

**CLIENT INFORMATION FORM**

**TAX YEAR(S):**

**MY TAX ANGEL**

672 W 11<sup>th</sup> St. #214 Tracy, CA 95376

**PHONE: (800) 401-2820 Toll Free or (209)-229-7970 FAX: (209) 879-0119**

**EMAIL: [info@mytaxangel.com](mailto:info@mytaxangel.com) WEBSITE: [www.mytaxangel.com](http://www.mytaxangel.com)**

**INSTRUCTIONS:** Fill out the form below and submit to our office *together with your other tax documents (W2s, etc).* Once received, you will be sent a confirmation via email and processing of your return will begin.

**YOUR RETURN WILL NOT BE COMPLETE UNTIL YOUR REVIEW OF THE RETURN AND APPROVAL SIGNATURE IS RECEIVED (either by appointment, fax or email).**

Name:		SS# or ITIN:			
Date of Birth:	Email Address:				
Cell Phone:	Home Phone:		Work Phone:		
Address:		City:	State:		Zip:
Spouse Name:		SS# or ITIN:			
Date of Birth:	Email Address:				
Cell Phone:	Home Phone:		Work Phone:		
Address:		City:	State:		Zip:
If you moved during the year, enter your previous address below:					
Address:		City:		State:	Zip:

**Filing Status:**  Single  Married Filing Jointly  Married Filing Separately  Widow(er)  Head of Household  Not Sure

**Dependent Information:** (attach additional page if needed)

Dependent Full Name	SS# or ITIN	Date of Birth	Months in home	Relationship	College Student?

**If you would like your refund direct deposited or have updated bank information to provide, please fill out below:**

Bank Name:				Checking		Savings	
Routing #:			Account #:				

**Privacy Policy:** The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from applications, worksheets, reporting statements, and other forms as well as interviews and conversations with our clients and affiliates. Under our policy, all information we obtain about you will be provided by your or obtained *with your permission*. We **will not** disclose your personal information to any third party except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.

How did you hear about us? Whom can we thank for referring you? \_\_\_\_\_

**Notes:**

**Questions – All**

Yes	No	Are either you or your spouse blind?
Yes	No	Were you divorced or separated during the year?
Yes	No	Were there any deaths in the family?
Yes	No	Have you received any notice from the IRS or State Revenue Department within the past year?
Yes	No	Did you pay or receive alimony during the last year? Paid/Received \$ _____ Recipient's SS# _____
Yes	No	Were any children born or adopted by you and/or your spouse during the past year?
Yes	No	Did anyone attend college or pay tuition to a private school?
Yes	No	Did you pay for child or dependent care so you could work or go to school? ( <i>attach details</i> )
Yes	No	Do you own a home?
Yes	No	Did you purchase or sell a main home during the last year? ( <i>attach details</i> )
Yes	No	Did you refinance a mortgage or take a home equity loan? ( <i>provide closing statement</i> )
Yes	No	Did you sell or transfer stock or sell rental or investment property?
Yes	No	Did you have any major purchases during the past year such as a vehicle, boat, RV, etc.? ( <i>provide contract</i> )
Yes	No	Did you contribute any money to an IRA during the last year?
Yes	No	Did you have any distributions or rollovers from a retirement account during the last year?
Yes	No	Do you have any children who earned more than \$1500 of investment income?
Yes	No	Did you have any uninsured loss to your property during the past year?
Yes	No	Did you work from home or use your vehicle for business (do not include commute to/from work)?
Yes	No	Did you have any unreimbursed employee expenses such as union dues, tools, uniforms, etc.?
Yes	No	Do you own a business or an interest in a partnership, corporation, LLC, or other venture?
Yes	No	Did you pay for any domestic services in your home?
Yes	No	Bankruptcy, foreclosure, repossession, or had any debt (including credit cards) cancelled?
Yes	No	Are you a member of the military?
Yes	No	Were you a citizen of or live in a foreign country, or received income from a foreign investment or bank?

Person completing this form: \_\_\_\_\_  
Print Name (first, last) Signature Date

Ask your tax preparer for information about depositing a refund into an IRA account or splitting the deposit into more than once account. Your return will be prepared based on the information you provide. It is important that you provide as many specifics as possible and review your return before filing. Proper planning will help maximize your tax benefits, please contact my office any time during the year if you have any changes or to plan your best tax strategy in advance.

**Preparation Checklist:**

- \_\_\_\_\_ All forms W2 (wages), 1098 Mtg Int Stmt, 1099INT, 1099R (retirement withdrawal), 1099MISC, Schedule K-1 (from partnerships, S Corporations, Estates, Trusts)
- \_\_\_\_\_ If you are a new client, provide a copy of last year's tax return
- \_\_\_\_\_ Copy of closing statement if you bought or sold real estate
- \_\_\_\_\_ Mileage figures for any auto expenses claimed, including total mileage (separate commute miles & business miles)
- \_\_\_\_\_ Details of estimated tax payments made if any
- \_\_\_\_\_ Income and expenses for business or rental activities
- \_\_\_\_\_ Expenses for medical, taxes paid, interest, charitable or other misc expenses related to efforts to make income.

Return this organizer along with your tax documents to our office by fax, email, drop off or mail we we can begin processing your return. You will be contacted to review all information and to ensure that no deductions are missed.

We are here year round for all of your tax, accounting, notary and payroll needs. Thank you for choosing MY TAX ANGEL!