

Welcome to



CLIENT INFORMATION SHEET

Tax Year:

Are you a [] New or [] Returning client?

If you are a new client how did you hear about us?

- [] REFERRAL [] PHONEBOOK [] RADIO STATION [] TV STATION [] SIGNS [] MAILING [] OTHER

** Tax Return Review Preference: [] In Person [] Phone Call [] Other

1) PERSONAL INFORMATION AS SHOWN ON SSA CARD IF FILING JOINT
TAXPAYER SSN or ITIN SPOUSE SSN or ITIN
NAME DATE OF BIRTH OCCUPATION HOME PHONE CELL EMAIL BEST METHOD OF CONTACT

MAILING ADDRESS
STREET APT OR LOT NO.
CITY ST ZIP COUNTY

2) YOUR FILING STATUS AND HOUSEHOLD INFORMATION ON DECEMBER 31 of the tax year: (Check appropriate box below)
[] Single (Unmarried or divorced) [] Qualifying Widow/Widower (with qualifying dependent(s))
[] Married Filing Joint (Married and filing together) [] Married Filing Separately (Married, but not filing together)
[] Head of Household (Single - with dependent(s)) [] Unsure

Answer Yes or No to each question below
Yes No
[] Did anyone else live in your home for the tax year besides you and the dependents you plan to list below?
[] Did you and/or your spouse live and work in multiple states at any time during the tax year? States:
[] Can you or your spouse be claimed on someone else's tax return?
[] Are you or your spouse legally blind?
[] Are you or your spouse currently serving in the military?
[] Did you have child care expenses? If yes, do you have a statement from the provider
[] If you are the non-custodial parent claiming a dependent on your return, do you have Form 8332 signed by custodial parent?
[] Did you receive Economic Impact Payments (stimulus checks) in 2021? EIP amount \$ Advance CTC amount \$

3) YOUR DEPENDENT INFORMATION (IT IS VERY IMPORTANT THAT THIS INFORMATION BE ACCURATE TO AVOID DELAYING YOUR REFUND.)
NAME OF DEPENDENT (EXACTLY as it appears on Social Security card) SOCIAL SECURITY NO. DATE OF BIRTH RELATIONSHIP (son, daughter, grandchild, etc.) MONTHS IN YOUR HOME FOR THE TAX YEAR

4) DID YOU HAVE INCOME FROM THE FOLLOWING SOURCES?
Yes No

PLEASE COMPLETE THE BACK SIDE OF THIS FORM [arrow]

<input type="checkbox"/> <input type="checkbox"/> Wage Income (Form W-2)?
<input type="checkbox"/> <input type="checkbox"/> Foreign bank account(s)?
<input type="checkbox"/> <input type="checkbox"/> Interest / dividends / sale of stocks & bonds? (Form 1099)
<input type="checkbox"/> <input type="checkbox"/> Digital/Virtual currency (ie: Bitcoin, etc.)
<input type="checkbox"/> <input type="checkbox"/> Pension and/or withdrawal / distribution from your retirement account (Form 1099-R)?
<input type="checkbox"/> <input type="checkbox"/> Unemployment compensation (Form 1099-G)?
<input type="checkbox"/> <input type="checkbox"/> Social security benefits, SSI, VA benefits or RR retirement (Forms SSA-1099, RRB-1099)?
<input type="checkbox"/> <input type="checkbox"/> Gambling winnings, awards, prizes, etc. (W-2G or 1099-MISC)?
<input type="checkbox"/> <input type="checkbox"/> Small business (1099-NEC)?
<input type="checkbox"/> <input type="checkbox"/> Farm/Farm Rental?
<input type="checkbox"/> <input type="checkbox"/> Rental property (1099-MISC)?
<input type="checkbox"/> <input type="checkbox"/> Income from any other source? If so, specify: _____
5) ADDITIONAL TAX INFORMATION
<input type="checkbox"/> Own your home <input type="checkbox"/> Form 1098-Mortgage Interest <input type="checkbox"/> Property Taxes Paid During Tax Year \$
<input type="checkbox"/> Rent in Indiana Amount paid per month \$ How many months paid during tax year?
Landlord Name & Address (*required):
<input type="checkbox"/> Yes <input type="checkbox"/> No Did you make charitable contributions during the tax year?
<input type="checkbox"/> Yes <input type="checkbox"/> No Do you owe back taxes, child support or delinquent student loans or have DFAS or AAFES debt?
<input type="checkbox"/> Yes <input type="checkbox"/> No Did you or anyone on the tax return have healthcare through the Marketplace (healthcare.gov)?
If yes, do you have form 1095-A from healthcare.gov? (*required) <input type="checkbox"/> Yes <input type="checkbox"/> No
6) Virtual Currency:
<input type="checkbox"/> YES <input type="checkbox"/> NO At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?
7) Payment for Services
<input type="checkbox"/> CASH, CHECK, OR CREDIT/DEBIT CARD – YOU PAY TODAY
<input type="checkbox"/> PREPARATION FEE DEDUCTED FROM REFUND (EXTRA FEES APPLY)
<input type="checkbox"/> ADVANCE REFUND (36 – 72 HOURS) (EXTRA FEES APPLY) **Not available after February
8) TAX REFUND DISBURSEMENT
<input type="checkbox"/> DIRECT DEPOSIT: <input type="checkbox"/> Checking <input type="checkbox"/> Savings Bank Name :
Routing # Acct #
or <input type="checkbox"/> CHECK IN MAIL

TAXPAYER'S STATEMENT

I certify that all the above information is true and correct and should be used in completing my tax return. Also, I state that I am qualified to file this return using the filing status selected above. I further understand that any false statement by me and/or my spouse is considered fraud and is punishable under the laws of the United States Government. I am aware Stadler & Company may do tax work for ex-spouses, children who are the age of majority, live-ins, and other family members. I give informed consent to transparency should any matter of conflict of interest develop. I understand that without a court subpoena Stadler & Company will not disclose to any other parties any of the information contained on my tax return. Disclosure is necessary for e-file processing, refund loans, collections, or loan check pickup at any Stadler & Company location.

TAXPAYER SIGNATURE _____ DATE _____

SPOUSE SIGNATURE _____ DATE _____

NEW CLIENTS: I am attesting that I was asked by Stadler & Company to furnish a prior year return to assist in the preparation of my current year taxes. By signing, I agree that I did not provide a prior year return.

Taxpayer Signature _____ Date _____ Spouse's Signature _____ Date _____



Your Tax Return will be filed according to the laws on the date of signature. Any Amended return needed due to new legislation will be an additional fee.

Agreement for Tax Services

Stadler & Company and Taxpayer agree to the following:

1. Thank you, _____ (here-in-after known as Taxpayer), for choosing the professionals of Stadler & Company to prepare and file your tax return, for tax year _____. In doing so, you are telling us that you have received all your tax information (W-2s, 1099s, K-1s, etc.) and that your tax return is ready to be filed. If you receive additional information after we file your return, this document is your official notification that should you request our services in filing the required amended return; we will be charging you an additional minimum \$75.00 fee for services rendered. All returns eligible for electronic filing will be filed electronically.
2. Tax preparation services does not include; taxing authority representation/resolution, bookkeeping services, adding receipts, preparing financial statements, etc. These services can be provided at an additional charge.
3. Stadler & Company's fees are not based upon your income or your tax refund. Fees are based on a per-form charge with a minimum per-form charge. Taxpayer agrees to pay for the services rendered before the release of the completed returns. No tax return will be released without payment in full. Stadler & Company accepts cash, checks, VISA, MasterCard, Discover, and American Express. Any check returned for any reason by your bank is subject to a charge of \$30.00.
4. If you terminate this engagement before completion, you agree to pay a fee for work completed.
5. Please note that we cannot fax/send/share any tax documentation without having specific prior written consent on file in this office. This written consent must be given in person in our office.
6. Stadler & Company stands by its work. If we make an error, we will correct the error at no additional charge. If our error results in a penalty, we will request Penalty Abatement from the taxing authority. If abatement is denied, we will pay the penalty and interest at the time of discovering the error. If there is a history of non-compliance within the last 3 years and the IRS declines abatement, Stadler & Company also reserves the right to decline reimbursement for related penalty and interest. By law, as the taxpayer, you will be responsible for all tax owed.
7. You are required to request and verify that an extension has been filed if one is needed.
8. Tax returns are subject to review by taxing authorities. Should an examination of Taxpayer's return occurs, Stadler & Company would be available to represent you or consult with you under a separate service agreement.
9. **By signing this document, you agree that you understand and accept these provisions. You also agree that providing incomplete or inaccurate information could cause a delay in the processing of your tax return and potentially affect your expected refund or amount owed.**

We appreciate the opportunity to serve you.

Taxpayer

Date

Spouse

Date

08.17.2021

TAX YEAR _____

Consent to **USE OF** Tax Return Information

Primary Taxpayer's name (please print) _____

For your convenience, Stadler and Company may use your tax return information to provide you with information or opportunities that may be of interest to you. Such information may include seminars on topics related to your unique tax situation, ways to improve your tax situation, and financial products.

Stadler and Company has entered into arrangements with a third party to provide qualifying taxpayers with the opportunity to apply for financial products, including Loan, Electronic Refund Check or Electronic Refund Deposit. To determine whether these products may be available to you, we will need to use your tax return information by analyzing it and calculating the amount of your anticipated refund. If you would like us to use your tax return information to determine whether these products may be available to you while we are preparing your return, please sign and date this consent to the use of your tax return information.

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot use, without your consent, your tax return information for purposes other than the preparation and filing of your tax return.

You are not required to complete this form to engage our tax preparation services. If we obtain your signature on this form by conditioning our services on your consent, your consent will not be valid. Your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year.

By signing below, you (including each of you if there is more than one taxpayer) authorize Stadler and Company to use the information you provide to us during the preparation of your tax return to determine whether to present you with the information, opportunities or services as described above.

Taxpayer Signature: _____ Date _____

(If Married Filing Jointly)

Spouse Signature: _____ Date _____

Spouse Name (print): _____

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email at complaints@tigta.treas.gov.

Potential Tax Credit Worksheet

PRIMARY TAXPAYER NAME:	TAX YEAR:
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Complete ONLY sections that apply. Not all sections may apply.

1. ALL TAXPAYERS COMPLETE THIS SECTION

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever had a credit disallowed or reduced in any prior year?
<input type="checkbox"/>	<input type="checkbox"/>	Were you a US citizen, US National or resident alien all year?
<input type="checkbox"/>	<input type="checkbox"/>	Did you and your spouse live in the US all year? If not, how long? _____
<input type="checkbox"/>	<input type="checkbox"/>	Did you have income from outside the US? If so, where? _____
<input type="checkbox"/>	<input type="checkbox"/>	Did you claim any dependents in 2020 that are not being claimed in 2021?
<input type="checkbox"/>	<input type="checkbox"/>	Did you/your spouse received Advance Child Tax Credit Payments? Total received \$ _____
<input type="checkbox"/>	<input type="checkbox"/>	Did you/your spouse received Letter 6419? (**IRS caution – if the amount you report on form 8812 does not match aggregate of Letter(s) 6419, the processing of your return will be delayed**) _____

2. CLAIMING DEPENDENTS/HEAD OF HOUSEHOLD FILING STATUS

<input type="checkbox"/>	<input type="checkbox"/>	Are/Were you separated from your spouse?
<input type="checkbox"/>	<input type="checkbox"/>	If so, did you live with your spouse any time during the last 6 months of the tax year?
<input type="checkbox"/>	<input type="checkbox"/>	Did your child(ren), stepchild(ren), or foster child(ren) live with you during the tax year?
What school(s) did the child(ren) attend?		
<input type="checkbox"/>	<input type="checkbox"/>	Do you have school, daycare, */or medical records for each child as evidence of attendance from your address? These documents must show the parent's name, child's name, and address. IRS MAY REQUEST COPIES OF THESE DOCUMENTS
<input type="checkbox"/>	<input type="checkbox"/>	Is any child listed on your tax return married and filing a joint tax return?
<input type="checkbox"/>	<input type="checkbox"/>	Did you pay for more than ½ the cost of maintaining your home for you and a qualifying dependent?
<input type="checkbox"/>	<input type="checkbox"/>	Is your income sufficient to support yourself and family?
<input type="checkbox"/>	<input type="checkbox"/>	Did any dependent on your tax return make more than \$4,150 during the tax year?
<input type="checkbox"/>	<input type="checkbox"/>	Did anyone living with you help pay living expenses, including toiletries, groceries, clothing, rent, utilities, etc.?
<input type="checkbox"/>	<input type="checkbox"/>	Did anyone in your household have more income than you? What is their relationship to you?
<input type="checkbox"/>	<input type="checkbox"/>	Did anyone not listed on the client information sheet live with you during the tax year?
If so, who? (use the Additional Information section to list additional household members)		
Name: _____ Relationship to you: _____ how long? _____		
<input type="checkbox"/>	<input type="checkbox"/>	Did any adult, other than your spouse, live in the same household as the child(ren) during the tax year?
If so, who?		
<input type="checkbox"/>	<input type="checkbox"/>	Did anyone on your tax return live with you for less than 6 months?
If so, who?		

3. EDUCATION BEYOND HIGH SCHOOL

<input type="checkbox"/>	<input type="checkbox"/>	Did anyone attend school beyond high school during the tax year?
<input type="checkbox"/>	<input type="checkbox"/>	If yes, did they receive a 1098-T?
<input type="checkbox"/>	<input type="checkbox"/>	Are they pursuing a degree or credential?
<input type="checkbox"/>	<input type="checkbox"/>	Were they enrolled more than ½ time for at least one period?
<input type="checkbox"/>	<input type="checkbox"/>	Did they have a bachelor's degree before this tax year?
<input type="checkbox"/>	<input type="checkbox"/>	Have they claimed the American Opportunity or Hope Tax Credit in 4 previous years?
<input type="checkbox"/>	<input type="checkbox"/>	Have they been convicted of a drug felony?
<input type="checkbox"/>	<input type="checkbox"/>	Do you have receipts or financial records for qualifying expenses?

PLEASE COMPLETE THE BACK SIDE OF THIS FORM



4. SELF EMPLOYED INCOME (1099-NEC or 1099-MISC)

If you have a Form 1099, side gig or business, or freelance income, how long have you done this activity? Years:

What evidence do you have to support your business?

Business Cards Business Stationery Receipts/receipt books Business license(s)

Do you have a separate bank account?

If no, how do you track business activity?

Have you filed any sales tax returns or payroll returns? Indicate either/both:

Indicate which of the following you have: Accounting records Paid invoices/receipts Log books

Computer records Mileage Log Car/truck expenses Ledgers Business bank statements

Do you file Form 1099-NEC for subcontractors?

5. OTHER CREDITS

Did you replace windows/doors or install and use geothermal or solar energy?

Did you purchase an electric or plug-in motor vehicle?

Are you aware of any other credit for which you may qualify? Specify _____

By signing this document, you attest that you have understood the questions and answered these questions truthfully. You also understand that your tax preparer may ask additional clarify questions in order to claim additional tax credits.

TAXPAYER SIGNATURE _____ DATE _____

SPOUSE SIGNATURE _____ DATE _____

The IRS continues to intensify its efforts to verify certain Tax Credit claims and holding tax preparers responsible for exercising "DUE DILIGENCE" in preparing such tax returns. Failure to make sufficient inquiries subjects a tax preparer to fines and penalties up to \$1,590 PER RETURN. Therefore, THIS INFORMATION IS REQUIRED as applicable. This worksheet does NOT determine eligibility. It documents receipt of information required to make a proper determination.