



TAX CLIENT INFORMATION SHEET

1. TAXPAYER/ SPOUSE INFORMATION	TAXPAYER SS#
	SPOUSE SS#
FULL NAME (print name below as shown on social security card):	EMAIL:
	Date of Birth:
Occupation:	Do you want to contribute to the presidential campaign? (circle) Y/N
SPOUSE FULL NAME (print name below as shown on social security card):	EMAIL:
	Date of Birth:
Occupation:	Do you want to contribute to the presidential campaign? (circle) Y/N

MARITAL STATUS (check one):	Single	Married	Separated	Widower	Civil Union
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STREET ADDRESS:	
CITY:	STATE: ZIP:
Daytime Phone Number:	How late may we contact you?
Evening Phone Number:	How late may we contact you?
Who may we thank for referring you to M&J Financial Management, LLC.?	(Facebook, Website, Friend, or Other):

2. EXEMPTIONS (Please complete the following as applicable.)					
	Name (as shown on SS Card)	Date of Birth	Social Security Number	Relationship to Taxpayer	Month in Home
Dependent					
Dependent					
Dependent					
Dependent					
Dependent					

3. REFUND

If you are receiving a refund, please tell us how you like to receive the refund. (Check only one)

	Direct Deposit to your account (fees paid up front)
	Check in Mail (fees paid up front)

For direct deposit, please provide account information below:

Name of Bank: _____ Checking

Account number: _____ Savings

Routing number: _____

Driver's License Information

DL#: _____

Issue Date: _____

Expiration Date: _____

4. ADDITIONAL INFORMATION REQUIRED

To provide you the very best quality service, we need a copy of all persons whose name will be shown on your tax return, driver's licenses, social security cards and/or college IDs. Also please have a copy of your prior year's tax return with you, if you did not use us last year to file your tax return.

5. SIGNATURE

ALL INFORMATION I HAVE GIVEN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

IF I CHOOSE NOT TO COMPLETE THE RETURN, UPON TAX INFORMATION BEING INPUT INTO COMPUTER BY A TAXPREPARER, THERE WILL BE A \$25.00 CONSULTATION FEE.

SIGNATURE: _____ DATE: _____

PLEASE COMPLETE BACK OF FORM

Did you or your spouse at any time during the year:	Circle:		If yes, please provide
1. Received wages, salaries, or any other employer compensation?	Yes	No	All W-2 Forms
a. Have you ever received W-2 forms for ALL employers?	Yes	No	
2. Receive unemployment compensation?	Yes	No	All 1099-G Forms
3. Receive Social Security Benefits?	Yes	No	All 1099-SSA Forms
4. Receive alimony?	Yes	No	
a. If yes, list amount:			
5. Pay alimony?	Yes	No	
a. If yes, list name of recipient:			
b. SSN of recipient:			
c. Amount paid:			
6. Do you pay daycare expenses?	Yes	No	Name, address, and SSN/IDN
a. If yes, list amount:			
7. Receive winnings from gambling? (lottery, race track, casinos, raffles)	Yes	No	All W2-G forms
8. Receive any miscellaneous income? (prizes, awards, jury duty)	Yes	No	
a. If yes, list amount:			
b. and describe:			
9. Are you claimed as a dependent on someone else's tax return?	Yes	No	
10. Pay interest on student loans?	Yes	No	
11. Receive pension, annuity, IRA or retirement income?	Yes	No	All 1099-R forms
12. Receive interest on savings, cash, US bonds, stock dividends?	Yes	No	All 1099-INT forms
13. Do you have any of the following:			
a. Home mortgage?	Yes	No	All 1098 Forms
b. Amount paid for sales tax?	Yes	No	Total Paid
c. Sales tax paid on new vehicles or home improvement?	Yes	No	List with amounts
d. Medical expenses or pay for health insurance?	Yes	No	List with amounts
e. Contributions to charity, church, etc.?	Yes	No	List with amounts
f. Out-of-pocket expenses or use of personal vehicle on the job?	Yes	No	List with amounts
g. Loss for casualty (Fire, theft, natural disaster)?	Yes	No	List with amounts
14. Did you have a job related move?	Yes	No	
15. Contribute to an IRA, SEP, Keough, or Simple Retirement Plan?	Yes	No	
16. Pay college tuition expenses?	Yes	No	All 1098-T forms
17. Sell stock, mutual fund, or other securities?	Yes	No	All 1099-B forms
18. Receive a 1099-MISC?	Yes	No	All 1099-Misc forms
19. Own your own business or were self-employed	Yes	No	
20. Use a portion of your home exclusively for business?	Yes	No	
21. Operate a farm?	Yes	No	
22. Own rental property?	Yes	No	
23. Receive installment payments on property sold?	Yes	No	
24. Sell your home?	Yes	No	All 1099-S forms
25. Sell any other property? (Equipment, land, etc.?)	Yes	No	
26. Have an interest in a partnership, S-corporation, estate or trust?	Yes	No	All K-1 Forms
27. Did you make estimated tax payments?	Yes	No	
28. Have a medical savings account?	Yes	No	
29. Did you live in any other states?	Yes	No	
30. Did you work in any other states?	Yes	No	
31. Do you have health insurance?	Yes	No	
a. Did you get health insurance through the marketplace?	Yes	No	All 1095-A Forms