

Filing Status: Single / Married filing Joint / Married filing Separatly / Head of HouseHold (need dependent(s))

Taxpayer Name: _____ Spouse Name: _____ Date: _____

Tax Year(s) to be prepared: _____ Are you Providing documents for another persons tax preperation? Yes / No - if YES how many: _____

Resident State: _____ Full Year -OR- Part year / Date moved if Part Year: _____

Contact Name: _____ Phone#: _____ Email: _____ (If not yourself)

Current Address: _____

DOCUMENT RETURN Pickup in office [] Mail (USPS) [] Electronic []

I. Personal Information:

TAXPAYER

SPOUSE

Table with 4 columns: Email address, Contact Number, Drivers License #, ISS, EXP for both Taxpayer and Spouse.

II. Additional Dependent Information (if Applicable)

Table with 4 columns: Name (if last name is different please specify), Social Security #, DOB: mm/dd/yyyy, Relationship.

Do you have Child/Dependent Care Expenses: Yes / No *If YES, more information is needed
Do you have a Child/Dependent in College: Yes / No *If YES, more information is needed

if you are owed a FEDERAL/STATE REFUND would you like it to be Directly Deposited? YES / NO

Routing and Account Information needed

Do you want to participate in our AUDIT PROTECTION PLAN (additional cost applies)? YES / NO

Are you or your spouse self-employed or an Independent Contractor? YES / NO

Do you have your Self-Employed Income/expenses/mileage documented? YES / NO

Do you rent in MA? YES / NO

Did you have full year health coverage? (FORM 1099-HC) YES / NO

Were you on MA Health Connector? (FORM 1095-A) YES / NO

Did you make Estimated Tax payments? YES / NO

Did you have Lottery or Gambling winnings? YES / NO

Did you have Retirement Distributions? YES / NO

Did you have Retirement Contributions? (Outside of employment) YES / NO

Did you collect Unemployment or Paid Family Medical Leave? YES / NO

Did you hold/sell Cryptocurrency? (Bitcoin, Ethereum, Etc.) YES / NO

Did you sell any property (primary residence or rental)? YES / NO

Did you sell anything Online? (Income & Expenses needed) YES / NO

Did you make Charitable donations? (CASH) YES / NO

Did you trade / sell stock, ESOP? YES / NO

II. STATUS CHECK POINTS:

Scanned: _____ Data Entry: _____ Printed: _____

Mailed: _____

Federal & State Income & Withholding Match: _____