



Client Intake Form

Thank you for allowing us to serve your tax filing needs. We look forward to helping you achieve the best possible tax solution this season. Please fill out the following information to facilitate the tax filing process.

Client Name (Full Legal Name)

Client Organization/Company Name

Client Information

Home Phone

Cell Phone

Email Address

Address

City

State.

ZIP Code

Occupation/Business Type

DOB

Single / Married

Social Security Number/Tax ID Number

Yes / No

Marital Status (Circle One)

Yes / No

Dependents (Circle One) If Yes, How Many

Yes / No

Electronic Tax Filing (Circle One)

May IRS discuss tax return with us?

If Direct Deposit – Bank Routing Number

If Direct Deposit – Bank Account Number





If Married, Spouse Information

First Name

Middle Initial

Last Name

Occupation/Business Type

DOB

Social Security Number/Tax ID Number

Dependent Information

First Name

Middle Initial

Last Name

DOB

SS Number/Tax ID

Relationship

First Name

Middle Initial

Last Name

DOB

SS Number/Tax ID

Relationship

First Name

Middle Initial

Last Name

DOB

SS Number/Tax ID

Relationship





Please provide the following applicable tax documents to prepare your tax return

- Copy of last year's tax return if not performed by us
- W2
- IRS Notice 1444, Economic Impact Payment
- 1099-INT
- 1099-DIV (or 1099-Comp)
- 1099-MISC
- 1099-NEC
- 1099-G, Unemployment Compensation
- 1099-G, State Income Tax Refund
- 1099-Q, Payments from Qualified Education Programs
- 1099-R, Distributions from Retirement/Pension
- 1099-B, Proceeds from Broker and Barter Exchange
- 1099-S, Proceeds from Real Estate Transactions
- RRB-1099, Railroad Retirement Board
- SSA-1099, Social Security Benefits
- K-1 Partnership
- K-1 S-Corp
- K-1 Trusts
- W2G, Gambling Winnings
- Jury Duty Payments
- 1095-A, Health Insurance Marketplace Statement
- 1098, Mortgage Interest Statement
- 1098-T, Tuition Statement
- 1098-E, Student Loan Interest
- Form 5498, IRA Contributions
- Form 5498-SA, HSA Contributions
- Charitable Contributions
- 1040-ES, Estimated Tax Payments made
- Identity Protection Pin, issued by the IRS
- Any Other Income
- Any Other Expenses





Did your marital status change before 12/31/2020?	Y/N
Could you be claimed as a dependent on another person's tax return?	Y/N
Were there any changes in dependents?	Y/N
Did you have any child or dependency care expenses?	Y/N
If yes, Please include care provider's name, address, SSN, and amount	Y/N
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Did you work as a consultant, contractor, or own a business?	Y/N
Are you required to travel between job sites (either primary job or second job)?	Y/N
Did you buy or sell stocks, mutual funds, bonds, or other investment properties?	Y/N
Did you buy, sell, or refinance your home?	Y/N
Was your home rented out or used for business?	Y/N
Did you buy or sell rental property?	Y/N
Did you incur a loss because of damaged or stolen property?	Y/N
Did you donate money, clothes, cars, or stock?	Y/N
Did you pay interest on a student loan?	Y/N
Did you, your spouse, or a dependent incur any tuition expenses that are required to attend a college, university, or vocational school?	Y/N
Did you incur any tuition or continuing education expenses?	Y/N
Did you receive a distribution from or make a contribution to a retirement plan (401(k), IRA, etc.)?	Y/N
Did you transfer or rollover any amount from one retirement plan to another retirement plan?	Y/N
Did you convert part or all of your traditional, SEP, or SIMPLE IRA to a Roth IRA in 2020?	Y/N
Did you make or do you plan on making an IRA or Roth IRA contribution for 2020?	Y/N
Any HSA contributions, distributions, or unreimbursed qualified medical expenses?	Y/N
Did you incur any out of pocket medical and dental expenses?	Y/N
Did you drive long distances for medical care?	Y/N

