

Please answer the following questions and turn into our office with all your tax documents. We will not be able to begin your taxes until we have this information. You may drop off, mail, fax, or upload it electronically. Thank you!

Taxpayer's Name: _____ D.O.B. _____ Occupation: _____

Spouse's Name: _____ D.O.B. _____ Occupation: _____

Address: _____ City: _____ St: _____ Zip: _____

County / Township: _____ Phone #: _____ Email: _____

Filing Status: Single Head of Household Married Joint Married Separate Dependent of another _____

What is your preferred way of communication: Call Text E-Mail

Are you a Disabled Veteran? Yes No If yes, what percentage? _____%

Do you have insurance through the Market Place? Yes No - If yes, must provide Form 1095-A, even if on parent's policy.

Did you live or work in multiple states? _____ If so, please use the back note page and list which states, what dates were you there, and indicate if you were living, working or both. _____

Do you Rent? Give your information below. If rent amounts changed throughout the year or you moved to a new rental address, list each change. Use the back Note Page if you need additional room.

Monthly Cost	# Of months:	Landlord's Name:	Landlord's Address:
\$			
\$			
Subsidized or retirement facility? <input type="checkbox"/> Yes <input type="checkbox"/> No Facility Name: _____		Was Heat or Utilities included? <input type="checkbox"/> Yes <input type="checkbox"/> No Meals or Medical included? <input type="checkbox"/> Yes <input type="checkbox"/> No Amount of Medical: \$ _____	
Retirement / Assisted Living Facility – Property Tax Percentage: _____			Do you live in a mobile home Park? <input type="checkbox"/> Yes <input type="checkbox"/> No

Own your Home or Land Contract:

Do you have a Land Contract? Yes No Year-to-Date Interest Paid: \$ _____ to who? _____

Do you receive any payments as a Land Contract holder? Income? \$ _____ Interest \$ _____ From Who and address: _____

Do you own your home? (Provide mortgage interest form 1098 & Property Tax Statements) Yes No ADDITIONAL \$3 LOOK UP FEE WILL BE APPLIED FOR EACH PROPERTY WE HAVE TO LOOK UP ONLINE.

At any time during 2021 did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? Yes No (if yes please provide documentation / details)

Who is your heat provider? _____ Is the account in your name? Yes No

Do you need a Fasfa worksheet, for student loan applications? Yes No Who is the student? _____

REFUND OPTIONS

Check in Mail Mailing Address _____

Direct Deposit Checking Savings Bank Name: _____

Routing Number: _____ Account Number: _____

If you owe the State or Federal or pay quarterly estimates, are you interested in paying electronically or setting up automatic debits? Yes No

DEPENDENT INFORMATION

Proof of Residency required via a document stating the dependents name and your address for the tax year or a Form 8332.

Complete This section if you have dependents

List each dependent's name, DOB, gender, Social Security Number, and relationship to taxpayer:

1. _____
2. _____
3. _____
4. _____
5. _____

6. Did you have any out-of-pocket childcare expenses? Yes No If yes, provide Name, EIN/SS # and address:

Total Amount Paid for Daycare: \$ _____

Please answer the following questions reflecting on the entire year of 2021:

- How many months out of the year did the child(ren) live with you? _____
- Can anyone else claim the child? Yes No If yes, Who? _____
 - If yes, do you have Form 8332 giving you permission to claim the dependent? Not needed if you can provide proof of residency and have met the IRS requirements.
- Are you and your dependents considered U.S. Citizens, National, or resident and reside in the U.S. for more than 6 months out of the year? Yes No _____
- What school does your child(ren) attend? _____
- Are any of your dependents disabled? Yes No Who? _____
- If you are self-employed, how many years have you been in business? _____
 - Was there any time in 2021 that you were unable to work due to Covid? How many days were you unable to work? _____ How many days due to your child's school switching to virtual instruction? _____ Do you travel for your business? Yes No how often? _____
- If you are not the parent of the dependent, are either of the parents in the home? Yes No
- Did you receive any state assistance? Food Assist. Cash Assist. Housing Medical childcare other
- Did any of your dependents receive SSID? Disability or Survivor Benefits? IF yes, how much did you receive for the year? \$ _____ (not taxable but must be reported the State for household income).
- Can you provide documentation to prove your eligibility to claim the dependent? Yes No
- Marital status Never married Spouse Deceased Divorced or separated Married but live apart from spouse during the last 6 months of the year Separation Agreement Divorce Decree

Did you create an IRS account and opt out of the child tax credit advance? Yes No

Please provide the IRS Letter 6419 that you should have received in January of 2022. If you cannot provide the letter, you will need to create an account on the IRS website and provide proof of what was received. IF you are married, both individuals will have to do this. 😞

