

**RWH Tax Preparation Information Sheet**

**First Name:** \_\_\_\_\_ **MI:** \_\_\_\_ **Last Name:** \_\_\_\_\_

**Social Security #:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Spouse Name:** \_\_\_\_\_ **MI:** \_\_\_\_ **Last Name:** \_\_\_\_\_

**Social Security #:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Complete Address:** \_\_\_\_\_  
 \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Your Email:** \_\_\_\_\_ **Spouse Email:** \_\_\_\_\_

**Are you required to pay local earned income taxes?** \_\_\_\_ **School District:** \_\_\_\_\_

**Dependent Information – Do not include yourself or your spouse**

Please list all persons who lived in your home and anyone living outside your home that you support

NAME	DOB	SS #	RELATIONSHIP	MONTHS LIVED WITH YOU

Did you or your spouse have income during the tax year that was not reported on a W2? \_\_\_\_ Yes \_\_\_\_ No  
 Did you receive social security payment during the tax year? \_\_\_\_ Yes \_\_\_\_ No  
 Did you receive unemployment payment during the tax year? \_\_\_\_ Yes \_\_\_\_ No  
 Did you pay for childcare during the tax year that allowed you to work? \_\_\_\_ Yes \_\_\_\_ No  
 Did you or anyone in your family attend college or vocational school? \_\_\_\_ Yes \_\_\_\_ No

Did you or anyone in your family pay student loan interest? \_\_\_\_ Yes \_\_\_\_ No  
 Did you own your home during the tax year? \_\_\_\_ Yes \_\_\_\_ No  
 Have you ever had earned income credit disallowed by the IRS? \_\_\_\_ Yes \_\_\_\_ No  
 Do you want to use direct deposit to a saving or checking account? \_\_\_\_ Yes \_\_\_\_ No  
 Did you provide a copy of your prior year returns? \_\_\_\_ Yes \_\_\_\_ No

**If you want to use direct deposit, please provide a voided check**

**If I did not prepare your tax return last year, please provide a copy of last year’s Federal and State tax returns.**

**Please provide all the following that you have received:**

**W-2’s, 1099’s, 1098’s, Social Security statements, charitable contribution receipts, real estate tax receipts, mortgage interest statements, medical receipts**

**If you own a business, please provide statements of all income and expenses. If you have an office in your home, include utility bills, homeowner insurance, square footage of your home, and square footage of your office area.**

**If you are not sure if a document is needed, please include it. I find it is better to have it and not need it than to need it and not have it. Please make note of any special circumstances or questions on the back of this form.**

Please complete health insurance information on back of this form.

