



Client Data Form

1. Personal Information

Taxpayer					SSN			
Date of Birth	Occupation		Phone		Cell			
Email address					Referral Source			

Spouse					SSN			
Date of Birth	Occupation		Phone		Cell			
Email Address					Referral Source			

Street address	City	State	Zip		
ID Provided	Taxpayer			Spouse	

	Taxpayer				Spouse				Filing Status		Will file jointly?			
Blind	Yes		No		Yes		No		Married		Yes		No	
Disabled	Yes		No		Yes		No		Single		Yes		No	

										Head of Household		Yes		No	
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2. Dependents (Children and Others)

First Name	Last Name	Relationship	Date of Birth	Social Security	Months in home	Disabled	Full time student

Check All That Apply	YES	NO	Check All That Apply	YES	NO
Are you employed?			Did you pay Student Loan Interest?		
Are you self employed?			Lottery or Gambling Winnings?		
Do you own Rental Property?			Cancellation of Debt?		
Did you earn interest income? Dividends?			Mortgage Interest?		
Did you sell stocks			Real Estate Taxes?		
Did you receive Social Security?			Charitable Contributions?		
Did you receive a pension?			Other Property Taxes?		
Did you withdraw money from an IRA?			Medical Expenses out of pocket, including insurance?		
Did you sell your main home?			Give a gift of more than \$16,000?		
Did you pay for child day care?			Pay or Receive Alimony? (divorced prior to 12/31/2018)		
Did you have education expenses?			Do you have a Foreign Bank Account?		
Health Insurance from The Marketplace (ACA)?			EIP 1	Economic Impact Payment 1 Notice 1444	
Did you itemize last year AND receive a state refund?			EIP 2	Economic Impact Payment 2 Notice 1444	

States to File and Dates of Residency in EACH State

State		Dates	
State		Dates	

State		Dates	
State		Dates	

Check All That Apply		
	YES	NO
Someone else can claim you as a dependent		
Sold a Business Asset or Land		
You Paid a Child Care Provider for Daycare		
Provider's Name		
Provider's Address		
Provider's EIN		
Amount Paid to Provider		

You Paid Estimated Taxes Last Year			
DATE	AMOUNT	STATE	FED

Would You Like Your Refund Direct Deposited?	YES		NO		Checking		Savings	
Routing Number				Account Number				

Tax Return Preparation

- We will prepare your federal and state tax returns based on information you provide. Services for preparation of your return do not include auditing or verification of information provided by you.
- This engagement does not include any audit or examination of your books or records. In the event your return is audited, you will be responsible for verifying the items reported.
- The tax return preparation fee does not include bookkeeping.
- Fees charged for tax return preparation do not include audit representation or preparing materials to respond to correspondence from taxing authorities.
- Preparation fees do cover limited assistance and consultation during the year. Please store your supporting documents and copies of your tax returns in a secure place for at least seven years. You may be assessed a fee if you request a copy in the future.

Taxpayer Responsibilities

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
 - You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review your documentation.
 - You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
 - You must review the return carefully before signing to make sure the information is correct.
 - Fees must be paid before your tax return is delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer is required for preparation of late returns.
- Signatures. By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities and that you understand our responsibilities in preparing your tax returns as explained above. For a joint return, both taxpayers must sign.

Privacy Policy. The nature of our work requires us to collect certain nonpublic personal information about you from various sources. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to any third party without your express permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access. Please contact us with any questions regarding our privacy policy.

Taxpayer's Signature _____ **Date** _____

Spouse's Signature _____ **Date** _____