GRIGSBY MOSLEY TAX & ACCOUNTING SERVICES

http://www.gmtaxbayarea.com

CLIENT TAX QUESTIONNAIRE 2025

Your Name: _____ Spouse Name: _____

	Yes	No
1. Did your marital status change during 2025? If yes, please explain_____	☐	☐
2. Did you retire in 2025? Do you or your spouse plan to retire in 2025?	☐	☐
3. Enter date of death for taxpayer or spouse (if during 2023 or 2025) Taxpayer: _____ Spouse: _____		
4. Were you or your spouse permanently and totally disabled in 2025?	☐	☐
5. Did you receive any disability payments in 2025?	☐	☐
6. Do you have dependents who must file?	☐	☐
7. Do you have children under age 18 or a full-time student age 19-23 with investment income greater than $2,500?	☐	☐
8. Did you provide over half the support for any other person during 2025?	☐	☐
9. Are any of your dependents **not** U.S. citizens or residents?	☐	☐
10. Did you incur adoption expenses during 2025?	☐	☐
11. Did you receive payments from a pension or profit-sharing plan?	☐	☐
12. Did you receive a total distribution from an IRA or other qualified plan that was partially or totally rolled over into another IRA or qualified plan within 60 days of the distribution?	☐	☐
13. Did you receive tip income **not** reported to your employer?	☐	☐
14. Did you buy, sell, or refinance a principal residence or other real property in 2025?	☐	☐
15. Are you planning to purchase a home soon?	☐	☐
16. Did you incur any casualty or theft losses during 2025?	☐	☐
17. Did you incur any non-business bad debts?	☐	☐
18. Did you or your spouse make gifts or over $15,000 to an individual or contribute to a prepaid tuition plans?	☐	☐
19. Did you pay any individual for domestic services in 2025 (housekeeping, etc.)?	☐	☐
20. Did you buy or sell any stocks or bonds in 2025?	☐	☐
21. Did you, your spouse, or your dependents attend post-secondary school in 2025?	☐	☐
22. Did you use the proceed from Series EE or I U.S. savings bonds purchased after 1989 to pay for higher education?	☐	☐
23. Did you pay interest on a student loan for yourself, your spouse or your dependent?	☐	☐
24. Did you incur any moving expenses in 2025?	☐	☐
25. Do you expect your income and deduction in 2025 to be the same as 2023?	☐	☐
26. Did you pay alimony or collect alimony in 2025?	☐	☐
27. Do you want to have your tax return filed electronically?	☐	☐
28. Do you want direct deposit of any federal or state refund?	☐	☐
29. Did you start a business, purchase a rental property or farm, or acquire interest in partnerships, S corporations or trusts?	☐	☐

Courtesy of Grigsby Tax and Financial Services

	Yes	No
30. Did you sell crypto currency or suffer crypto-related losses in 2025?	☐	☐
31. Did you purchase a hybrid vehicle in 2025? If yes, enter year, make, model and date purchased: _____		
32. Did you donate a vehicle in 2025? If yes, attach Form 1098C		
33. What was the sales tax rate in your locality in 2025? _____%		
34. Did your lender cancel any of your debt in 2025? (Attach any forms 1099A or 1099C)	☐	☐
35. Do you have records to support your expenses?	☐	☐
36. Did you incur health care expenses outside of your employer's health plan coverage?	☐	☐
37. Did purchases a new vehicle assembled in the United States in 2025?	☐	☐
	☐	☐
	☐	☐

Appendix

To reduce the opportunity of identity fraud, please provide me with your Driver's license number or ID number (all filers), date license was issued and expiration date of the license (this is optional but is recommended). If you provided this information to me for 2025 there is no need to provide it this year, unless you renewed your license since initially providing this information.

Name	ID or License Number	Date Issued	Date of Expiration

Please list all dependents for the tax year ended 2025:

Dependent Name	Age	Relationship	Social Security Number

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Did you use a portion of your home ***exclusively*** for business? If so, please provide the following information:

Square footage of your home office area: _____

Total square footage of your home: _____

Total rent paid, if home is rented: $_____

Total Invoices for repairs and maintenance on your house: $_____

Total Utility bills: $_____

Child Care Costs

If you used the services of a childcare provider, please provide me with the following:

Childcare provider's name: _____

Provider's address: _____

Provider's tax ID or Social Security number: _____

Additional Notes:

_____
_____
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