

TODAY'S DATE \_\_\_\_\_

**EASTERN IOWA TAX & ACCOUNTING, LLC**  
**NEW CLIENT INFORMATION SHEET**  
**PLEASE FILL OUT COMPLETELY (DUE TO IRS RULING, WE NEED PROPER NAMES)**

YOUR NAME \_\_\_\_\_ S.S. \_\_\_\_\_ D.O.B. \_\_\_\_\_

Cell # \_\_\_\_\_ Occupation: \_\_\_\_\_

SPOUSE \_\_\_\_\_ S.S.# \_\_\_\_\_ D.O.B. \_\_\_\_\_

Cell # \_\_\_\_\_ Occupation \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ Spouse Email \_\_\_\_\_

Marital Status in **2021** (circle one) Married Single Widow(er), Date of Spouse's Death \_\_\_\_\_ File jointly: YES NO

If Filing separately Spouses Adjusted Gross Income is required: \_\_\_\_\_

IOWA RESIDENTS ONLY: SCHOOL DISTRICT YOU LIVE IN \_\_\_\_\_ IL RESIDENTS ONLY: PARCEL ID # \_\_\_\_\_

**DEPENDENTS (CHILDREN & OTHER) \*\*\*COPY OF BIRTH CERTIFICATE AND SOCIAL SECURITY CARD REQUIRED FOR ALL DEPENDENTS\*\*\*\***

Name (First, Last) \_\_\_\_\_

Relationship \_\_\_\_\_ Date of Birth \_\_\_\_\_

SS # \_\_\_\_\_ Months Lived with you \_\_\_\_\_ Disabled: Yes or No

Full Time Student: Yes or No Dependent's Gross Income: \_\_\_\_\_

Name (First, Last) \_\_\_\_\_

Relationship \_\_\_\_\_ Date of Birth \_\_\_\_\_

SS # \_\_\_\_\_ Months Lived with you \_\_\_\_\_ Disabled: Yes or No

Full Time Student: Yes or No Dependent's Gross Income: \_\_\_\_\_

Name (First, Last) \_\_\_\_\_

Relationship \_\_\_\_\_ Date of Birth \_\_\_\_\_

SS # \_\_\_\_\_ Months Lived with you \_\_\_\_\_ Disabled: Yes or No

Full Time Student: Yes or No Dependent's Gross Income: \_\_\_\_\_

Did you claim the **First Time Homebuyer Credit on your 2008 tax return?** (for payback on credit) Yes/No

Were you referred by someone? Yes/No

(If Yes) Name \_\_\_\_\_

\*\*\*\*THIS FORM NEEDS TO BE COMPLETED AND RETURNED WITH TAX DOCUMENTS\*\*\*\*

(OR THIS FORM CAN BE COMPLETED AND DIGITALLY SUBMITTED ON OUR WEBSITE)

Are you claiming any dependents in 2023? - **IF YES ADDITIONAL SHEET REQUIRED** YES NO

Did you or spouse receive any unemployment income? If yes, please provide **1099G** Yes No

Did you receive retirement or Social Security benefits?  
If yes please include Statement from **SSA-1099/1099-R** Yes No

Do you have Medicare? (Social Security health insurance) Yes No

Do you have a health insurance you pay out of pocket?(secondary/supplement) Annual Amount \_\_\_\_\_ Yes No

Do you have Long Term Health Care policy? (Nursing Home Insurance) Yes No  
Name(s) \_\_\_\_\_  
Cost(per individual) \_\_\_\_\_

Did you purchase insurance through Market Place? Will need to provide **1095-A** Yes No

Have you received any of the following **1099's: (Copies Needed)**  
**1099-R** - For distributions from Retirement accounts / including Roll Overs Yes No  
**1099-DIV** - From Stock held Yes No  
**1099-INT** - Interest Income from Banks, Stocks, ETC Yes No

Did you have a self employed business? Yes No

Have you filed a Schedule C, E or F in previous tax year? Yes No

Did you use a credit card processor for business? (You should receive a **1099-K**) Yes No

Did you have any gambling winnings/losses? (If yes please include **W2G's** and loss documentation) Yes No

Did you have any Electronic/Virtual Digital Currency transactions? (**Need documentation**) Yes No

Did you sell any stocks, bonds, mutual funds or other assets? Will need to provide a **1099B** Yes No

Did you make any contributions (outside of payroll) to any IRA in 2023? Yes No  
Whose name is it in? \_\_\_\_\_  
Is it a Traditional or Roth? \_\_\_\_\_  
Amount of contribution(per individual) \_\_\_\_\_

Do you qualify for educator expense? (300 Fed- 500 Iowa) Amount claiming \_\_\_\_\_ Yes No

Did you make any cash donations? Amount \_\_\_\_\_ Yes No

Did you make any **NON** Cash donations? Value \_\_\_\_\_ (GoodWill, Salvation Army,Referral Center, etc) Yes No

Did you take early withdrawal or distributions from 401K and or Roll over a 401K — Need <b>1099-R</b>	Yes	No
Do you have Mortgage Interest? Will need to provide <b>1098-INT</b>	Yes	No
Do you have Real estate/Property Tax to deduct? Will need to provide documentation <b>OR</b> dollar amount \$ _____ If you live in <b>ILLINOIS</b> and pay property tax we will need your property ID #	Yes	No
Did you purchase any Residential Energy property? Will need proof of Energy Star Certification & Receipt. (Doors, windows, furnace, water heater, etc...)	Yes	No
Did you pay for daycare/child care expense? (Will need Name, SS/EIN, Address of provider & Amount) Need amount paid for each child	Yes	No
Were any of your dependents, you or your spouse in college in 2023?	Yes	No
Did you pay college tuition/expenses for yourself or dependent in 2023? Provide a 1098-T & Receipts	Yes	No
Have you taken American Opportunity or Lifetime Learning Education Credit on previous tax returns? (Need years taken-(per student)	Yes	No
Did you contribute/withdraw money from an educational IRA or 529 plan? Will need contribution letter/ <b>1098-Q</b>	Yes	No
Did you pay interest on college loans? Will need to provide a <b>1098-E</b> to report interest deduction	Yes	No
Did you have any debt cancelled/forgiven (credit card, etc.) or a mortgage principle reduction? Will need <b>1099-C</b>	Yes	No
IA residents —Vehicle License Registration: Will need payment amount & documents if available	Yes	No
Did you pay Registration fees/tuition for your dependents, grades K-12? Need amount paid for each student	Yes	No
Did you contribute money to HSA account (Health Savings Account)? Will need to provide <b>5498-SA and/or 1099-SA</b>	Yes	No
Did you operate any Rental Property during tax year?	Yes	No
Did you sell your primary home in 2023? How long did you live there? _____ Need a copy of the closing statement for sale of home and for <b>NEW</b> home you purchased.	Yes	No
Did you sell a second home or vacation home in 2023?	Yes	No
Have you moved to a different school district? - Need new school district(Iowa residents only)	Yes	No
Have you moved to a different state during 2023? —Need specific dates of residency	Yes	No
Are you a member/beneficiary of an S-Corp, Partnership, Estate, Trust, Etc? Include all <b>K-1</b>	Yes	No

Did you make any Estimated Quarterly payments for this tax year to Federal and/or State?	Yes	No
Dates _____		
Amounts paid _____		
Dates _____		
Amounts paid _____		
Do you require a Federal Identity PIN # to file your taxes? (A new <i>Pin Letter</i> required each year)	Yes	No
Are you a <b>Volunteer</b> Fire Fighter/EMS? ( <b>Letter Required</b> )	Yes	No
We will need Documentation if claiming dependents other than your own children.		
We will need Legal Documents if you are acting as Power of Attorney for someone.		
Do you want a <b>Paper</b> Copy or <b>Emailed</b> Copy of your Tax Return?	Paper	Email
Do you want to receive our monthly Email Tax Tip Newsletter?	Yes	No
Signature _____		
Date _____		

Would you like your refund Direct Deposited into your bank account? **Yes/No**

Bank Name \_\_\_\_\_

Routing Number \_\_\_\_\_

Account Number \_\_\_\_\_

**Checking or Savings**

This information is true and correct to the best of my/our knowledge. All items of income have been reported and all Items of expense are supported by receipt or other evidence

**Primary Tax Payer**

print: \_\_\_\_\_

signature: \_\_\_\_\_

**Spouse (joint Return)**

print: \_\_\_\_\_

signature: \_\_\_\_\_

# EASTERN IOWA TAX & ACCOUNTING, LLC

Goose Lake (563)577-2216 DeWitt (563)659-6247

If you would like to have the ability to call and receive a copy of your tax return after tax season, you will need to sign and enter the following information:

Tax Payer(s) Name: **PLEASE PRINT**

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1. Cell phone number for tax payer (payers)

(\_\_\_\_)\_\_\_\_\_ Tax Payer

(\_\_\_\_)\_\_\_\_\_ Spouse/Significant Other

2. Email addresses for tax payer (payers)

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3. Select a pass code (4 #'s)

\_\_\_\_\_ Tax Payer

\_\_\_\_\_ Spouse/Significant Other