

Tax Client Questionnaire

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Dear Client:

Thank you for allowing arisCPAs™ and AER Enterprises, LLC to serve your tax preparation needs. We look forward to helping you achieve the best possible results this tax season.

It is *important* that you open this document with Acrobat Reader. You may get a copy at:
<https://acrobat.adobe.com/us/en/products/pdf-reader.html>

Please provide the following information to prepare your tax return:

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1. First Name: _____ 2. Last Name: _____ 3. Birthdate: _____
4. Social Security Number: _____ 5. Phone: _____
6. Street address: _____
City: _____ State: _____ Zipcode: _____
7. Filing status: _____
8. Do you have a spouse or dependents? Yes if yes, please provide name, birthdate, & social sec:
A. Name: _____ Birthdate: _____ SSN: _____
B. Name: _____ Birthdate: _____ SSN: _____
C. Name: _____ Birthdate: _____ SSN: _____
D. Name: _____ Birthdate: _____ SSN: _____
9. Do you own your home AND have a mortgage? Yes (If yes make sure to include Form 1098)
10. Do you own a business? Yes
11. Do you own a rental property? Yes
12. Were you at least a half-time student during 2015? Yes (If yes Form 1098 & how much spent for books etc.)
13. Did you and your dependents have health care coverage for the full-year of 2015? Yes (1095A, BorC)
14. Please list any questions or concerns you may have.
15. If you are an existing client, please use the following link to take you to our secure client portal where you can upload your tax documents: <https://www.mytaxdocs.com/?o=2222>

Below is a listing of documents to upload:

Form W2	Form 1099 INT	Form 1099 DIV	Form 1099 MISC
Form 1095 (A,B,or C)	Form 1098T	Form 1099 R	Daycare Stmt
	Last year Tax Return	Driver's License (Required)#	