Updegrove, McDaniel, McMullen & Chiccehitto, PLC

2025 INDIVIDUAL TAX QUESTIONNAIRE (FORM 1040)

Name:

Please provide any update to below contact information:

Taxpayer Email: ______________________ **Spouse Email:** ______________________

Taxpayer Phone: ______________________ **Spouse Phone:** ______________________

	Yes	No	Explanation
Personal Information			
1. Did your marital status, dependents, or address change during the year?	☐	☐	
2. Were you a resident of, or did you have income from more than one state during the year?	☐	☐	
3. Did you make gifts of more than $19,000 to any individual during 2025?	☐	☐	
Income Information			
1. Did you receive, sell, gift, exchange or otherwise acquire or dispose of any financial interest in any digital asset, such as Bitcoin, or Ethereum?	☐	☐	
2. Did you receive any proceeds from:			
a. Business, farm, or rental property?	☐	☐	
b. An installment sale?	☐	☐	
c. A Health Savings Account HSA?	☐	☐	
d. Alimony?	☐	☐	
e. Social Security?	☐	☐	
f. Unemployment or disability?	☐	☐	
g. Side business, gig work, Internet sales, or barter income?	☐	☐	
h. An education savings or 529 plan account?	☐	☐	
i. Disposal of stock or other securities?	☐	☐	
3. Did you convert a traditional IRA to a Roth IRA or complete any retirement plan rollover?	☐	☐	
4. Did you receive tips from an occupation that customarily and regularly receives tips?	☐	☐	
5. Did you receive overtime compensation in 2025?	☐	☐	
Deduction Information			
1. Did you maintain a home office that you used exclusively for business?	☐	☐	
2. Did you contribute to, or would you like to contribute to, a self employed retirement plan?	☐	☐	
3. Did you contribute to, or if eligible would you like to contribute to, an HSA?	☐	☐	
4. Did you contribute to, or would you like to contribute to, a traditional or Roth IRA?	☐	☐	
5. Did you pay for child care while you worked or looked for work?	☐	☐	
6. Do you have evidence to substantiate charitable contributions?	☐	☐	
7. Did you make any noncash charitable contributions? Please provide documentation for donations over $500.	☐	☐	
8. Did you have substantial out of pocket medical expenses that exceed 7.5 percent of your income?	☐	☐	
9. Did you, your spouse, or your dependents pay tuition or student loan interest?	☐	☐	
10. Did you make any contributions to an education savings or 529 plan account?	☐	☐	
11. Did you purchase or sell a business, farm, or rental property during the year?	☐	☐	
12. Did you acquire a new or additional interest in a partnership, LLC, or S corporation?	☐	☐	
13. Did you take out a home equity loan or refinance a principal or second residence this year?	☐	☐	
14. Did you pay significant state income tax, local tax, real estate tax, or personal property tax in 2025?	☐	☐	
15. Did you install or purchase any residential energy improvements such as solar, battery storage, heat pump, insulation, windows, doors, or similar items in 2025?	☐	☐	
16. Did you pay interest on a vehicle loan from 2025 used to buy a new personal use passenger vehicle that qualifies for the new deduction due to final assembly in the United States?	☐	☐	
17. Did you purchase or lease an electric vehicle or plug in hybrid in 2025?	☐	☐	
18. Did you purchase and install a home charging station or other qualifying electric vehicle charging equipment in 2025?	☐	☐	

Foreign Information

	Yes	No	Explanation
1. Did you have an interest in or signature authority over a financial account in a foreign country?			
2. Were you the grantor of or transferor to a foreign trust?			
3. Did you receive income from or pay tax to a foreign government?			

Healthcare Information

	Yes	No	Explanation
1. Did you have lower cost Marketplace Coverage under the Affordable Care Act? If yes, please provide any Form 1095 A you received.			
2. Did you pay long term care premiums for yourself or your spouse? If so, please provide amounts paid per person.			

Miscellaneous Information

	Yes	No	Explanation
1. Did you receive an identity protection PIN from the state or the Internal Revenue Service? If so, please provide the letter with the PIN.			
2. Have you received any IRS or state tax notices or other correspondence?			
3. Would you like direct deposit if entitled to a refund?			
Would you like direct debit for any tax owed?			

If so, please provide:

Account type: ☐ Savings ☐ Checking

Bank routing number:

Account number:

	Yes	No	Explanation
1. Do you expect your 2026 income and expenses to be similar to 2025?			
2. Are there any tax, personal financial, or tax planning issues on which you would like us to focus? If yes, please explain or contact us.			

Please provide the dates and estimated tax amounts paid below:

Federal Estimates:

Due Date	Date Paid	Amount
Q1 – 4/15/25		
Q2 – 6/16/25		
Q3 – 9/15/25		
Q4 – 1/15/26		
Additional		

State Estimates:

Due Date	Date Paid	Amount
Q1 – 4/15/25		
Q2 – 6/16/25		
Q3 – 9/15/25		
Q4 – 1/15/26		
Additional		

Do you anticipate receiving any late tax document(s) after March 31, such as K-1's?
If so, please provide the document name (or form number), anticipated date of receipt, and estimated income or loss amount(s).