filled out the required recertification form?									
Yes No EIC CANNOT BE CLAIMED UNLESS CHILD RELATIVE LIVED WITH TP MORE THAN HALF THE YEAR									

TAX PREPARER'S NOTES

The shared responsibility payment has been reduced to "\$0" (zero) for all taxpayers. Form 8965 is no longer used and no health insurance information will be shown on the tax return unless the taxpayer received Form 1095-A from the marketplace.

If any person listed on this return had healthcare coverage through the marketplace (Exchange) for even one month of 2024, please submit form 1095-A.

RFCFI	VING YOUR RFFUND				
	If you are due a REFUND would you prefer		Check mailed to my a	address	Direct deposit to my bank Checking
	Routing #		Account #		Savings
DURI	ING 2024, DID YOU OR \	OUR SPOUS	ξΕ		
Receiv	ve or work in any other states? If yove any of the following? Wages or salaries Unemployment compensation Social Security benefits Disability from Insurance/VA Do you have any other	Gambling wi Pension, and Interest on s Cancellation	nnings nuity, IRA, or retirement incor avings or stock dividends of debt by a lender you have signature control	me 🔲	Self-employ, Farm income, 1099K, NEC, Mis Crypto Currency- Bitcoin or others Rental Income – Received from a relative?
((Other	_	Student loar College tuiti Energy Efficie State estimat Per Quarter:	on ent Improvements (docs) eed taxes	ENTERS:	Rent you paid per month Number of months in 2024 Landlord Name & Address
these p	_	d explanatio , business, p	n of 1099K,1099NEC rize, bonus, for-profit	or 1099/	Misc funds. What did you do for
Enter mile Was your	you place your vehicle into service for best in appropriate spaces Business vehicle available for use during off duty your spouse have another vehicle available.	Personal hours? YES NO	Commute	written evide	ence to support your deduction? YES NO

We will prepare your Federal and State income tax returns using information that you provide.

We may ask for clarification of some items, but we will not audit or otherwise verify the information you give to us.

YOUR RESPONSIBILITIES

It is your responsibility to provide all the information required for the preparation of complete and accurate tax returns. You should retain all documents, cancelled checks, and other data that support your reported income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for your income tax returns, and therefore, you should review them carefully before you sign them.

OUR RESPONSIBILITIES

We are responsible for taking the information given to us by you and ensuring your tax returns are accurate to the best of our knowledge. We are responsible for preparing only the specific income tax forms for the specified tax years (1040 and corresponding state income tax form). We are also responsible for the timely electronic filing of your tax returns.

Any other requested services/forms will require a separate engagement.

During our engagement with you, we may provide you with an estimated refund date. We do not however have any influence over the IRS or State issuing your refunds. These taxing authorities do not guarantee a specific date that a tax refund will be issued.

Your tax returns may be selected for audit by a taxing authority. In the event of a tax examination, we can arrange to assist you with any correspondence or communication that is initiated by the IRS or State.

It is our policy to keep records related to this engagement for 3 years. However, we do not keep any of your original records, so you should retain these records in secure storage. Upon the expiration of the 3 year period, we are free to destroy our records.

In the event of a complaint related to the services we provide, we agree to discuss the complaint, and if necessary, to take action in a good faith effort to resolve the complaint.

All information I have given is true and correct to the best of my knowledge. I also agree to and accept the Terms of Engagement.								
Your Signature		Spouse's Signature	Date					