

Children who lived with you: (Separate sheet provided for additional children)

1. Name _____ Relationship to you _____
SS# _____ Birthdate _____ Months lived with you in 2025 _____
Claim as a dependent Y N Provided over half his/her support? Y N
Did the dependent work in 2025? Y N Did he/she have health insurance? Y N

2. Name _____ Relationship to you _____
SS# _____ Birthdate _____ Months lived with you in 2025 _____
Claim as a dependent Y N Provided over half his/her support? Y N
Did the dependent work in 2025? Y N Did he/she have health insurance? Y N

3. Name _____ Relationship to you _____
SS# _____ Birthdate _____ Months lived with you in 2025 _____
Claim as a dependent Y N Provided over half his/her support? Y N
Did the dependent work in 2025? Y N Did he/she have health insurance? Y N

4. Name _____ Relationship to you _____
SS# _____ Birthdate _____ Months lived with you in 2025 _____
Claim as a dependent Y N Provided over half his/her support? Y N
Did the dependent work in 2025? Y N Did he/she have health insurance? Y N

Did you homeschool or send any of your children to private school in 2025? Y N How Many? _____

If a question arises while we are preparing your return, may we contact you outside of our regular business hours?

Including: (please circle) Weekdays between the hours of 7:00p.m. and 9:00p.m. Y N
Weekends including Saturday Y N and Sunday Y N

Do you wish to authorize Winger Tax Services to talk to the Internal Revenue Service and the Indiana Department of Revenue on your behalf? Y N

***If you are new to Winger Tax Service, please share the first and last name of the person that told you about us or how you heard about us.**

***Referred by: _____ *Other Source: _____**

Do you have a question or something special or unique about your return this year?

Please include a note to the preparer here.

Verification of information sheet:

I have filled out or looked over the above information and guarantee that I am providing complete and accurate information. I am aware that I am responsible for the accuracy of my tax return.

Signature

Date

Spouse Signature

Date