

# PERMANENT FILE INFORMATION SHEET

**TAX YEAR** \_\_\_\_\_ **Did we prepare your return last year?** **YES** **NO**  
**DATE** \_\_\_\_\_ **Filing Status:** **MFJ** **S** **MFS** **HOH**

1) Name(s) \_\_\_\_\_ DOB \_\_\_\_\_ SSN \_\_\_\_\_  
 \_\_\_\_\_ DOB \_\_\_\_\_ SSN \_\_\_\_\_

2) Address: \_\_\_\_\_ 3) Phone number \_\_\_\_\_  
 \_\_\_\_\_ 4) E-mail address \_\_\_\_\_

\*\*Resident of which State? \_\_\_\_\_

5) List any Dependents here: Are there any changes to dependents from prior year? **Yes** **No**  
 List changes (if any) below:

Name \_\_\_\_\_ M / F DOB \_\_\_\_\_ SSN \_\_\_\_\_  
 Name \_\_\_\_\_ M / F DOB \_\_\_\_\_ SSN \_\_\_\_\_  
 Name \_\_\_\_\_ M / F DOB \_\_\_\_\_ SSN \_\_\_\_\_

**Attach copy of Social Security cards for new dependents or newly married individuals**

Did each dependent live in your household for the entire year? **Yes** **No**

**If you are HOH, who claims your children?** \_\_\_\_\_

6) Are you claimed as a Dependent on anyone else's return? **Yes** **No**  
 If yes, enter your Parent/Guardian's name here \_\_\_\_\_

7) What type of *income* did you receive this year? (Check all that apply)  
 \_\_\_\_\_ **W-2's** \_\_\_\_\_ **Interest Income** \_\_\_\_\_ **1099's** \_\_\_\_\_ **Other:** \_\_\_\_\_

8) What type of *expenses* did you have this year? (Check all that apply)  
 \_\_\_\_\_ **Interest on School Loans (1098-E)** \_\_\_\_\_ **College Tuition (1098-T)**  
 \_\_\_\_\_ **Real Estate Tax Paid** \_\_\_\_\_ **Sales Tax Paid on New Vehicle**  
 \_\_\_\_\_ **Mortgage Interest Paid (1098)** \_\_\_\_\_ **Daycare-Provider's name, SSN, address & amount paid.**  
 \_\_\_\_\_ **Other:** \_\_\_\_\_ **Y / N - Charitable Donations - Amount \$** \_\_\_\_\_

9) Did you pay interest on new passenger vehicle in 2025? **Must have final assembly in the USA.** Int Paid in 2025 \_\_\_\_\_  
 Make & Model \_\_\_\_\_ VIN \_\_\_\_\_ Loan Origination Date \_\_\_\_\_

10) Did you update your home with energy efficient items? furnace--AC--heat pump--windows--doors--water heater--insulation  
 Amount Paid \_\_\_\_\_ QMID# \_\_\_\_\_

11) Did you or are you going to contribute to an IRA or Roth IRA? **Traditional** **Roth**  
 If so, how much did/will you contribute? \$ \_\_\_\_\_ Maximum = \$7,000; \$8,000 if 50 and over

12) Did you have health insurance through exchange/marketplace? **Yes** **No**  
 If answer to #11 is yes, please provide **Form 1095-A**

13) Did you receive, sell, exchange, or otherwise dispose of any financial interest in virtual currency?  
 (examples: Bitcoin, Litecoin, Ethereum, etc.) **Yes** **No**

14) Did you pay property taxes in the State of Nebraska? **Yes** **No**  
 If yes, provide all property tax statements which include your parcel identification number and county paid.

15) If applying for a **Nebraska Homestead Exemption**, please provide a summary of all medical expenses paid.

16) Would you like your return to be Direct Deposited/Debited? **Checking** **Savings**  
 Debit Date \_\_\_\_\_ Please attach copy of cancelled check.