



Wildhorse Tax Service, LLC

Voice: (913) 904 – 0447

Fax: (913) 815 – 1257

Email: info@wildhorsetaxservice.com

Personal Info

- Government issued ID (Driver's lic., Passport, etc)
- Prior year's tax return (New Clients Only)
- Birth date & SSN for everyone on return
- Amount of alimony paid & SSN of ex-spouse
- Daycare provider's Tax ID #, address & amount pd.
- Form 8332 if you are claiming a child, but you are not the custodial parent.

Income

- W-2 forms
- Unemployment or State refund received (1099-G)
- Gambling Income and expenses (W-2G)
- Alimony received
- Jury Duty income
- Hobby Income & Expenses
- Prizes and awards
- Other Income

Savings & Investments

- Interest or Dividend income (1099-INT, 1099-OID, 1099-DIV)
- Income from sale of stock or other property (1099-B or 1099-S)
- Dates of acquisition & cost basis of property sold

Retirement & Health Ins. Information

- Pension / IRA / Annuity (1099-R)
- Social Security or Railroad Retirement (1099-SSA, RRB-1099)
- Amount contributed to IRA
- Amount withdrawn or transferred (1099-R)
- Health Savings Acct. withdraws or contributions (1099-SA)
- Form 1095-A if you were enrolled in a Marketplace Health Insurance plan

Education

- Tuition paid (1098-T)
- Student Loan interest paid (1098-E)
- Amount paid for books or computer
- Amount contributed to or withdrawn from College Savings Acct. (1099-Q)

Rental Income

- Asset information including purchase & sale information or depreciation schedule
- Completed Rental Income & Expense worksheet from our website

Self Employment, Trust or Business Info

- K-1
- Form 1099-MISC & 1099-NEC
- Completed Business Income & Expense worksheet from our website
- Depreciation schedule
- Automobile business mileage and tolls paid

Deductions or Credits

- Personal Property tax paid
- Mortgage Interest paid (Form 1098)
- Real Estate tax paid
- Prior years State & Local income taxes paid
- HUD closing statement if you purchased/sold real estate or refinanced a mortgage
- List of Charitable monetary donations
- Records of non-cash Charitable donations
- Miles driven for charity or medical purposes
- Medical expenses (if greater than 7.5% of your income)
- K-12 Teacher expenses - up to \$250
- Adoption expenses
- Electric vehicle (credit form from dealer)
- Energy credits (purchase receipts for solar panels, windows, doors, HVAC, etc.)
- National Guard mileage
- Military moving expenses
- MO residents – Military active duty pay (LES & orders)



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Taxpayer Name: _____ SSN: _____

Occupation: _____ Birth Date: _____

Spouse Name: _____ SSN: _____

Occupation: _____ Birth Date: _____

Address: _____ (street, city, state, zip)

Marital Status: _____ Phone (cell): _____

Email Address: _____ Phone (day): _____

Dependents Name: (first and last name)	Date of Birth (mm/dd/yy)	Dependent's Soc. Sec. Number	# of months they lived in your home last year or at college	Relationship

Did you incur Child Care Expenses? Yes / No (circle one)

Provider's Tax ID #: _____ Amount Paid to Provider: _____

Provider's Name & Address: _____

Do you have a child that was born this year? If so, would you like to establish a Trump account for this child so that the child may receive \$1000 from the U.S. Treasury? **Yes / No**

Has the IRS ever issued you a special **Identity PIN**? If so, what is it? _____

Did you receive, sell, send, exchange or otherwise acquire interest in any virtual currency? **Yes / No**

Alimony Paid: _____ Recipient's SSN: _____ Date Divorced: _____

Did any of your income include Overtime Pay or Tips? If so, provide us with your last paystub.

Teaching expenses (includes K-12 teachers, instructors, counselors, principals or aides): \$ _____

Name of the school where you taught: _____



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Student Loan Interest Paid: \$ _____

Did you contribute to a 529 college savings plan? If so, Amount: \$ _____

We need Form 1099-Q if you withdrew money from a 529 college savings plan or Educational Savings acct.

We need Form 1098-T from the university if anyone in your household incurred college expenses.

Amount of Sales tax paid if you purchased a new vehicle or other large item. \$ _____

Did you purchase an electric vehicle? **Yes / No** We will need the sales receipt including the VIN.

Personal Property Taxes Paid(ie car,boat): _____ Real Estate Tax Paid: _____

Charitable Donations: Cash or check \$ _____ Non-Cash Value \$ _____

Were any charitable donations made directly from your IRA (via Qualified Charity Distribution)? **Yes / No**

Did you buy or sell your primary residence this year? If so, we need the following:

Original price paid for the house you sold: _____ Date it was originally purchased: _____

Amount spent on major improvements during ownership: _____ We also need the Closing statement.

Did you sell any other real estate? If so, we need the details and closing statement.

Did you refinance or obtain a new mortgage? If so, please send us the closing statement.

Amount paid if you installed a new air conditioner: _____

Amount paid if you installed a new furnace: _____

Amount paid if you installed a new water heater: _____

Amount paid if you installed new energy efficient exterior doors or windows: _____

Amount paid if you installed a new heat pump: _____

Amount you installed new insulation or a new electrical sub-panel: _____

Amount paid if you installed a geothermal unit or solar: _____

Did you contribute to a Missouri or Kansas First Time Home Buyer Savings acct? If so, how much? _____

Did you have health insurance via www.healthcare.gov? If so, we MUST have your Form 1095-A.

Amount paid for Health Ins. Prem. outside of your work plan. (medicare supp., etc.): \$ _____

Amount paid for Long Term Care Insurance premiums. \$ _____

Amount of IRA Contributions (separate from work plan): _____ Type of IRA: _____

Amount of Spouse IRA Contribution: _____ Type of IRA: _____

Are you interested in making an additional IRA contribution before tax day? **Yes / No**

Did you make any Roth IRA conversions? **Yes / No**

Did you withdraw money from a retirement plan or move your account from one brokerage to another? **Yes / No**

Did you max out your **HSA** contribution? If not, are you interested in making an **additional contribution** to reduce your tax liability?



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Did you withdraw money from a Health Savings Acct. (HSA) or use it to pay medical expenses? If so, we need your Form 1099-SA.

Did you contribute to an ABLE acct (Achieving a Better Life Experience) for qualified disability expenses?

Have you had any tax credits disallowed by the IRS such as Earned income credit, Child tax credit or College tax credits? **Yes / No**

Did you physically work or live within the City of KCMO during the year? **Yes / No**

Were KCMO city taxes withheld from your paycheck while you worked remotely outside of the city of KCMO?

Yes / No

Would you like to receive the finished copy of your return via email or as a paper copy? **E-Mail / Paper**

Would you like us to connect you with a financial advisor? **Yes / No**

Did you make estimated tax payments to the Fed or any state? If so, enter the dates and amounts below.

Federal

Payment #	Amount due	Date paid	Amount paid (not including credit card fee)	Overpayment Credit 2024 applied
1				
2				
3				
4				

State(s)

Payment #	Amount due	Date paid	Amount paid (not including credit card fee)	Overpayment Credit 2024 applied
1				
2				
3				
4				