



## 2023 Client Data Sheet

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Taxpayer Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
Birthdate: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_  
Taxpayers Phone #: \_\_\_\_\_ Marital Status: Single \_\_\_ Married \_\_\_ Separated \_\_\_ Widowed \_\_\_  
Spouses Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ SS#: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Spouses Phone #: \_\_\_\_\_ Spouses E-Mail Address: \_\_\_\_\_  
Taxpayers Driver's License #: \_\_\_\_\_ Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Spouses Driver's License #: \_\_\_\_\_ Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Preferred Contact Method: Phone Call \_\_\_ Text Message \_\_\_ Email \_\_\_

Did you have any dependents in 2023? Yes \_\_\_ No \_\_\_ Did any of your dependents have earnings? Yes \_\_\_ No \_\_\_

Dependent Name:	Birthdate:	SS#:	Relation:	Did the dependent live with you? Are you the custodial parent?	How much did the dependent earn in 2023?

Is anyone else (e.g. your parents) claiming you or your spouse on his or her tax return? Yes \_\_\_ No \_\_\_

Do you have self-employment / business income or a rental property? Yes \_\_\_ No \_\_\_

Do you have "workers" that you paid more than \$600 to and should generate a 1099 or W2? Yes \_\_\_ No \_\_\_ Did you? Yes \_\_\_ No \_\_\_

What State(s) did you work in 2023? \_\_\_\_\_ What State(s) did you live in 2023? \_\_\_\_\_

Did you pay any estimated taxes? Yes \_\_\_ No \_\_\_ How much? Federal: \_\_\_\_\_ State: \_\_\_\_\_ Local: \_\_\_\_\_

Did you make any charitable contributions this year? Yes \_\_\_ No \_\_\_ If so, please provide cash total and non-cash value: \_\_\_\_\_

In 2023, did you (A) receive (as a reward, award, or payment for property or services); or (B) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? Yes \_\_\_ No \_\_\_ If Yes, A \_\_\_ B \_\_\_ What was the total amount? \_\_\_\_\_

Do you have a Health Savings Account (HSA)? Yes \_\_\_ No \_\_\_ If so, what was your total distribution? \_\_\_\_\_

Did you have health care coverage with a government Marketplace (Exchange) during 2023? Yes \_\_\_ No \_\_\_ Please provide Form 1095-A.

Did you pay Long Term Care Premiums for you or your spouse? Yes \_\_\_ No \_\_\_

Did you or your dependents go to college or take continuing education classes this year? Yes \_\_\_ No \_\_\_ Please provide 1098-T.

Do you have a State 529 Plan for education? Yes \_\_\_ No \_\_\_ Please provide this statement.

Do you have Day Care expenses for your dependent? Yes \_\_\_ No \_\_\_ Total paid? \_\_\_\_\_

Did you contribute to any retirement plan? Yes \_\_\_ No \_\_\_ If so, how much did you contribute? \_\_\_\_\_

Did you take any retirement distributions? Yes \_\_\_ No \_\_\_ If so, how much did you take in distributions? \_\_\_\_\_

Credit Card information to charge your tax return preparation fee once return is complete:

Credit Card #: \_\_\_\_\_ Expiration Date: \_\_\_/\_\_\_ CSC / CVV: \_\_\_\_\_

By initializing you are confirming that you understand your payment must be made before the return will be filled.

In addition, the email the taxpayer provided is correct to sync to the Client Portal.

Initial Here: \_\_\_\_\_