

Please complete this worksheet to help us better understand your situation and prepare for the next steps. All information is kept strictly confidential.

01 Contact Information

Full Name _____
Spouse Name _____
Phone Number _____
Email Address _____
Preferred Contact Phone Email Text

02 Military Information

Branch of Service _____
Current Status Active Duty Veteran Reservist Military Spouse
Duty Station / Location _____
State of Legal Residence _____
Stationed outside home state? Yes No

03 Filing Information

Filing Status _____
Will you file jointly? Yes No
Number of Dependents _____
Household moved during tax year? Yes No
Worked in more than one state? Yes No

04 Income Overview

W-2 Income	_____	1099 Income	_____
Self-Employment Income	_____	Rental Income	_____
Investment Income	_____	Other Income	_____



05 Notes & Additional Information

Is there anything important we should know about your tax situation?
