

Grasso and Kayser, CPAs PC  
 2504 Albany Street  
 Schenectady, NY 12304  
 (518) 372-4070  
 2025 Questionnaire

**Please write legibly when filling out this form.**

**Name:**

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**School District:** \_\_\_\_\_ **County:** \_\_\_\_\_

**Phone Cell:** \_\_\_\_\_ **Work:** \_\_\_\_\_ **Home:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Taxpayer Occupation:** \_\_\_\_\_ **Spouse Occupation:** \_\_\_\_\_

Yes	No

1. If you have a **REFUND**, would you like it deposited automatically into your bank account?  
 If you have a **BALANCE DUE**, would you like the amount automatically withdrawn from your account?

**Name of Bank:** \_\_\_\_\_

**Bank Routing Number:** \_\_\_\_\_

**Account Number:** \_\_\_\_\_

Yes	No

**Is this a Checking account?**

**Would you like a PAPER copy or electronic PDF copy of your return? (Please check one)**

\*If PDF, our new encryption system is **Encyro**, PLEASE be on the lookout for an email from Encyro.

\*\*Please note that there is an additional charge for choosing more than one option or more than one copy.

PDF*	Paper

2. Please provide name, date of birth, and social security number for yourself & all dependents (if you have not provided in the past).

Name	Birth Date	Social Security Number

3. Due to NYS Regulations, we will need to obtain information off of your Driver's License to e-file all returns.

If your license has been **reissued** since last year or you are a new client, please complete the following:

ID Number:	State	Expiration Date:	Issue Date:	Document Number:

4. Did you receive unemployment benefits in 2025?

If yes, please provide a copy of your 1099-G. (<https://www.tax.ny.gov/pit/file/1099g.htm>)

Yes	No

5. Did you contribute to an HSA (Health Savings Account) in 2025? If so, how much? (Please provide form 5498-SA)

Yes	No

6. Did you purchase a car, light truck, motor home or motorcycle in 2025?

If yes, how much sales tax did you pay on the purchase?

Yes	No

7. Did you purchase or sell a home in 2025? If yes, please provide a copy of your closing statement.

Yes	No

8. Do you have any financial assets or any other assets (properties, etc) located in a foreign country?

Yes	No

9. Have you had any credits disallowed or reduced in prior years? (You would have received a notice from the IRS or NYS)

If yes, please provide copies of any notices.

Yes	No

10. Did you buy, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?

If yes, we will need the date purchased and sold, the proceeds, and the cost basis.

Yes	No

11. Did you, your spouse, and your dependents have health insurance for all of 2025?

If yes, please check the applicable box below:

Yes	No

Employer

Marketplace/Obamacare (Please attach form 1095-A)

Social Security/Medicare

Fidelis/Medicaid

Other \_\_\_\_\_

12. Did you or any of your dependents incur college education expenses for 2025?

If yes, please provide name of the college, the dependent and the expenses paid.

Expenses include tuition, textbooks & course materials. **We need both the 1098-T AND detailed receipt of payment & charges from the college**

Yes  No

Dependent	Year in College	College Name	Amount Paid

13. Did you contribute to a New York 529 College Saving Plan in 2025?

If yes, how much? (We will need year end statements showing contributions)

Yes  No

14. Did you make any purchases where you did not pay sales tax, such as through catalogs or online in 2025?  
If yes, please provide total amount of such purchases.

(If you are unsure of the total, NYS provides a chart for calculation which is based on your adjusted gross income)  
Would you like to use the chart provided by New York State?

Yes  No

15. Did your marital status change in 2025? (Married, divorced, separated, widowed)  
If yes, please specify?

Yes  No

16. Did you make any donations to charitable organizations during 2025?

If yes, please provide amount for "Cash" donations:

and "Non Cash" donations :

Yes  No

\*Please note that the IRS requires sufficient substantiation for cash and non-cash contributions valued at \$250 or more.

17. Did you sell any stock or investments during 2025?

If yes, we will need the date each investment was purchased and the cost basis.

Yes  No

18. Did you receive gambling winnings of \$600.00 or more in 2025? If yes, please provide form W-2G

Yes  No

19. Did you receive a STAR refund check from NYS in 2025? If yes, how much?

\*If you are unsure, please logon to: [www.tax.ny.gov/pit/property/credit-lookup.htm](http://www.tax.ny.gov/pit/property/credit-lookup.htm)

Yes  No

20. Did you and/or your spouse pay Long Term Care Premiums in 2025?

If yes, how much?

Yes  No

21. Did you receive qualified tips as an employee in 2025?

If yes, how much? (Please attach documents/records supporting this amount)

Yes  No

22. Did you receive qualified overtime compensation in 2025?

If yes, how much? (Please attach documents/records supporting this amount)

Yes  No

23. Did you take out a loan to purchase a new personal use vehicle, which

underwent final assembly in the US, after December 31, 2024?

If yes, please provide the vehicle's VIN and documents supporting the amount of interest paid on the vehicle in 2025.

Yes  No

24. Did you pay any estimated Federal or New York State tax payments in 2025? Please provide dates and amounts:

Due Date:	Date Paid:	Federal	New York
04/15/25	_____	_____	_____
06/15/25	_____	_____	_____
09/15/25	_____	_____	_____
01/15/26	_____	_____	_____

\*\* Please note that the IRS will never call you directly. If you receive a call do NOT give them any of your personal information. \*\*

We will prepare your 2025 Federal and State income tax returns from information you provide us. We will make no audit or other verification of the data you submit, although it may be necessary to ask you for clarification of some of the information. It is your responsibility to provide all the information required for the preparation of complete and accurate returns. You should retain all documents, canceled checks and other data that form the basis of income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the income tax returns and, therefore, you should review them carefully before you sign them. Our fee for these services will be based upon the amount of time required at standard billing rates plus out of pocket expenses with a minimum of \$300. Fees for preparation of your tax return are due upon presentation of our invoice to you and no tax return may leave our office without payment, with NO exceptions. Interest will be added at a rate of one percent per month for invoices outstanding more than 30 days. If the foregoing fairly sets forth your understanding, please sign this form in the space indicated and return it to my office.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_