Uhart Tax & Financial

Helping YOU Achieve Financial Success!

ANNUAL CLIENT INFORMATION/QUESTIONNAIRE

REQUIRED to be completed by ALL CLIENTS

Due to extensive tax law changes and increased due diligence requirements which were imposed by the tax reform, all questions below MUST be answered prior to the start of any tax return preparation.
Failure to do so will result in a delay of the preparation of your tax return.
ALL Clients are required to complete this

Personal Information	Taxpayer				Spouse
First name & Initial					
Last name					
**Social Security number					
**Date of birth					
Occupation					
E-mail address					
Home phone					
Cell phone					
Address				Apt/Suite	
City		State		ZIP	

Please provide YOUR driver's license to the front desk for state filings and identification protection

*****Clients who did not have Uhart Tax & Financial prepare their return last year must fill out these items.***

What was your marital status at the end of the year?
- ◯ Single
- ◯ Married
- ◯ Separated
- ◯ Divorced

(Please make sure spouse information is filled out above if Married or Separated)

(If married/separated)
Did you live together all year or at all during the last 6 months if not?
- ◯ We lived together all year.
- ◯ We did not live together all year, but we did live together during the last 6 months of the year.
- ◯ We did not live together at all during the last 6 months of the year.

(If married/separated)
How do you plan to file?
- ◯ Married filing Joint
- ◯ Married filing Separate

Reason: ________________

General Information:

Please check all that apply to your household for the past year:
- ☐ New baby
- ☐ Got married
- ☐ Got divorced
- ☐ Contains college students (anyone in household)
- ☐ Bought/Sold a home
- ☐ Changed jobs
- ☐ Retired
- ☐ Death of taxpayer or spouse
- ☐ Residential energy improvements done
- ☐ Covid impact (unable to work, care to family, etc)

Is anyone in the household in the military?
- ◯ **Yes** *(please provide a copy of LES)*
- ◯ **No**

Dependent Information:

Do you have any dependents?
- ◯ **No** *(skip this section)*
- ◯ **Yes** *(fill out for all dependents)*

Full Name	Relationship	Date of Birth	SSN	How many months lived with you in **2021**	Does dependent have income?	Disabled or a full time student?	Did you pay for childcare? (If yes, please write amount paid)

Income Questions:

General income (select all that apply):

- ☐ Wages (W2)
- ☐ Interest (1099-INT or year-end statements)
- ☐ Dividends (1099-DIV or year-end statements)
- ☐ Tax Exempt Interest/Dividends (info pages)
- ☐ Health Savings Account Distributions (1099-SA)
- ☐ State income tax return refund (1099-G)
- ☐ Alimony/Spousal support (divorce decree & payment records)
- ☐ Income from hobbies (income records)
- ☐ Sale of items used in business or rental property activities (sales records)
- ☐ Stocks/asset sales (1099B)
- ☐ Other tax-free income (although not taxable, may be used to calculate other deductions)

We will ask this every year to ensure we do not miss any items, which if left off may create tax agency correspondence.

If you have any questions regarding any type of income not listed in either of the two lists above, please reach out to us!

Other income (select all that apply):

- ☐ Self-employment (1099 forms; P & L)
- ☐ Distributions from IRA, pension or retirement accounts (1099-R)
- ☐ Rollover distributions (account statements)
- ☐ Rental income (1099-MISC; P & L)
- ☐ Royalties (Oil, Timber, Books, Etc) (1099-MISC ; statements)
- ☐ Partnerships, S corporations, Trust/Estate (K1 forms)
- ☐ Farming (P & L statement)
- ☐ Unemployment (1099-G)
- ☐ Social Security (SSA-1099)
- ☐ Canceled debt (1099-C or 1099-A)
- ☐ Distributions from savings or 529 plan (1099-Q)
- ☐ Disability payments (payment statements)
- ☐ Sale of principle residence (1099-S, final closing statement)
- ☐ Gambling, Prizes, Awards, Lottery (W2-G;win-loss statements, lottery purchases)
- ☐ Virtual Currency (account statements)

Crypto Currency: ***Due to integrations with reporting agencies and the IRS it can become a criminal case for failure to report properly your Digital Assets or Crypto Currency activity.***

Did you have any Digital Assets or Crypto Currency activity (buy or sell)

◯ **Yes**
◯ **No**

Do you have any Digital Assets or Crypto Currency accounts regardless of activity

◯ **Yes**
◯ **No**

Foreign Income:

Did you receive income from non-US sources?

◯ **Yes (provide statements)**
◯ **No**

Did you pay taxes to a foreign country?

◯ **Yes (provide statements)**
◯ **No**

Did you have foreign accounts or investments which had an aggregate value of over $10,000?

◯ **Yes**
◯ **No**

Deductions: ***Please select all deductions that apply to the prior year (tax year)***

- ☐ Charitable contributions/donations of cash/items (receipts and documentation of value)
- ☐ Vehicle donation (valuation proof and/or 1098-C)
- ☐ Medical expenses (ex., dentist, pharmacy, hospital, parking fees, etc.)
- ☐ Property taxes (do not include business or rental properties) Vehicle registration (registration renewal)
- ☐ Purchase vehicle, boat, airplane (purchase documents)
- ☐ Mortgage interest (1098)
- ☐ PMI premiums (1098 or statements)
- ☐ Mortgage Credit Certificate
- ☐ Student loan interest (1098-E)
- ☐ Educator expenses (list of expenses (we do not need to see receipts))
- ☐ Health savings account (5498-SA and/or 1099-SA)
- ☐ Tuition (1098-T)
- ☐ Investment loan interest (documentation of loan terms)
- ☐ Adoption expenses (payment statements)
- ☐ Daycare expenses (payment statements)

Healthcare:

Although Federal stopped the penalty, California requires health insurance, proof of insurance may be required.

Was everyone on your return covered by health insurance?

- ◯ **Yes**
- ◯ **No**
- ◯ **I don't know**

(For Covered CA, you are required to provide the Federal Form 1095-A and the California Form 3895)

Estimated Tax Payments:

ESTIMATED TAX PAYMENTS - Estimated tax payments are due April, June, September and January. These payments are "pre-payments" for the next year's tax. Not all clients are required to send these payments in. If you paid ANY of these please indicate yes and fill in the amounts and dates paid.

Did you previously pay Estimated Tax Payments towards your 2023 taxes?

- ◯ **Yes, to both state and IRS**
- ◯ **Yes, but only to state**
- ◯ **Yes, but only to IRS**
- ◯ **No**

State Payments:

#1 amount paid $__________and date paid _____________
#2 amount paid $__________and date paid _____________
#3 amount paid $__________and date paid _____________
#4 amount paid $__________and date paid _____________

IRS Payments:

#1 amount paid $__________and date paid _____________
#2 amount paid $__________and date paid _____________
#3 amount paid $__________and date paid _____________
#4 amount paid $__________and date paid _____________

Office Information:

Primary contact person:__________________

Please select your appointment preference based upon your abilities. Reminder - no in person appointments will be available at this time as a safety precaution for our clients and staff. Telephone and zoom appointments will be made available at mutually convenient times and review copies (if available) will be provided prior to such meeting.
***ALL clients WILL have an appointment to ensure all due diligence that is required gets completed this year.*

Would you like a paper copy of your tax return? (Blue Folder)

- ◯ **I do NOT need a paper copy**
- ◯ **I'd like a paper copy mailed to me (additional $10 fee)**
- ◯ **I'd like a paper copy I can pick up**

Appointment Type Preference:

- ◯ **Telephone** ◯ **In Office**
- ◯ **Zoom**

If you are entitled a refund, would you like direct deposit?

- ◯ **Yes**
- ◯ **No**

If yes: **Name of financial institution: ___________________________________**

Routing Number:______________________________

Account Number:______________________________