

LEAD Tax & Accounting Services LLC

Client Tax Information Checklist

Please complete the checklist and gather all applicable tax documents.

PERSONAL INFORMATION (New Client Only)

Name		Social Security No.	Date of Birth	Cell Phone	E-mail
Taxpayer:					
Spouse:					
Street Address		City	State	Zip	County

Dependent Name	Relationship	Date of Birth	SSN or ITIN	Full Time Student	Disabled
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

REQUIRED INFORMATION (All clients)

1. Copy of your **Driver's License** or state identification. (Provide a copy front and back for each taxpayer)
2. **Bank Account**– Would you like direct deposit? No Yes - Provide a voided check
If you have tax due, would you like direct payment from your account? No Yes - Provide a voided check
3. Provide a copy of the last Two Years Tax Returns (**new clients only**)
4. **Marital Status** - Single Married Widow (Date _____) Divorced (Date _____) Same Sex Marriage
5. Did the IRS or State send you any notifications or do you have an Identity Protection PIN? No Yes (Attach documents)
6. Did you receive, sell, send, exchange, or acquire any financial interest in **virtual currency**? No Yes (If yes, provide details)
7. Do you have a **Foreign Bank Account** with a balance over \$10,000 any time during the year? No Yes (Provide Details)
8. Did you receive **Health Savings Account (HSA) Distributions**? No Yes (If YES, Attach 1099SA)
9. List amount contributed to a Health Savings Account (HSA) that is NOT through your employer? \$ _____
10. Are you or your spouse blind? Taxpayer Yes Spouse Yes
11. Did you or your family member enroll in the healthcare market place in 2023? Yes__ No__ If yes please provide form 1095A received

New Client Tax Information Checklist

INCOME INFORMATION (Please attach all applicable forms)

- | | |
|--|--|
| <input type="checkbox"/> Income Statements (Form W-2) | <input type="checkbox"/> Foreclosure or Abandonment of Residence (Form 1099-A) |
| <input type="checkbox"/> Interest (Form 1099-Int or 1099-OID) | <input type="checkbox"/> Sale of Real Estate (Provide closing statements) |
| <input type="checkbox"/> Dividends (Form 1099-Div) | <input type="checkbox"/> Received Installment Payments for Property Sold |
| <input type="checkbox"/> Stock or Mutual Fund Sales (Form 1099-B) | <input type="checkbox"/> Disability Income (Provide Documents) |
| <input type="checkbox"/> Unemployment Compensation (Form 1099-G) | <input type="checkbox"/> Income in a Foreign Country (Provide Documents) |
| <input type="checkbox"/> 401k or IRA Distributions/Rollovers (Form 1099-R) | <input type="checkbox"/> Gambling (Form W-2G) |
| <input type="checkbox"/> Social Security (Form 1099-SSA) | <input type="checkbox"/> Trust or Estate Beneficiary (Form 1041 K-1) |
| <input type="checkbox"/> Education Distributions (Form 1099-Q) | <input type="checkbox"/> Cancellation of debt (Form 1099-C) |
| | <input type="checkbox"/> Alimony Received \$ _____ Date of agreement _____ |

Are you a **Shareholder, Partner or Member of an S-Corp, LLC or Partnership?**

- Shareholder (Include Form 1120-S K-1)
- Partner (Include Form 1065 K-1)
- Beneficiary (Include Form 1041 K-1)

Did you receive **other income** during the year?

- Business Income (Please refer to Schedule C Worksheet* or Provide details)
- Rental Income (Please refer to Schedule E Worksheet* or Provide details)

Tax Credits Checklist

- ___ Adoption Expense Information
- ___ Child Care Provider Address, I.D. Number and Amounts Paid
- ___ College tuition and related education expenses (1098-T)
- ___ Electric vehicle purchased in 2023
- ___ Home Solar panel installed in 2023
- ___ Energy efficient replacement done to primary resident(HVAC,water heater, heat pump, windows,doors, water heater etc)

Expense and Tax Deduction Checklist

- ___ Charitable Cash Contributions
- ___ Fair Market Value of Non-cash Contributions to Charities
- ___ Home Mortgage Interest from Form 1098
- ___ Home Second Mortgage Interest Paid
- ___ Investment Expenses.
- ___ IRA Contributions
- ___ Medical Expenses for the Family
- ___ Miles Traveled for Volunteer Purposes
- ___ Miles Traveled for Medical Purposes
- ___ Student interest paid (1098-E)
- ___ Real Estate Taxes Paid
- ___ State Taxes Paid with Last Year's Return (if itemized)