

Client Information Sheet		Filing Year: _____
Name:	SSN#:	DOB:
Address:		
City:	State:	Zip Code:
Home Phone:	Work Phone:	Cell Phone:
Occupation:	E-Mail Address:	
Spouse Name:	SSN:	DOB:
Work Phone:	Cell Phone:	
Occupation:	E-Mail Address:	
Filing Status: <input type="checkbox"/> Married Joint <input type="checkbox"/> Married/Separate <input type="checkbox"/> Single <input type="checkbox"/> HOH <input type="checkbox"/> Widow		
Business Name:	Entity Type:	
Business Name:	Entity Type:	
Business Name:	Entity Type:	

Dependent Name	SS# (upload copy to portal)	DOB	Relationship

During this past tax year, did you?	Yes	No	During this past tax year, did you?	Yes	No
Receive Cancellation of Debt Notice?	<input type="checkbox"/>	<input type="checkbox"/>	Unfiled Tax Returns?	<input type="checkbox"/>	<input type="checkbox"/>
Received a State Refund Last Year?	<input type="checkbox"/>	<input type="checkbox"/>	Bankruptcy?	<input type="checkbox"/>	<input type="checkbox"/>
Work as a Full-time Classroom Teacher?	<input type="checkbox"/>	<input type="checkbox"/>	Casualty/Theft or Loss?	<input type="checkbox"/>	<input type="checkbox"/>
Buy or Sell Real Estate?	<input type="checkbox"/>	<input type="checkbox"/>	Spouse or Dependent Death?	<input type="checkbox"/>	<input type="checkbox"/>
Unrepaid Loan to Family/Friends?	<input type="checkbox"/>	<input type="checkbox"/>	Give Birth or Adopt Children?	<input type="checkbox"/>	<input type="checkbox"/>
Receive, sell, exchange, or dispose of a digital assets?	<input type="checkbox"/>	<input type="checkbox"/>	Get Married?	<input type="checkbox"/>	<input type="checkbox"/>
Own or have authority over a foreign account or trust?	<input type="checkbox"/>	<input type="checkbox"/>	Did you have Health Insurance?	<input type="checkbox"/>	<input type="checkbox"/>

Additional:

Abundant Returns Tax Service will prepare your federal and state income tax returns based on the information you furnish. It is your responsibility to provide all information necessary to complete your tax returns. You represent to us that the information you provide is true, complete, and accurate. In addition, you have retained all necessary written support and documentation should it be required by the IRS or state audit examination. I certify that all information I submitted to Abundant Returns Tax Service is a true and correct to the best of my knowledge. ****If my information is entered into the computer and I decide not to move forward in the filing process, I forfeit my \$250.00 Retainer Fee.***

Signature _____ Date _____

Name: _____ Tax Year: _____

Tax Preparation Checklist

Step 1: Gather documents and upload to portal as one file

Step 2: Check the applicable box, sign, and upload this sheet to the portal

- Completed Client Information Sheet
- Copy of ID (Government issued picture ID) for all tax filers
- Copy of Social Security Card for everyone listed on the return
- Completed Payment and Refund Form

New Clients

- Last 2 Prior year tax returns filed
- Last 2 Prior year business tax returns filed
 - Proof of EIN/Employer ID Number/Tax ID Number from IRS)
 - LLCs:** Articles of Organization for LLCs
 - Corporations:** Articles of Incorporation
 - Partnership:** Partnership Agreement

Tax Documents

List total # of each

- | | |
|---|-------|
| <input type="checkbox"/> (W-2) Income from Employers | _____ |
| <input type="checkbox"/> (W-2G) Gambling Winnings | _____ |
| <input type="checkbox"/> (1095-A) Health Care Marketplace | _____ |
| <input type="checkbox"/> (1098) Mortgage Interest Statements | _____ |
| <input type="checkbox"/> (1098-E) Student Loan Interest | _____ |
| <input type="checkbox"/> (1098-T) Tuition Statements | _____ |
| <input type="checkbox"/> (1099-A) Acquisition/abandonment of secured property | _____ |
| <input type="checkbox"/> (1099-B) Stocks, Bonds, Bartering | _____ |
| <input type="checkbox"/> (1099-C) Canceled Debt | _____ |
| <input type="checkbox"/> (1099-DIV) Dividend Statements | _____ |
| <input type="checkbox"/> (1099-G) Unemployment Compensation | _____ |
| <input type="checkbox"/> (1099-G) State Tax Refunds | _____ |

- (1099-INT) Interest Statements _____
- (1099-LTC) Long Term Care Benefits _____
- (1099-Misc) Miscellaneous Income _____
- (1099-MSA) Medical Savings Accounts _____
- (1099-NEC) Non-Employee Compensation _____

Tax Documents

How Many Forms?

- (1099-R) Pension/IRA/401(k) Distributions _____
- (1099-S) Real Estate Sales _____
- (1099-SA) Health Saving Account _____
- (1099-SSA)/(1099-RRB) Social Security Benefits Statement _____
- (1444-C/6475) Economic Impact- 3rd payment _____
- (6419) Child Tax Credit _____
- (K-1) Shareholder's Share of Income from Partnerships,
 - o LLCs or S-Corporations _____

Other Info

- Childcare Fee Statements _____
- Donation Receipts & Statements _____
- IRA Deposits & Withdrawals _____
- Rental Property Income _____
- Contributions to Education Programs (529) _____
- Settlement Statements (Purchase or Sale of Property) _____
- Medical Expenses _____
- Rental Property Expenses _____ Number of Properties _____
- Business Financial Statements _____ Number of Businesses _____
 - Profit & Loss Statement
 - Balance Sheet)
 - Check here if Abundant Returns is doing your bookkeeping
- Include all other forms that say IMPORTANT TAX DOCUMENT

I, _____, certify that I have uploaded **ALL** information necessary
 (Print first and last name)
 to file taxes.

Signature _____ Date _____

Refund Sheet

How would you like to receive your refund?

- Check:** IRS issued a mailed check.
- Direct Deposit** into my Checking Account—Fill out the bank account info below.

Direct Deposit:

I, _____ (Your Name), authorize Abundant Returns Tax Services to deposit income tax refunds into the account listed below.

Bank Name: _____

Routing Number: _____

Account Number: _____

My signature certifies that I am an authorized user on this account.

Signature: _____ Date: _____