



CLIENT TAX RETURN SUBMISSION FORM

TAX YEAR

Taxpayer Name(s)

Date Documents Submitted

Tax returns will be delivered electronically unless a hard copy is requested - specify delivery method

In person pick-up

Mail

n/a - Portal

Note any change in mailing address, e-mail address or phone numbers

Provide updated bank info (note - we will not e-file without confirming direct deposit / debit info with you)

Bank Name

Account Type

Routing #

Account #

Specify any tax filing status changes during the year (single/MFS/HOH/MFJ)

Any change in dependents?

no change

specify changes:

Confirm Health Insurance all 12 months for all family members - provide Form 1095

all covered 12 months

explain exceptions:

IRA Contributions - list account type and amount

Date & Amount

Date & Amount

Date & Amount

Date & Amount

Estimated Tax Payments - Fed and State(s)

Let us know if you qualify for the veteran credit - if this is the first time claiming the credit, please provide documentation

Taxable Alimony received or deductible amount paid - provide total

Rent paid in NJ

Amount paid:

Address:

Property Taxes paid

Mortgage Interest paid - provide Form 1098

Gifts to Charities - total paid by cash/check/credit card

Gifts to Charities - total of noncash items donated - need name, address and details - if total exceeds \$500

Total Out of Pocket Medical expenses

Medical, Dental, Vision, Labs, etc.

RX

Health Insurance paid with post-tax\$

Long Term Care

Educator expenses - total spent up to \$300 pp

Childcare - amount paid per child & name/address/Tax ID for each payee

College Expenses per person - provide Form 1098-T

Student Loan Interest paid - provide Form 1098-E

Do we have all Broker Tax Reporting Statements?

yes

n/a

Any transactions in Virtual Currency?

yes

no

if yes, provide details

Additional Info:

If you purchased and/or sold a home, please provide closing documents

Please provide Schedule C / Schedule E Information separately

For New Clients (provide the following information for all individuals included in the tax return):

Full Name

Date of Birth

SSN

Occupation