

ERVIN MANAGEMENT GROUP, LLC
BOOKKEEPING & TAX SERVICES 20_____
CLIENT INFORMATION FORM

Tax Payer Name: _____

Tax Payer Social Security #: _____ Occupation _____

Address: _____

Tax Payer DOB: _____

City: _____ State: _____ Zip: _____

Home #: _____ Cell #: _____

Work #: _____ Email: _____

Spouse Name: _____

Spouse Social Security #: _____

Occupation _____ Spouse DOB: _____

Please list all Dependents

Name	DOB/Relations	Social Security #:

Please check all that apply

_____ W-2/1099 INCOME	_____ Stock Sales	_____ Medical Expenses
_____ Self -Employed	_____ Purchase/Sale of Home	_____ Gambling Income
_____ Interest Income	_____ Current Home Owner	_____ Child Care Expenses
_____ Dividends Income	_____ Contributions	_____ Disability Income
_____ Rental Income	_____ Social Security Income	_____ Other Income
_____ Pension Income	_____ Early Retirement Distrib.	_____ Health Insurance
_____ Tuition (College)	_____ Student Loan Interest	_____ Unsure Tax Related



TAX PREP CHECKLIST

Personal Information:

- **A Social Security, or tax ID, number & date of birth for everyone included on your tax return _____**
- Please provide a copy of last year's tax return _____ if this is your first time filing with **Ervin Management Group**. Did you make estimated tax payments – please provide dates and amounts. Please provide direct deposit information – for both refund/ payments to IRS

Income and Investment Information

- Form W-2 Wage or W-2G forms(Gambling statement)
- Bank or financial institution statements –
 - 1) Did you make contributions to an IRA? Form 5498.
 - 2) Are you paying down student loan debt? 1098-E.
 - 3) Did you take out a home mortgage? Form 1098 (Mortgage Interest Statement)
- Last year's state refund amount
- Other miscellaneous income records – May include award money, gambling winnings, lottery pay-outs, etc.
- Any (and all) Form 1099s – Different types of 1099:
 - 1) 1099-MISC if you are self-employed and received \$400+ from a client
 - 2) 1099-DIV if you received dividends
 - 3) 1099-G if you received money or benefits from the government
 - 4) 1099-K if you made third-party transactions (through PayPal or Venmo, for example)
 - 5) 1099-INT if you received interest income
 - 6) 1099-R for distributions from a retirement plan, IRA, pension, annuity, etc.
 - 7) 1099-B sale of stock

Self-Employment and Business Records (when applicable)

- Business expense records _____
- Quarterly estimated tax payment receipts _____
- Mileage records _____
- Home office expenses -know how big your space is in square _____ feet

Medical Expense Receipts and Records

- Receipts for unreimbursed medical expenses – These could include exams, surgeries, and preventative care. It could also be braces, glasses, hearing aids, prescriptions – even transportation to and from treatment.
- Form 1095: Proof of health insurance coverage
 - 1) Marketplace, you'll receive - 1095-A. _____
 - 2) Insurance providers will send - 1095-B _____
 - 3) Employer that offer coverage - 1095-C. _____
- Social Security benefits – SSA-1099 _____

NAME: _____

SIGNATURE: _____

SPOUSE NAME: _____

SPOUSE SIGNATURE: _____

DATE: _____

TAX PREP CHECKLIST

Charitable Donations & Homeowners

- Charitable donation receipts _____
- Property tax receipts – If you itemize, you may be able to write off a portion of the property taxes you paid. _____
- Did you sale a home – **primary or investment property** – please send HUD statements for both purchase and sale

If you are in-doubt about whether an item is tax deductible or not please don't hesitate to call or email me to ask. **ADDITIONAL TO YOUR REQUEST HOW ABOUT EARNING \$25.00 FOR REFERRALS** (each person must complete service with Ms. Dee and fee paid in full to qualified). Thank YOU IN ADVANCE FOR doing business with **ERVIN MANAGEMENT GROUP, LLC.**
WWW.ERVINMANAGEMENTGROUP.COM

Name: _____
Email: _____
Cell: _____

LIST 3-REFERRALS BELOW

1: Name _____
Email _____
2: Name _____
Email _____
3: Name _____
Email _____
Bonus _____
Name & Email: _____

