CLIENT PROFILE

	64 51 31				64.30	G4 7					
Client Name	C1: First Name: C1: MI:						C1: Last Name:				
and General	C2: First Name: C2: MI: C2: Last Name: C1: Birth Date: C1: C1: C2: Last Name:							: SSN:			
Info								: SSN:			
Address	Street							Suite/Apt			
	City							State Zip			
Contact				C1: Cell:				C1: Email:			
Info	Home			C2: Cell:				C2: Email:			
	C1: Taxpayer Employer:							C1: Work Phone:			
Current											
Employment	C2: Taxpayer Employer:							C2: Work Phone:			
Dependent In	formation	n (Only in _l	out if you	ur child fo	alls under ti	he IRS's de	efiniti	on of "qua	alifying de	pendent")	
First Na		MI		Last Na		SS		Birth Date		Relationsh	
								Please (Circle <i>YES</i>	<u>or <i>NO</i></u>	
Did you rece	sivo any C	Schodulo V	1 forms	for char	oc in a Dant	norchin		C1: YES/ N	O C2	2: YES/NO	
Limited Liab						nersnip,					
	•			-							
If yes, please b	ring copies	of all of your	^r Schedule	K-1 forms.							
Do you own	any annu	uities?						C1: YES/ N	O C2	2: YES/NO	
C1: If yes, did C2: If yes, did											
G2. 11 y c3, a1c	i you mak	e arry wrene	iiaws. I	es (antour	10) 1						
_								C1: YES/ N	O C2	2: YES/NO	
Do you own	a <u>Traditi</u>	<u>onal</u> (not F	<i>Roth)</i> IRA	4 or 401K	Ω?						
→ C1: If yes,	did you co	ontribute to	it? Yes (amount):_	No	o:					
→ C2: If yes,	did you co	ontribute to	it? Yes (amount):_	N	0:					
Did you con	tribute to	your spou	ıse's IRA	this year	r?			C1: YES/ N	O C2	2: YES/NO	
→ C1: If yes,											
→ C2: If yes,	wnat amo	ount:									
Did you take	e a withdi	rawal or di	istributi	on before	e age 59 ½ f	rom a		C1: YES/ N	O C2	2: YES/NO	
pension plan	n or IRA?	(Only ans	wer if yo	u're 61 aı	nd under)						
→ C1: If yes,→ C2: If yes,	what was	the amoun	t: \$ t: \$								
-								C1: YES/ N	O C2	2: YES/NO	
Did you hav	e any qua	llifying cha	ritable (donation	s (QCD), me	aning			3-	· -	
you donated mo	nev direc	tly from v	our Trac	litional II	RA?						
→ If yes, fill											
Charity:		_ Charity: _									
Amount:		Amount:		_							

CLIENT PROFILE

<u>Please return this form with all your information</u> <u>when you come for your initial tax preparation appointment.</u>

Please remember to bring all of your W-2 forms, 1099 Interest (including accounts with Wood Financial Group), Dividend or Pension forms, and your Social Security Statements if you receive social security payments.

If you are filing **jointly**, have your spouse use **C2 section** for the following questions.

Please Circle YES or NO

Do you have investments with any firm outside of Wood Financial Group? C1: YES/NO C2: YES/NO Did Wood Financial Group prepare your taxes last year? → If no, you **must** bring your last two years' tax returns C1: YES/NO C2: YES/NO → If yes, no need to bring previous year's tax returns C1: YES/NO C2: YES/NO Did you work in another state this year? → If yes, State: C1: YES/NO C2: YES/NO Did you live in another state, for more than 6 months, in 2024? → If yes, State: _____ Did you itemize deductions last year on Schedule A? C1: YES/NO C2: YES/NO If yes, request a Schedule A-Itemized Deductions Worksheet from our office if you did not already receive one in this packet Did you sell or redeem any securities in 2024 outside of a retirement C1: YES/NO C2: YES/NO **Account?** *Schedule D-Capital Gains & Losses → If yes, please provide a 1099-B (record of each sale/redemption & amount you originally paid for a security). Your broker should be able to provide a print-out of this information. We will not be able to complete your tax return w/o this information. → If you are a Wood Financial Group Client, know you must bring your 1099-Bs. Did you receive, sell, exchange, or dispose of any financial interest in any C1: YES/NO C2: YES/NO virtual (crypto) currency? Do you have any rental property? C1: YES/NO C2: YES/NO → If yes, request a Schedule E-Rental Property Worksheet from our office if you did not already receive one in this packet Do you own a business or are you self-employed? C1: YES/NO C2: YES/NO If yes, request a Schedule C Worksheet from our office if you did not receive one in this packet Did you make estimated tax payments? C1: YES/NO C2: YES/NO → *If yes, complete the chart below:*

Record of Estimated Tax Payments								
Payment #	Payment Date	Check #	Amount Paid					
1								
2								
3								
4								
TOTAL								

^{***}Please bring a new voided check to your Tax Drop-off Appointment* **