

Drop-Off



CLIENT STATUS

New

Returning **What year did you file with us?**

Date of drop-off:

① Primary Taxpayer

Full Name

Social Security # / ITIN

Date of Birth

Street Address

City

State

ZIP

Email

Follow-up method

Secure Messenger Phone

Phone #

Occupation(s)

Marital Status? Single Married Widowed

Are you active in the military? Yes No

Is anyone claiming you as a dependent? Yes No

Would you like to designate *3 to the Presidential Election Campaign Fund? Yes No

② Your Spouse

Full Name

Social Security # / ITIN

Date of Birth

Street Address

City

State

ZIP

Email

Follow-up method

Secure Messenger Phone

Phone #

Occupation(s)

Are you active in the military? Yes No

Is anyone claiming you as a dependent? Yes No

Would you like to designate *3 to the Presidential Election Campaign Fund? Yes No

③ Dependents

If any dependents listed did not live at the primary taxpayer's address the entire year, please discuss this with your tax professional.

Name	Relationship	DOB	SSN / ITIN	Full-Time Student?	Disabled?
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

KEEP GOING



4 Any Changes:

Tell us about your year, so we can find as many credits and deductions as we can. (ex.: bought property, had a child, installed energy efficient windows, etc.)

5 Your Tax Situation

Please select all that apply to you or your spouse:

Income Sources

- Employer (W-2)
- Unemployment
- Social Security (SSA-1099)
- Retirement plan distribution
- Interest (1099-Int)
- Dividends (1099-Div)
- Stock or mutual fund sale (1099-B)
- Self-employment / miscellaneous income
- Expenses from self-employment
- Rental property

Itemizations

- Donated cash or goods to a charity
- Made a major taxable purchase
- Had a mortgage payment (1098)
- Paid property taxes
- Large out-of-pocket medical expenses

Household / Dependents

- Change in family or marital status
- Adopted a child
- Paid child / dependent care expenses
- Tuition (1098-T) and education expenses
- Paid student loan interest
- Enrolled in a health insurance plan through the federal or state marketplace (1095-A)
- HSA contribution

Miscellaneous

- Sold a home
- Paid / received alimony
- Lived in a federally declared disaster area
- Had gambling winning / losses
- Made an IRA contribution

When would you like your return completed by?

Allow for at least seven (7) business days.

Additional Note(s):