

New Client Information Sheet

Taxpayer name:

Last: _____ First: _____ MI: _____
 Address: _____ City: _____ Zip: _____
 SS#: _____ - _____ - _____ Date of Birth: ____/____/____ Married
 What is your occupation: _____ Single

Spouse name:

Last: _____ First: _____ MI: _____
 SS#: _____ - _____ - _____ Date of Birth: ____/____/____

Dependents:

	First	MI	Last	Child relationship to taxpayer	Date of birth	Social Security #
1)	_____	_____	_____	_____	____/____/____	____-____-____
2)	_____	_____	_____	_____	____/____/____	____-____-____
3)	_____	_____	_____	_____	____/____/____	____-____-____
4)	_____	_____	_____	_____	____/____/____	____-____-____
5)	_____	_____	_____	_____	____/____/____	____-____-____
6)	_____	_____	_____	_____	____/____/____	____-____-____

Please tell me about last years tax return:

How did you file last year? Single ___ MFJ ___ MFS ___ HOH ___ Widow ___
 Are you self-employed? no yes Did you get married or change your name last year? ___yes ___no
 Do you have rental property? no yes Did you pay for child or dependent care last year? ___yes ___no
 Are you a homeowner? no yes Did you go to school last year? ___yes ___no
 Did you have a new baby? no yes Did you have expenses related to work? ___yes ___no
 Did you sell or trade stock? no yes Did you start a new business last year? ___yes ___no
 Did you sell your home? no yes Did you contribute to an IRA or a Roth last year? ___yes ___no

Documents needed to prepare your returns:

Income: W2's, 1099's, interest/dividend income, sale of stock, sale of home, K1's
If you itemize: 1098 mortgage interest statement, property taxes, DMV, donations, medical (if substantial)
If you went to school: 1098T... Tuition costs, books, supplies.
If you are Self employed: profit & loss, or list of income and expenses.
If you had daycare expense: name, address, phone # and federal ID# for the daycare facility (or ss# if an individual)

Signed X _____ dated ____/____/____
 Signed X _____ dated ____/____/____