

# NEW CLIENT INFORMATION

NAME: \_\_\_\_\_

SSN: \_\_\_\_\_

SPOUSE NAME: \_\_\_\_\_

SSN: \_\_\_\_\_

ADDRESS:

DOB: \_\_\_\_\_

\_\_\_\_\_

DOB: \_\_\_\_\_ (SPOUSE)

\_\_\_\_\_

\_\_\_\_\_

PHONE #: \_\_\_\_\_ (HOME)

\_\_\_\_\_ (CELL)

EMAIL: \_\_\_\_\_

\_\_\_\_\_ (WORK)

OCCUPATION: \_\_\_\_\_ (SELF)

\_\_\_\_\_ (SPOUSE)

DEPENDENTS:

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

DOB: \_\_\_\_\_

DOB: \_\_\_\_\_

SSN: \_\_\_\_\_

SSN: \_\_\_\_\_

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

DOB: \_\_\_\_\_

DOB: \_\_\_\_\_

SSN: \_\_\_\_\_

SSN: \_\_\_\_\_

**DID YOU MAKE A CONTRIBUTION TO AN IRA?**

**ROTH: \_\_\_\_\_ TRADITIONAL: \_\_\_\_\_**

**DID YOU SELL A HOME? \_\_\_\_\_**

**IF YES, WE WILL NEED CLOSING STATEMENT IF IT'S RENTAL  
PROPERTY OR IF YOU ITEMIZE DEDUCTIONS**

**DID YOU PURCHASE A HOME? \_\_\_\_\_**

**(ONLY IF IT'S A RENTAL) NEED CLOSING STATEMENT**

**CAN YOU BE CLAIMED AS A DEPENDENT ON ANOTHER TAX  
RETURN?**

**YES: \_\_\_\_\_ NO: \_\_\_\_\_**

**DID YOU RECEIVE SOCIAL SECURITY? \_\_\_\_\_**

**(IF YES, PLEASE PROVIDE 1099 FROM SOCIAL SECURITY)**

WE NEED THE FOLLOWING TO COMPLETE YOUR TAX RETURN

- DATES OF BIRTH & OCCUPATIONS OF ALL ON RETURN
- W2'S
- 1099'S
- INTERST INCOME/DIVIDEND INCOME
- SALES OF STOCK PROCEEDS (MUST HAVE COST BASIS: DATE BOUGHT & AMOUNT PAID)
- LOSS CARRY FORWARDS FROM PRIOR YEAR
- SELF EMPLOYED INCOME
- ALIMONY RECEIVED
- ALIMONY PAID
- IRA DISTRIBUTIONS & PENSION DISTRIBUTIONS
  - IS YOUR IRA A PENSION ROLLOVER?
  - IS YOUR IRA OR PENSION FROM A DECEASED SPOUSE?
- RENTAL INCOME
- RENTAL EXPENSES
- UNEMPLOYMENT INCOME
- GAMBLING INCOME & LOSSES
- ANY OTHER 1099 OR ADDITIONAL INCOME
- STUDENT LOAN INTEREST PAID
- HEALTH INSURANCE COST (NOT PRE-TAX)
- HAS CONTRIBUTIONS - AFTER TAX
- MEDICAL, DENTAL, EYECARE, RX OUT OF POCKET
- TUITION, BOOKS, FEES PAID - 1<sup>ST</sup> 4 YEARS
- REAL ESTATE TAXES PAID
- MORTGAGE INTEREST
- STATE OR LOCAL TAX PAID PRIOR YEAR
- CHARITY DONATIONS - CASH & CHECK - GOODS
- OHIO POLITICAL CONTRIBUTIONS
- TUITION SAVINGS CONTRIBUTIONS - 529C PLANS
- CHILDCARE AMOUNT & PROVIDER INFORMATION
- ESTIMATED TAXES PAID FOR CURRENT YEAR