## >>>> Client Information

| | Taxpayer | Spouse |
|---|---|---|
| **First name (required entry)** | | |
| **Last name (required entry)** | | |

**PROVIDE DATA BELOW IF YOU ARE A NEW CLIENT OR IF INFORMATION HAS CHANGED FROM LAST YEAR.**

| | |
|---|---|
| Filing Status (see below) | |

1 = single, 2 = married filing jointly, 3 = married filing separate, 4 = head of household,

| | Taxpayer | Spouse |
|---|---|---|
| Social security number | | |
| Occupation | | |
| Date of birth (m/d/y) | | |
| Street address | | |
| Apartment number | | |
| City | | |
| State | | |
| Zip Code | | |

| | Taxpayer | Spouse |
|---|---|---|
| Home phone | | |
| Work phone | | |
| Work extension | | |
| Mobile phone | | |
| Fax number | | |
| E-mail address | | |

## >>>> Dependent Information

| | Dependent #1 | Dependent #2 |
|---|---|---|
| First name | | |
| Last name | | |
| Date of birth (m/d/y) | | |
| Social security number | | |
| Relationship | | |
| Mo's lived at home, if not 12 | | |
| Type of dependent (see below) | | |

1 = child living w/taxpayer
2 = child not living w/taxpayer
3 = dependent other than child
4 = head of household only, not a dependent

| | |
|---|---|
| Bank Routing Number | |
| Bank Account Number | |

## >>>> Official Tax Forms

**READ THIS NOTE BEFORE PROCEEDING!**
**PROVIDE THE FORMS LISTED BELOW FOR REVIEW.**
**THEY WILL BE RETURNED TO YOU UPON COMPLETION OF THE TAX RETURN.**

| Form Name / Number | Form Description |
|---|---|
| W2 | Wages |
| W2-C | Corrected Wages |
| W2-G | Gambling Winnings |
| Form 1098 | Mortgage Interest |
| Form 1098-C | Gross proceeds Auto Donation |
| Form 1098-E | Student Loan Interest |
| Form 1099-B | Proceeds from Broker Transactions (stocks, bonds, mutual funds) |
| Form 1099-INT | Interest Earned |
| Form 1099-DIV | Dividends Earned |
| Form 1099-A | Acquisition or Abandonment of Secured Property |
| Form 1099-C | Cancellation of Debt |
| Form 1099-G | Unemployment |
| | State Tax refunds |
| Form 1099-MISC | Rents - box 1 |
| | Royalties - box 2 |
| | Other Income - box 3 |
| | Non-Employee Compensation - box 7 |
| | Medical and Health Care payments - box 8 |
| Form 1099-OID | Original Issue Discount |
| Form 1099-Q | Education distributions |
| Form 1099-R | Retirement Plan Distributions |
| Form 1099-S | Real Estate transactions |
| Form 5498-SA | Health Savings Account contributions |
| Form SSA-1099 | Social Security benefits |
| Form 1099-SA | Health Savings Account distributions |
| Schedule K-1 | Partnerships & LLC's |
| | Estates & Trusts |
| | S Corporations |
| All other tax related forms | |

## >>>> Tax Related Documents

**Provide the following documents for review. All original documents will be returned to you.**

| Document | Description / Comments |
|---|---|
| Previous year tax return | Provide copy if not prepared by our office |
| Closing settlement statements | Provide copies for purchase/sale/exchange/refinance of real property |
| Realized Gains & Losses | Provide statement(s) from financial institutions for asset sales |
| Average Cost Basis | Provide statement(s) from financial institutions for asset sales |
| Auto Acquisition | Provide copy of purchase or lease agreement if auto has business use |
| Noncash donations | If the aggregate total for non-cash contributions are **in excess of $500** for the year, provide receipts for all donations made. Make sure the fair market value is listed on the receipt. |
| All other tax related documents | |