



Intake Form

The taxpayer/ taxpayers are responsible for the information on there return. Please provide complete and accurate information. Tax Year: 2019 ___ 2020 ___ 2021 ___

Taxpayer Name _____ Spouse Name _____

Occupation _____ Occupation _____

SSN _____ DOB _____ SSN _____ DOB _____

Phone _____ Phone _____

Cell Phone Provider _____ Cell Phone Provider _____

Address _____

Filing Status: ___ Single ___ Married ___ MFJ ___ MFS ___ Widow(er) Date of Death _____ HOH ___

Do any household members have an IP PIN? ___ Yes ___ No

Can Taxpayer/Spouse be claimed as a dependent on someone else tax return? ___ Yes ___ No

Is the Taxpayer/Spouse ___ Blind ___ Disabled

Do Taxpayer/Spouse want \$3 to go to the Presidential Election Campaign Fund? ___ Yes ___ No

Table with 8 columns: Dependents Name, DOB, SSN, Relationship, Months Lived in Your Home, Are Dep. Blind or Disabled, Student, US Citizen. Contains 7 empty rows.

Taxpayer Signature: _____ Date _____

Spouse Signature: _____ Date _____

*All Clients must Provide Picture Identification, Social Security Cards, ITIN Letter, W-2, 1099,1098 & any letters/notices received for IRS.

Income

- Wages or Salary? (Form W-2) ___ Yes ___ No If yes, how many jobs did you have in 2020? _____
Tip Income? ___ Yes ___ No
Scholarships? ___ Yes ___ No (Forms W-2, 1098-T)
Interest/Dividends from: Checking/savings accounts, bonds, CDs, brokerage? (Forms 1099-INT, 1099-DIV) ___ Yes ___ No
Refund of state/local income taxes (Form 1099-G) ___ Yes ___ No
Alimony Income? ___ Yes ___ No
Self-Employment Income (Form 1099-MISC, 1099-NEC) ___ Yes ___ No If so, you must complete profit & loss form.
Cash/check payments for any work performed not reported on Forms W-2 or 1099? ___ Yes ___ No



- Income (or loss) from the sale of Stocks, Bonds or Real Estate (including your home)? (Forms 1099-S, 1099-B, K-1) ___ Yes ___ No
- Disability Income (such as payments from insurance, or workers compensation)? (Forms 1099-R, W-2) ___ Yes ___ No
- Payments from Pensions, Annuities, and/or IRA? (Form 1099-R) ___ Yes ___ No
- Unemployment Compensation? (Form 1099-G) ___ Yes ___ No
- Social Security or Railroad Retirement Benefits? (Forms SSA-1099, RRB-1099) ___ Yes ___ No
- Income (or loss) from Rental Property? ___ Yes ___ No
- Income from S-Corporation, LLC, or Partnership (Form K-1) ___ Yes ___ No
Specify _____
- Other Income (gambling, lottery, prizes, awards, jury duty, etc.)? (Forms W-2G, 1099-MISC) ___ Yes ___ No
Specify _____

Expenses

- Alimony: ___ Yes ___ No If yes, do you have the recipient's SSN? ___ Yes ___ No
- Contributions to a retirement account? ___ IRA ___ Roth IRA ___ 401K ___ Other
- Educational expenses for yourself, spouse or dependents, such as tuitions, books, fees, etc. (Form 1098-T) ___ Yes ___ No
- Unreimbursed employee business expenses (such as uniforms or mileage)? ___ Yes ___ No
- Medical expenses (including health insurance premiums)? ___ Yes ___ No
- Home mortgage interest? ___ Yes ___ No (Form 1098)
- Real estate taxes for your home or personal property taxes for your vehicle? (Form 1098) ___ Yes ___ No
- Charitable contributions? ___ Yes ___ No
- Child or dependent care expenses such as day-care? ___ Yes ___ No
- Supplies used by an eligible educator such as a teacher, teacher's aide, counselor, etc. ___ Yes ___ No
- Expenses related to self-employment income or any other income you received? ___ Yes ___ No
- Student loan Interest? (Form 1098-E) ___ Yes ___ No **Life Events**
- Have a Health Savings Accounts? (Forms 5498-SA, 1099-SA, W-2 with code W in Box 12) ___ Yes ___ No
- Have credit card or mortgage debt cancelled/forgiven by a lender or a home foreclosure? (Forms 1099-C, 1099-A) ___ Yes ___ No
- Adopt a child? ___ Yes ___ No
- Buy, sell or have a foreclosure of your home? (Form 1099-A) ___ Yes ___ No
- Have EIC, CTC or American Opportunity Credit disallowed in a prior year? ___ Yes ___ No If yes, which tax year?

- Purchase and install energy-efficient home items? (such as windows, furnace, insulations, etc.) ___ Yes ___ No
- Live in an area that was affected by a natural disaster? ___ Yes ___ No If yes, where?

- Receive the First Time Homebuyers Credit in 2008? ___ Yes ___ No
- Make estimated tax payments or apply last year's refund to this year's tax? ___ Yes ___ No If so, how much?

- File a return last year containing a "capital loss carryover" on Form 1040 Schedule D? ___ Yes ___ No
- Receive an Economic Impact Payment (stimulus) in 2020/2021? ___ Yes ___ No

Health Care Coverage

- Have Health Care coverage? ___ Yes ___ No
- Receive one or more of these forms? ___ 1095-B ___ 1095-C
- Have coverage through the Marketplace (Exchange)? ___ Yes ___ No (Provide Form 1095-A)
- Is everyone listed on your Form 1095-A being claimed on this tax return? ___ Yes ___ No
- Has an exemption been granted by the Marketplace? ___ Yes ___ No