

**KK Tax & Accounting Inc.**  
**KK Insurance Brokerage Inc.**  
鴻信會計師/保險事務所

**F1 (less than 6 years) & J1 (less than 3 years) Taxpayer Document Request List**

(留学生和访问学者报税需要材料)

Return Client     New Client

	Name	Date
E-Filed by		
Saved by		

**Personal Information 个人信息**

Taxpayer 纳税人: \_\_\_\_\_  
Last name 姓 \_\_\_\_\_ First name 名 \_\_\_\_\_

SS#社安号码: \_\_\_\_\_

During 2024, did you own or sell any virtual currency \_\_\_\_\_  
在2024年, 您是否拥有或买卖过虚拟货币?

DOB出生日期 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_

Occupation职业: \_\_\_\_\_ Telephone 电话: \_\_\_\_\_ Email 邮箱: \_\_\_\_\_

1 Current Address : \_\_\_\_\_ NJ resident need Form 1095 health Ins.

In which State did you live in 2024? \_\_\_\_\_ Date From: \_\_\_\_\_ Date To: \_\_\_\_\_ Monthly Rent: \_\_\_\_\_  
State: State: \_\_\_\_\_ Date From: \_\_\_\_\_ Date To: \_\_\_\_\_ Monthly Rent: \_\_\_\_\_

2 Bank information for direct deposit of refund

Bank Name \_\_\_\_\_ Routing# \_\_\_\_\_ Account.# \_\_\_\_\_  
 Checking Account or  Saving Account

3 First Date & Year arrived in U.S. as F1 or J1 visa (New Client Only): Month \_\_\_\_\_ Date \_\_\_\_\_ Year \_\_\_\_\_

4 Please list total days stayed in U.S. and departure and returned date for each year of visa type below:

2022 (total # of days in US) \_\_\_\_\_ Type of Visa \_\_\_\_\_  
2023 (total # of days in US) \_\_\_\_\_ Type of Visa \_\_\_\_\_

Departure date	Arrived Date	Total # of days in U.S.	Type of Visa
2024 _____	_____	_____	_____
2024 _____	_____	_____	_____
2024 _____	_____	_____	_____

5 If you filed tax return in prior year? If yes, which year \_\_\_\_\_ And type of Form: 1040NR, 1040NR-EZ or 1040,  
(Please provide a copy of last year tax returns if filed)

6 School Name, Address, Contact phone and Professor name #: \_\_\_\_\_

7 Have you ever changed the visa type during the tax year?  
If yes, please indicate the date you changed and type of original visa: \_\_\_\_\_

8 If you have green card before or applied for ever? Yes or No

9 Document Needed (copy is fine): Passport, Visa, Driver ID (both side), I20, I-94, Ead Card if any

10 **Following income document original or copy if any** 如有以下收入表格, 请提供给我们

<input type="checkbox"/> Form 1099-B for Stock (sch.D)	<input type="checkbox"/> Form W2
<input type="checkbox"/> Form 1099-Div / int (sch.B)	<input type="checkbox"/> Form 1042s
<input type="checkbox"/> Form 1099-Misc. (sch.C)	<input type="checkbox"/> Other Income

10 **Schedule A expenses:** Donation \$ \_\_\_\_\_

Taxpayers are responsible to submit any document if being audit by IRS or State. There will be additional charge if the taxpayer ask the CPA Firm to follow up and submit additional supporting documents if requested by IRS or Sate

(如国税局,州或当地税务局要求提供材料证明所报的税表内容,客人要自己提供给税务局。如需要会计师帮忙提供材料,我们会额外收费。)



微信二维码

Treaty County & amount: _____ Form 8833, Form 8843 & Form 8949
Fee \$ _____ Paid _____

Client Signature(签名) \_\_\_\_\_

Above is true and based on actual records  
以上个人和收入信息均属实