

Client Info

Prior Client New

New Clients Only
 Prior Yr Attached? Y N

Efile (Default) Paper

Filing Status

Single Married Filing Joint

Head of Household

Married but Separate
 (Need to enter Spouse's Information in the Personal Information Section Below)

Marital Status Change

None Got Married

Divorced Separated

Event Date

State Return Info

Full Year St: _____

Part Year State
 Res Dates: to
Mo Day Mo Day

Part Year State
 Res Dates: to
Mo Day Mo Day

Additional Returns that need filed?

Y N

City _____

County _____

School _____

Banking Information

Direct Deposit? Checking
 Y N

Savings

Routing # _____

Acct # _____

Or attach a voided check

Personal Information

Taxpayer	Last Name	SSN	Birth Date	Date of Death
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Check if claimed as dependent on another return, such as a Parent or your Parents.

Spouse	Last Name (if Different)	SSN	Birth Date	Date of Death
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Check here if address changed from last year

Home Street Address	Apt #	Unit #	Zip Code	City
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

State	County	School District	Contact Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Income	Default answer is NO, check all that apply	Questions refer to both Taxpayer and Spouse
--------	--	---

	Forms to Attach	#		
1	Wages	Attached W2's		
2	Taxable Interest or Dividend Income?	(1099-Int or 1099-Div)		
3	Have any Business or Rental Income?	Use Business Income Worksheet		
4	Income from Estates, Trusts, Partnerships or S-Corps?	(Sch K-1)		
5	Social Security Benefits or Railroad Retirement Benefits?	1099 SSA		
6	Sell or exchange any securities/ investments	(Brokerage Stmt-1099-B)		
7	Receive a distribution from a IRA, Retirement or Pension Plan?	1099R		
8	Make IRA Distrib. Directly to Charity?	\$ _____	Amount	Transfer Company
	Known as a Qualified Charitable Distribution (QCD)			
9	State Income Tax Refund last year?	\$ <input type="text"/>		(New Clients Only)
10	Cancellation of Debt?	(1099-A or 1099-C)		
11	Do you have any foreign bank accounts or foreign income?			
12	Receive payments from a Long-Term Care insurance contract?	LTC-1099		
13	Did you receive or pay any Alimony?	(Pre 2019 Only, later disregard)		
14	Gambling Winnings?	Attached W2-G's		
15	Other Income	(Jury Duty, Awards Prizes, Unreported Tips, Cash, Etc)		
16	Unemployment or Disability Benefits?			
17	HSA Distribution?	Attached 1099-SA		

Dependent Questions

Dependents		Prior Clients, Dependents the same as last year, Check this box →	Prior Clients adding New Dependents, Check this box →	Prior Clients, if Dependents differ from last year, Check this box →							
First Name	Last Name (If Different)	Birth Date	SSN			Relation-ship	# of Mos. Lived With	If In College		1098-T	
								X	Yr	Y	N

Dependents in College					Preparer Use Only		
Dependent	College Name	City	State	Tuition Pd-Bx 1	Grants/Sch-Bx 5	Net Tuition	

Dependent Care							
Name of DayCare Provider	Street Name	City	St	Zip	SSN or Employer ID	Amount Paid	W2-Box 10

College 529 Plan					
Name of Account Holder	Relationship	Date Contributed	Amount Contributed	Form Attached	
				Y	N

Notes:

Income Questions

Income	Default answer is NO, check all that apply	Questions refer to both Taxpayer and Spouse
---------------	--	---

Social Security-1099 SSA

	Box 5(Net Benefits)	Part B	Part D	Ttl B&D	Tax Box 6
TP					
SP					

Unemployment 1099-G

	Amount	Federal Tax	State Tax	Name of State
TP				
SP				

Alimony Received	Alimony Paid	Recipient's SSN	Decree Date
\$	\$		

Other Income	\$ Amount
	\$
	\$

17 "Rollover" or "Exchange" any Life, Annuity or Retirement Plan into another?
 18 "Convert" Qualified Money to a Roth IRA?
 If either is Yes, explain below

R	E	C	Owner		Transferring Company-Form 1099-R	Receiving Company	Total Received	Transfer/Converted	Amount Kept
			TP	SP					

R=Rollover, E=Exchange, C=Conversion To Roth IRA

Sales / Exchanges Attach Any Closing Statements or Other Information Received

<input type="checkbox"/> 19 Sell your Main home?	Live there 2 of last 5 yrs?	<input type="checkbox"/> Y <input type="checkbox"/> N	Acquired	Mo Day Yr	Cost	Upgrades	Sold	Mo Day Yr	Sales Price	Profit > 250K if Single, 500K Married?	<input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/> 20 Sell a business, rental or investment property?											

Closing Stmt	Owner			Description of Asset Sold	Date Acquired			Cost Basis	Date Sold		Sales Price
	Y	N			TP	SP	JT		Mo	Day	

Notes: _____

Preparer Use Only

Capital Loss Carryovers from previous years?			
ST	LT	Ttl	

2023 Gain/Loss

Previous Yrs. Pension/Roth Distrib.			
2020	2021	2022	Total

Pens/Roth Dist 2023

Amount	State Tax Refund Previous Yr	Taxable
	Itemized & Deduct State Tax LY	<input type="checkbox"/> Y <input type="checkbox"/> N

Preparer Notes

Y	N
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Do you have Health Insurance?
 Is coverage through the Insurance Exchange?
 If so, need to attach Form 1095A, is it attached?
 Premiums deducted on a Pre-Tax basis thru Work?
 Contribute to Health Savings Account?

HSA Contributions TP \$ SP \$

Medical Expense	Dr/Dent/Eye	Prescripts	Hosp./NH	All Other	Miles

Medical Insurance	NON PRE TAXED PREMIUMS ONLY			Total Premiums
	Medical Ins	Dental/Vision	Med Supp	
Taxpayer				
Spouse				

Medicare	Part B	Part C	Part D-Drug	Total Medicare
Taxpayer				
Spouse				

LTC	Company	Policy #	Premium
Taxpayer			
Spouse			

Taxes	Total RE Tax		
Property	Home	2nd Home	All Others
Auto Lic. Fees	Total Fees		
	Vehicle 1	Vehicle 2	All Others

Interest	Total Interest		
Mortgage Interest	1st Mortgage	2nd Mortgage	Points

Charity	Total Charity		
Miles	Church	All Others	Goodwill

Y N Do you have proof of all Charitable Contributions?

Notes: _____

Adjustments to Income

IRA Contribution	
TP	SP

Roth IRA Contr	
TP	SP

Y	N	Preparer Use Only
<input type="checkbox"/>	<input type="checkbox"/>	TP Covered by Pension Plan
<input type="checkbox"/>	<input type="checkbox"/>	SP Covered by Pension Plan

SEP IRA Contr	
TP	SP

Educator Expense \$300 Deduction		
Check if Educators	TP	SP
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Student Loan Interest		
		Total
TP	SP	

Preparer Use Only	
SE Health	
Bus Profit	

Tax Credits: Solar, Electric Cars, Energy Efficient Home Upgrades

If wanting to take any of these credits, we will need copies of the original paperwork showing cost breakdown of each item, purchase date and dates of installation. If Electric car, need VIN, copy of sticker price and purchase agreement.

Notes: _____

Federal / State Estimated Tax Payments

① Applied	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Fed Total
\$					
	Date Paid	Date Paid	Date Paid	Date Paid	
	Mo Day	Mo Day	Mo Day	Mo Day	

① Applied	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	State Total
\$					
	Date Paid	Date Paid	Date Paid	Date Paid	
	Mo Day	Mo Day	Mo Day	Mo Day	

① Applied is refund applied from last year's return

Y N Fed St

Apply this yr's refunds to next yr's 1st Qtrly Est.?

Want Estimate Vouchers for next year? Fed St State

If made Estimates in 2022, keep the same for 2023?

I want to change or start Estimates in 2023

If changing amount for 2023, explained income differences in notes below

Notes: _____

