

Please help us better serve you. Kindly complete and return to the receptionist. Thank you!

Name(s) on Tax Return _____ Spouse _____

Street Address _____ Apt # _____

City, State, _____

Daytime Phone _____ Spouse Daytime Phone _____

Evening Phone _____ Spouse Evening Phone _____

Cell Phone _____ Spouse Cell Phone _____

Email Address _____ Spouse _____
(required for E-Filing)

Have you moved in the last year? NO YES

Are there any new dependents? NO YES

Are there any dependents you are no longer claiming? NO YES

Did you receive a stimulus check NO YES

If Yes, how much Check 1: \$ _____ Check 2: \$ _____

	Primary		Spouse	
Did you collect NYS unemployment in 2020?	NO	YES	NO	YES
Have you traded any cyber currencies?	NO	YES	NO	YES
Have you (or an entity of which you are an owner) been convicted of an offense, defined in New York State Penal Law Article 200 or 496, or section 195.20? (REQUIRED FOR NY IT-201/203-ATT FILERS)	NO	YES	NO	YES

Would you be interested in being contacted by our Financial Advisor, Ed O'Neill Jr. regarding a post-tax season financial review? NO YES

If yes, please sign consent on back.

Date of Birth _____ Spouse's date of birth _____

Occupation _____ Spouse's occupation _____

How would you like your tax return sent to you when completed? *Portal / E-mail / Mail*

How would you like to meet with Ed? *Zoom / Teleconference / In-person / No meeting necessary*
Availability for In-Person meetings will be limited

Kindly submit this document with a copy of a **voided check, clear copy of the front and back of your driver's license and your spouse's driver's license and the Letter of Engagement**

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516.935.7771



516.822.6704

CONSENT TO DISCLOSURE OF TAX RETURN INFORMATION

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot disclose your tax return information to third parties for purposes other than the preparation and filing of your tax return without your consent. If you consent to the disclosure of your tax return information, Federal law may not protect your tax return information from further use or distribution.

You are not required to complete this form to engage our tax return preparation services. If we obtain your signature on this form by conditioning our tax return preparation services on your consent, your consent will not be valid. If you agree to the disclosure of your tax return information, your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of signature.

You have indicated that you are interested in obtaining information on retirement plans such as an IRA, SEP, or Roth IRA, purchase or sale of investments, managed funds accounts, and/or other advice concerning your financial investments. To provide you with this information, Ed O'Neill Ltd. must disclose your tax return information, as indicated below to EON Wealth Management.

If you would like Ed O'Neill Ltd. to disclose your tax return information to EON Wealth Management, please check the corresponding box for the service in which you are interested, provide the information requested below, and sign and date your consent to disclosure of your tax return information.

I authorize Ed O'Neill Ltd. to disclose to EON Wealth Management that portion of my tax return information for 2020 and future tax returns that is necessary for EON Wealth Management to contact me.

If you approve use of your tax return information by Ed O'Neill Ltd. for a term of one year or (duration of consent) _____ years, please sign below.

Signature: _____

Print name: _____ Date: _____

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email at complaints@tigta.treas.gov.

