

Full Questionnaire

For US Returns

Date/_	/	
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Client Information

	Taxpayer			Spous	e		
Full Name			Full Name	-			
Legal Gender					Female		
Disabled			Disabled				
SSN#/ITIN#			SSN#/ITIN# _				
Name on SSN/ITIN	Card		Name on SSN	I/ITIN Card			
Foreign Tax ID #			Foreign Tax II	D			
Name on Foreign T	ax ID Card		Name on For	eign Tax ID Card _			
Other			Other				
Select all that apply			Select all that	t apply:			
US Citizen			US Citize	en			
Canadian Citiz	en		Canadiar	n Citizen			
Green Card Ho	older		Green Ca	ard Holder			
Other			Other				
			Passport Num	nber			
Expiry Date			Expiry Date _				
Visa Type			Visa Type				
Visa Number			Visa Number				
Expiry Date			Expiry Date _				
Occupation			Occupation _				
Email Address			Email Address	s			
			Phone Number				
Mailing Address							
		State/Province		Zip/Po	ostal Code		
•	• -	State/Province		Zip/Po	ostal Code		
		Preferred Days,					
* For any question	າs which you are ເ	unsure of the answer, pleas	se enter a que	stion mark. *			
Marital Status as of	f Dec 31 st :						
Single	Married	Common-Law	_ Separated	Divorced	Widowed		
Changed this year?	Yes No	If yes, Date of Change					



$\label{lem:period_period_pages} \textbf{Dependent Information} \ {\ \ } \ \textbf{Please use additional pages as needed.}$

NOTE: Dependents may not be limited to just children

Middle Name	
First Name	First Name
Gross Income \$	Gross Income \$
Date Of Birth	Date Of Birth
Name on SSN/ITIN Card	Name on SSN/ITIN Card
Foreign Tax ID #	Foreign Tax ID #
Name on Foreign Tax ID Card	Name on Foreign Tax ID Card
Select all that apply:	Select all that apply:
US Citizen	US Citizen
Canadian Citizen	Canadian Citizen
Green Card Holder	Green Card Holder
Other	Other
Passport Number	
Issuing Country	
Expiry Date	Expiry Date
Visa Type	Visa Type
Visa Number	Visa Number
Expiry Date	Expiry Date
Expenses - Select all that apply:	Expenses - Select all that apply:
Child Care Expenses	Child Care Expenses
Medical Expenses	Medical Expenses
Education Expenses	Education Expenses
Other	Other
Additional Information:	Additional Information:



Tax Returns and Other Information

Complete the next pages for your individual situation. If filing jointly, please complete additional pages for your spouse.

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1.	Year of last US return filed Type of Return?1040 1040NROther
2.	Can you or your spouse be claimed as dependent s on anyone else's return? Yes No Not Sure
3.	Did either spouse pay more than half of the cost of keeping up the home during the year?TaxpayerSpouse
4.	Have you or your spouse ever received a request from the IRS to a file a US return? YesNoNot Sure
5.	Did you move during the tax year(s)? Yes No
	If yes, date of move
	Previous address
6.	State/Province of residence on Dec 31st States/Province resided in during 2023
US I	Foreign Earned Income Exclusion (Form 2555)
1.	Have you or your spouse previously filed Form 2555? YesNoNot Sure
2.	Date residency was established outside of the United States
3.	While residing outside of the US did you:
	Rent your home Own your home Employer provided Other
4.	Did you maintain a home in the US while residing outside of the US? Yes No
	Address of US home:
5.	Were you or your spouse present in the US at any time during the last calendar year? Yes No
	If yes, please provide a list of dates and the purpose of each visit. (i.e February 8 th -20 th , April 15 th -30 th)



Please complete applicable years – check all that apply

	TAXPAYER		SPOUSE	
Income	2022 2023		2022	2023
Employment income (wages)				
Earned tips or casual income				
Received interest, dividend or other investment income (1099-INT/1099-DIV)				
Received a form 1099				
Sold shares/units of stock/mutual funds				
Purchased, sold, mined, traded or owned crypto/virtual currency, NFTs				
Have income not reported on a slip or tax form				
(jury duty, gambling winnings, alimony, etc.)				
Ever withdrawn monies from retirement plan				
Are self-employed				
Own rental property located in the US				
Own rental property located outside of the United States				
Own <u>any</u> shares in a US LLC or other Corporation (if yes, please see "other" section)				
Own any interest in a partnership (if yes, please see "other" section)				
Are you the executor of an Estate (If yes, please see "trust" section)				
Received a gift or bequest during the year (if yes, please see "trust" section)				
Deductions (Receipts must be available upon request by IRS/CRA)	2022	2023	2022	2023
Made contributions to a retirement plan (if yes, please see "Retirement Accounts" Section)				
Paid expenses for post-secondary education for yourself or family member				
Paid medical expenses (including medical travel)				
Paid Mortgage Interest				
Paid Real Estate taxes				
Paid State tax last year/filed a state return				
Donated to charity				
Paid for preparation of last year's tax return(s)				
Paid estimated taxes to the IRS (not reported on a tax slip or form)				
Paid student loan interest				
Incurred a casualty/theft loss				
Paid moving expenses				
Paid alimony				
Incurred employment expenses				
Purchased a home or vacation home				



US SPECIALIZED ACCOUNTS AND REPORTING

Foreign Bank Account Reporting (FBAR)		TAXPAYER			SPOUSE		
		NO	NOT SURE	YES	NO	NOT SURE	
Do you have signing authority or an interest in any bank/financial accounts* outside of the United States?							
Did the combined high value of <u>ALL</u> accounts exceed \$10,000 USD at any time during the last year?							
Have you previously received a letter from the IRS requesting you file this form?							
*Note: Financial accounts include checking, savings, retirement plans, life insurance policies with a cash an account, Canadian registered plans (RRSP, TFSA, RDSP, RRIF,etc.)	surrende	r value, s	stock/bonds	s/mutual f	funds held	inside	
Retirement Accounts	YES	NO	NOT SURE	YES	NO	NOT SURE	
Do you own or contribute to a retirement/pension plan located outside of the United States?							
Is the plan sponsored by an employer?							
Have you inherited a retirement/pension plan outside of the United States?							
Have you previously made an election to defer taxation on Form 8891 or Form 8833?*							
*If yes, please attach the statement showing the value of the plan(s) on December 31st.							
Trusts/Gifts	YES	NO	NOT SURE	YES	NO	NOT SURE	
Do you own, contribute or are beneficiary of a tax deferred plan outside the US?							
Do you own, contribute or are beneficiary of a tax exempt plan outside the US?							
Do you own, contribute or are beneficiary of any other tax deferred/exempt plan outside of the US?							
Do you own, contribute or are beneficiary of a deferred profit sharing plan (DPSP)?							
Do you own, contribute or are beneficiary of a employer stock purchase plan (ESPP)?							
Do you own, contribute or are beneficiary of any other trust?							
*If yes, please provide statements for the entire calendar year for all applicable accounts.		•		•			
Have you received a gift/bequest of more than \$100,000 USD?							
Have you received more than \$15,601 USD from a corporation or partnership?							
Have you previously filed form 3520 and/or 3520A?							
Have you previously received a letter from the IRS requesting you file these forms?							
Other	YES	NO	NOT SURE	YES	NO	NOT SURE	
Do you own/have interest in 10% or more of a non-US corporation/partnership?							
*If yes, please attach an income statement and balance sheet and a copy of the last return filed in respec	t of the a	pplicable	corporatio	n/partne	rship.		
Have you previously filed Form 5471 or Form 8865?							
Have you previously received a letter from the IRS requesting you file these forms?							