**2023 NEW CLIENT TAX ORGANIZER WORKSHEET**

 **Date information submitted** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**New Clients -We Need a copy of Driver’s License for taxpayer and spouse.**

**Names**

|  |  |
| --- | --- |
| Taxpayer | Spouse |
| Filing Status: **🞏** Single **🞏** Head of Household **🞏** Married-Filing Jointly **🞏** Married-Filing Separately**🞏** Claimed as a dependent on another return.  |
| Social Security # | Social Security # |
| Birth Date | Birth Date |
| Occupation | Occupation |

 **Current Address that will be on your tax return**

|  |
| --- |
| Street Address City State Zip |
| Primary Contact Telephone | Secondary Contact Telephone |
| Email | Secondary Email |

**Dependents**

|  |  |  |
| --- | --- | --- |
| Full Name | Birth Date Relationship | Social Security # |
| Full Name | Birth Date Relationship | Social Security # |
| Full Name | Birth Date Relationship | Social Security # |
| Full Name | Birth Date Relationship | Social Security # |

**Yes/No Questions**Please check the appropriate box and include all the necessary details.

|  |  |  |
| --- | --- | --- |
| **Yes** | **No** |  |
| 🞏 |  🞏 | **NEW CLIENT- Please include copy of Last Year’s Tax Return** |
|  |  |  |
|  |  | **Dependent Information** |
| 🞏 | 🞏 | Were there any changes in dependents from the prior year?If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  | **Purchases, Sales, and Debt Information** |
|  |  |  |
| 🞏 | 🞏 | Did you start a new business this year? |
| 🞏 | 🞏 | Did you purchase rental property during the year? |
| 🞏 | 🞏 | Did you acquire a new or additional interest in a partnership or S Corporation? |
| 🞏 | 🞏 | Did you sell any real estate during the year? |
| 🞏 | 🞏 | Did you refinance any real estate during the year? |
| 🞏 | 🞏 | Did you purchase any real estate during the year? |
| 🞏 | 🞏 | Did you acquire or dispose of any stock during the year? |
|  🞏 | 🞏 | **In 2023, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any Virtual (Bit Coin) currency?** |
|  |  |  |
|  |  | **Income Information** |
| 🞏 | 🞏 | Did you make any withdrawals from a retirement account? |
| 🞏 | 🞏 | Did you make any withdrawals from an education savings/529 Plan account? |
|  |  | **Itemized Deduction Credits** |
|  |  |  |
| 🞏 | 🞏 | Did you make cash or non-cash charitable contributions? |
| 🞏 | 🞏 | Did you have any Tuition expenses during the year? |
| 🞏 | 🞏 | Did you have any student loan interest? |
| 🞏🞏 | 🞏🞏 | Any solar installed or purchase of alternative fuel vehicle?Any childcare expenses? |
|   |   | **Miscellaneous Information** |
| 🞏 | 🞏 | Do you or any of your dependents have healthcare.gov medical insurance. If yes, please have your 1095A ready. (Obamacare) |
| 🞏 | 🞏 | Do you have an HSA account? If yes amount of distribution \_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  |  |  |

**Banking Information**

**FOR REFUNDS:**

ROUTING NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ­­­­­­­­­­­­­­­­­­

ACCOUNT NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**How do want to receive your copy of the tax return?**

**Electronic (email) \_\_\_\_\_\_ Paper Copy \_\_\_\_\_\_\_\_ USB \_\_\_\_\_\_\_\_\_\_\_\_**

**(Additional copies requested at a later date may incur a nominal charge)**

**Communication Preference:**

**Phone call \_\_\_\_\_\_\_\_    Text Message\_\_\_\_\_\_\_   Email\_\_\_\_\_\_\_\_\_\_**