

2023 Tax Questionnaire

Name: _____

Date: _____

Change of Address?: _____

New Client DOB: _____

Phone: _____ Cell: _____

Email: _____

Own or Rent (circle one)

If rent Rent: \$ ____ x ____ Mo Heat Included Y N

If own (provide copy of real estate taxes paid in 2023 Mortgage Interest Y N (1099-INT) Other Property _____

Direct Deposit: Bank Name: _____ Savings _____ Checking _____

Routing# _____ Acct# _____

Social Security (SSA-1099) Y N Unemployment (1099-G) Y N Real Estate Proceeds (1099-S) Y N

Retirement Income: (1099-R) Y N Interest Income (1099-INT) Y N Gambling Earnings (W2-G) Y N

Health Savings Account (HSA) Y N Distribution from HSA (1099-SA) Y N

Health Care Insurance (1095-B) Employer Y N Carry Own Insurance Y N (if yes, provide 1095-A Marketplace form)

Parents Carry Insurance Y N Medicare (SSA-1099) Y N Supplement to Medicare (Amt Pd: \$ _____)

Long Term Care Insurance (Nursing Home Insurance) Y N Amt Pd \$ _____

Energy Improvements on Main Residence? _____ Amt Pd _____

Donations: Cash Amount \$ _____ Other \$ _____ (receipts needed for your file)

College Y N (if yes provide form 1098-T and College Account Summary)

Yr In College _____ Book Expense _____ Student Loan Interest (1098-E) Y N

Out of State Purchases where sales tax wasn't paid Y Amt Pd _____ N

Sales/Exchanges of Stocks or Mutual Funds (1099-B) Y N

Driver's Licenses renewed in 2023 Y N (if yes, provide copy of Driver's License)

Dependents Y N (if yes provide names and SSN if different than last year)

Private School Tuition Y N School Name _____ (provide school form showing child's name, grade & tuition)

Dependant College Y N (if yes provide form 1098-T and Account Summary) Yr In College ____ Book Expense ____

WI Edvest 529 Plan Y N Child Care Expenses Y N (Amt Pd: \$ _____ & Childcare Provider Info)

Review Tax return upon pick-up Y N

