

**Please help us better serve you. Kindly complete and submit with all your tax documents.
Thank you.**

Name(s) on Tax Return _____ Spouse _____
Last Name, First Name

Street Address _____ Apt # _____

City, State, Zip _____

Daytime Phone _____ Spouse Daytime Phone _____

Evening Phone _____ Spouse Evening Phone _____

Cell Phone _____ Spouse Cell Phone _____

Date of Birth _____ Spouse's Date of Birth _____

Occupation _____ Spouse's Occupation _____

Email Address _____ Spouse's Email Address _____
(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			
			<table border="0"><tr><th>Primary</th><th>Spouse</th></tr></table>	Primary	Spouse
Primary	Spouse				
Did you collect NYS unemployment in 2025?	NO	YES	<table border="0"><tr><td>NO</td><td>YES</td></tr></table>	NO	YES
NO	YES				
Have you traded any cyber currencies?	NO	YES	<table border="0"><tr><td>NO</td><td>YES</td></tr></table>	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	<table border="0"><tr><td>NO</td><td>YES</td></tr></table>	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			

How would you like your tax return sent to you when completed? *Portal only*
(Please call or email and request a SecureFilePro portal)

Would you like a review session after your tax return is complete?.....NO YES
If yes, please indicate meeting preference.....Zoom / Teleconference

Kindly complete and 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 along with the Letter of Engagement

**Please note: Documents will NOT be returned at the end of the season.
Kindly upload clear copies of all tax documents to the portal or email to us in one .pdf. Thank you.**

1400 Old Country Road, Suite 316, Westbury, NY 11590



www.EdONeillTaxes.com
Office@EdONeillTaxes.info



516.935.7771
516.822.6704

Please do not cut or staple documents.

Do NOT send original documents.

Keep them for your records.

Clear Photocopies ONLY please.

CONSENT TO DISCLOSURE OF TAX RETURN INFORMATION

I would like to thank you for your trust in me as your Accountant. The relationship we have built is truly appreciated. Helping you navigate the complexities of the tax code and keep more of the money you have earned is incredibly rewarding. But there may be more we can plan together.

As you may know, I have over 21 years of experience in multi-generational wealth management, helping families develop sound retirement strategies and achieve financial well-being in all stages of their lives. Whether you are in retirement or preparing for retirement, seeking education, financial planning or looking for investment advice, I can help identify your needs to help you achieve your goals and dreams. I am an independent financial advisor with Cetera Financial Specialists LLC.

What sets me apart from most financial advisors is my extensive expertise as a tax professional. I would like to meet with you to discuss potential tax strategies that can reduce your tax liability and enhance your overall financial position. Please call 516-935-7771 to schedule a meeting.

Federal law requires this consent form to 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.

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 and sign and date your consent to disclose your tax return information.

I authorize Ed O'Neill Ltd. to disclose to EON Wealth Management that portion of my tax return information for 2025 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.

Taxpayer Signature _____ Spouse's Signature _____

Print name(s): _____ 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.

