

Individual On-Boarding Questionnaire

What services do you need (circle all that apply)? Tax Accounting Business Development Representation Other

How did you hear about *Beard & Associates, LLC / Your Tax Pro*? _____

Form Completed By: _____ Date: _____

Taxpayer's Full Name: _____ Joint Taxpayer's Full Name: _____

Nickname: _____ Nickname: _____

Physical Address: _____ Billing Address: **(If different than physical address)** _____

Attn: _____

Address: _____

Preferred method of contact: _____ Best time to contact: _____

SS #: _____ SS #: _____

Birth Date: _____ Birth Date: _____

Occupation: _____ Occupation: _____

Employer: _____ Employer: _____

Work Phone: _____ Work Phone: _____

Cell Phone: _____ Cell Phone: _____

Email: _____ Email: _____

Home Phone: _____ Anniversary: _____

Fax: _____ Fax: _____

DEPENDENTS: *Please list all children, elderly parents, disabled relatives, or others that you can claim*

Name	SS Number	Birth Date	Relation

OTHER TAX RETURNS:

Do you have ownership in or is anyone on the return a beneficiary in any of the following (circle all that apply)?

Sole Proprietorship (LLC) Partnership (LLC) C-Corporation S-Corporation Trust Estate/Other

Individual On Boarding Questionnaire (Continued)

SUPPORTING MATERIAL:

Do you have a Social Security card for each person on the return? ___ YES ___ NO

To help us comply with the requirements of IRS to help fight return fraud we ask that you supply us with each dependent’s Social Security Card and birth certificate and in such situations, other legal documents which identifies that you have the legal right to claim the person as a dependent on your tax return. Is this acceptable to you? ___ YES ___ NO

DEPENDENT OF ANOTHER PERSON:

- 1. Can the taxpayer be claimed as a dependent of another person (such as a parent)? ___ YES ___ NO
 If “YES” was or will the taxpayer be claimed as a dependent on that person’s tax return? ___ YES ___ NO
- 2. Can the joint taxpayer be claimed as a dependent of another person (such as a parent)? ___ YES ___ NO
 If “YES” was or will the spouse be claimed as a dependent on that person’s tax return? ___ YES ___ NO

EARNED INCOME TAX CREDIT (EITC or EIC):

- 1. Have you ever applied for or received the EITC? (If “No” skip to State of Residency) ___ YES ___ NO
- 2. Was EIC disallowed or reduced in a previous year and the taxpayer asked to file Form 8862? ___ YES ___ NO
- 3. Has the taxpayer been notified by the IRS that EIC cannot be claimed this tax year? ___ YES ___ NO

STATE OF RESIDENCY:

Taxpayer: Are you:

- ___ Full-year resident of Michigan
- ___ Part-year resident of Michigan Previous state of residence: _____
 Date left the previous state: _____ Date established residency in MI: _____
- ___ Non-resident of Michigan What is your state of residency? _____

Joint Taxpayer: Are you:

- ___ Full-year resident of Michigan
- ___ Part-year resident of Michigan Previous state of residence: _____
 Date left the previous state: _____ Date established residency in MI: _____
- ___ Non-resident of Michigan What is your state of residency? _____

MICHIGAN DISABILITY: Are either the Taxpayer, Joint Taxpayer or any dependent

Blind	Paraplegic/Hemiplegic/Quadriplegic
Deaf	Totally & Permanently Disabled
Disabled Veteran	Other: _____

DIRECT DEPOSIT and AUTOMATIC WITHDRAW:

Would you like any refund received **Direct Deposited**? ___ YES ___ NO

Would you like any payments required to be **Automatically withdrawn**? ___ YES ___ NO

If “Yes”, please provide a Voided check or the following from a bank ID Card:

Financial Institution Name: _____

Routing Number: _____ Account Number: _____

AS A MATTER OF POLICY:

- 1. If your return qualifies, your return will be electronically filed (Federal, State & Local).
- 2. All new clients may be required to place a deposit against fees at time of dropping off or uploading their preparation material.
- 3. Completing this Form and submitting documentation with it automatically allows us to start processing your return without any further instructions from you at which time you will be responsible for preparation fees. See Engagement Letter for details.