

2019 Individual Taxes

WE MUST HAVE A VALID COPY OF YOUR DRIVERS LICENSE ON FILE

Your Name _____

Spouse's Name _____

On December 31st, were you: Single Married Separated Divorced

Best **Phone Number** & **Email Address:** _____

Do you wish to have your refund directly deposited? YES NO
 Has your bank information changed from last year? YES NO

Did you have **Market Place** Health Insurance YES NO **Must have form 1095-A**

Has **all income** from whatever source been included? YES NO

Amount & date of IRS estimated tax payments _____
 Amount & date of State estimated tax payments _____

Do you have any interest/money in a foreign account or assets? YES NO

Any correspondence from IRS/State & receive a PIN ? YES NO Need IRS Letter

Dependent information (New or Changes ONLY)		Lived with you?	
Dependent Name/Birthday/Soc Sec #	_____	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Dependent Name/Birthday/Soc Sec #	_____	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Your Date of Birth	_____	Occupation	_____
Spouse's Date of Birth	_____	Occupation	_____

Income & Expense

		If Yes	
Pay for child care or preschool that allowed you to work?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Need document
Pay Private School tuition grade K-12?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Need document
Pay college tuition or student loan interest?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Need form 1098T
Did you contribute to a Bright Start, 529 College plan?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Need document
Make a withdrawal from a pension account?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Need document
Did you receive Social Security?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Need document
Retire or change jobs this year?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Receive unemployment compensation?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Need 1099G
Did you make an IRA contribution <input type="checkbox"/> Roth <input type="checkbox"/> Traditional	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Need document
Contributions/distributions to/from Health Savings Account?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Need document
Any out of state purchases (on-line) and pay no sales tax?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Purchase Amount
Pay any real estate taxes?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Need document
Purchase or sell any real estate? Need buy/sell info if yes	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Need document
Did you refinance your home this year?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Need document
Did you engage in any bit coin or Venmo transactions	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Need document
Business or Rental Property <input type="checkbox"/> None Owned			
Was \$600 or more paid to an individual services	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	Need 1099 or info

You are hereby attesting that the above information is correct by affixing your signature:

Signature _____

Date _____