Individual Tax Worksheet – Returning Client

MCS
Certified Public Accountants

Client Information Date: _____

Taxpayer Name: _____ Cell Phone Number: _____

Spouse Name: _____ Cell Phone Number: _____

Taxpayer Email: _____ Spouse Email: _____

Full Address: _____

Did you move this year? Y N Date of move: _____ School District: _____ Co. _____

Required Information:

Did you buy, sell, exchange or receive any digital assets (e.g. Bitcoin or Cryptocurrency) during 2026 Y N

Do you have funds in a foreign bank account? Y N Did you receive overtime in 2026? Y N

Would you like to set up a Trump Account for your child under the age of 18? Y N

Amount of cash donations to qualified charities? Y N If **yes**, total contributions: $ _____
*Please retain receipts. You do not need to provide them to us unless we specifically request them.

Educator Expense (teachers only): $ _____ (up to $500 for K-12 accredited school)

The IRS requires bank account information for direct deposit and electronic withdrawal.

Bank: _____ Routing #: _____ Account #: _____ Checking ☐ Savings ☐

Did you pay all FEDERAL estimates? Y N
If **yes**, enter amounts, dates and check # below.

	Amount	Date	Check #
1Q			
2Q			
3Q			
4Q			

Did you pay all STATE estimates? Y N
If **yes**, enter amounts, dates and check # below.

	Amount	Date	Check #
1Q			
2Q			
3Q			
4Q			

Child Care Expenses:

Daycare Provider Name:_____ SSN/EIN: _____ Amt Pd:$_____

Address: _____

K-12 Tuition, Books, Extracurriculars (IA & MN): $_____

College Education Expenses (1098-T): Y N

Names of Dependents you are claiming: _____

_____

NEW Dependent – Name: _____ Rel: _____ DOB: _____ SSN: _____

Do you have custody of the dependents? Y N (If **No**, explain below.)

_____

Preferences: We will electronically file your tax return. How would you like your copy of the tax return?

Tax Return Copy: Paper ☐ Electronic ☐ Signature Method: In-Person ☐ Electronic ☐

Billing Method: Mail ☐ Email ☐ Pick up Location: Osage ☐ Riceville ☐ Cresco ☐ Nashua ☐