STARLIGHT ACCOUNTING P.O. Box 10218 Casa Grande, AZ 85130	**Tax Information**	**Individual**

You will need:	Complete all pages. You are responsible for the information provided; please make sure it is complete and accurate.
• Tax documents such as Forms W-2, 1099, 1098, and 1095 • Social Security cards or ITIN letters for everyone on your return • Photo ID (such as a driver's license) for you and your spouse	Do not email Social Security numbers. Bring them in person or send them only by a secure method we approve.

About you

Your first name	M.I.	Last name	Date of birth	Occupation	Phone
Spouse's first name	M.I.	Last name	Date of birth	Occupation	Phone

Mailing address	Apt #	City	State	ZIP code	Staff use: photo ID checked ☐

Email address	Preferred contact: ☐ Email ☐ Phone ☐ Text	Lived or worked in two or more states? ☐ Yes ☐ No

Check if you or your spouse were, during the tax year:

A U.S. citizen	☐ You ☐ Spouse ☐ No	Totally and permanently disabled	☐ You ☐ Spouse ☐ No
In the U.S. on a visa	☐ You ☐ Spouse ☐ No	Issued an IRS identity protection PIN (IP PIN)	☐ You ☐ Spouse ☐ No
A full-time student	☐ You ☐ Spouse ☐ No	An owner or holder of any digital assets	☐ You ☐ Spouse ☐ No
Legally blind	☐ You ☐ Spouse ☐ No		

If due a refund, how would you like it?	**If you have a balance due, how would you like to pay?**
☐ Direct deposit (bring a voided check) ☐ Check by mail ☐ Split between accounts ☐ Other: _____	☐ From a bank account ☐ IRS Direct Pay ☐ Installment agreement ☐ Mail a payment to the IRS

Filing status and household

Filing status: ☐ Single ☐ Married filing jointly ☐ Married filing separately ☐ Head of household ☐ Qualifying surviving spouse
Marital status on December 31: ☐ Never married ☐ Married ☐ Divorced ☐ Legally separated ☐ Widowed
If married, were you married all year? ☐ Yes ☐ No Did you live with your spouse at any time in the last six months of the year? ☐ Yes ☐ No

List everyone who lived with you last year (except your spouse) AND anyone you supported who did not live with you. Answer Y or N.

Name (first, last)	Date of birth	Relationship to you	Months in your home	U.S. citizen	Resident of U.S., Canada, or Mexico	Full-time student	Totally and permanently disabled	Issued IP PIN

Income received this year	Expenses paid this year	Events during the year
□ Wages as an employee (W-2), including tips How many jobs? ____ □ Self-employment or contract work (1099-NEC, 1099-K, payment apps) □ Interest or dividends (1099-INT, 1099-DIV) □ Sale of stocks, bonds, crypto, or real estate (1099-B) □ Retirement, pension, or annuity (1099-R) □ Social Security or Railroad Retirement (SSA-1099) □ Unemployment or state tax refund (1099-G) □ Disability benefits or alimony received □ Rental income (home, room, vehicle, or equipment) □ Gambling or lottery winnings (W-2G) □ K-1s (partnerships, S corporations, trusts) □ Prior-year losses or carryovers □ Any other money received: _____	□ Mortgage interest, property taxes, or state and local taxes (1098) □ Medical, dental, or prescription expenses □ Charitable contributions □ Student loan interest or tuition (1098-E, 1098-T) □ Child or dependent care □ Retirement account or HSA contributions □ Educator expenses or alimony paid (not child support) □ Marketplace health insurance (1095-A) □ Energy-efficient home improvements (windows, furnace, solar) Please bring last year's return if you are a new client.	□ Married, divorced, or separated □ Had or adopted a child, or a dependent moved in or out □ Moved (including out of Arizona) □ Started, closed, or bought a business □ Bought or sold a home, vehicle, or investments □ Debt canceled or forgiven by a lender □ Loss in a declared federal disaster area □ Had a tax credit disallowed in a prior year □ Received a letter or bill from the IRS or the state □ Made estimated tax payments or applied last year's refund

If you are self-employed or own a business

Business name and type of work	Do you keep books? In what software?	Gross income / total expenses (estimate)	Vehicle used? Mileage log kept? □ Yes □ No	Home office? Sq. ft. used / total
Entity type: □ Sole prop □ LLC □ S corp □ Other	Employees or contractors paid $600 or more? □ Yes □ No		Staff use: Form 8867 due diligence completed (EIC, CTC, AOC, HOH) □	

Any additional information that would help us prepare your return

Client Information Responsibility

I affirm that all information, documents, and explanations I provide to STARLIGHT ACCOUNTING are true, correct, and complete to the best of my knowledge and belief, including all income, expenses, deductions, credits, assets, liabilities, and information prepared or provided by third parties such as prior accountants, employers, payroll providers, and financial institutions.
I will promptly tell STARLIGHT ACCOUNTING about any change in facts or circumstances that may affect its services, and about any correction to information I gave earlier. STARLIGHT ACCOUNTING relies on the information and representations I provide, and I am solely responsible for any error or omission that results from information that is inaccurate, incomplete, late, or misleading.
I will carefully review every draft and final return, report, and document before anything is filed or submitted. If I find an error or have any issue with STARLIGHT ACCOUNTING's work, it is my responsibility to notify STARLIGHT ACCOUNTING in writing promptly and to take timely action, including acting by the stated deadline on any notice from a taxing authority. STARLIGHT ACCOUNTING is not liable for any penalties, interest, or other consequences that result from my failure to provide accurate, complete, and timely information or from my failure to act promptly.

Client signature	Date	Spouse signature	Date
Client name (print)		Spouse name (print)	