FoxBerry
ACCOUNTING SERVICES

What to bring to your tax appointment

Personal Documents

- New Clients
  - Client information sheet (see page 2)
  - Copy of last year's tax return

Income

Employment Income

- W-2 form(s) for all jobs last year
- Self-Employment Income
- 1099-NEC and/or 1099-K
- Record of estimated tax payments

Retirement Income

- SSA-1099 form for Social Security benefits
- 1099-R for pension/IRA/annuity income

Other sources of income

- 1099-G for unemployment benefits, refund of state/local income taxes
- Income or loss from the sale of stocks, bonds, or real estate
- Income or loss from rental property
- Alimony received
- Statements for prizes or lottery/gambling winnings
- Interest and dividend statements from banks

Expenses

- Retirement contributions, including a 401(k) or IRA
- Mortgage statements and property tax bills if you are a homeowner
- College tuition (1098-T) and student loan statements (Form 1098-E)
- Childcare expenses, including provider's address and federal tax ID number
- Receipts for charitable donations
- Medical and dental bills (needs to be over 7.5% of gross income)
- Records for supplies used as an educator

Other Tax Documents or Notices

- IRS Notice for your Economic Impact Payments (also known as stimulus checks)
- IRS Notice for Advanced Child Tax Credit
- Form 1095-A if you had coverage through the Health Insurance Marketplace
- IRS assigned PIN notice

FoxBerry
ACCOUNTING SERVICES

CLIENT INFORMATION SHEET TAX YEAR 2021

****PLEASE PRINT CLEARLY SO ALL INFORMATION CAN BE EASILY READ****

H.O.H.: ☐ *FILING SINGLE:* ☐ *MARRIED FILING JOINT:* ☐ MARRIED FILING SEPARATELY: ☐
Head of Household

Primary Taxpayer Information:

Last Name: ____________________

First Name: ____________________ M.I.______

SS or T.I.N. #: _______-_____-_______

US Citizen: Y _____ N _____

Occupation: ____________________

Date of Birth: _______/_______/_______

E-Mail: ____________________

Work Phone: ____________________ Ext: ___________

Cell Phone: ____________________

Home Phone: ____________________

Spouse Information:

Last Name: ____________________

First Name: ____________________ M.I.______

SS or T.I.N. #: _______-_____-_______

US Citizen: Y _____ N _____

Occupation: ____________________

Date of Birth: _______/_______/_______

E-Mail: ____________________

Work Phone: ____________________ Ext: ___________

Cell Phone: ____________________

Best Contact Phone #: ____________________

Address: ____ Apt #____________

City: ____________________ State: ____________________ Zip: ______________

Bank Account Info: Checking☐ or Savings☐ Bank Name: ____________________

Routing #: ____________________ Account #: ____________________

Foreign Bank Account/s: Y_____ N_____

Dependent Information: *Please provide SS cards and proof child or children reside with you*

Dependent Name (Refer to SS card)	SS #	DOB	M/F	Relationship
____________________	______-_____-_______	_____/_____/______	____	____________________
____________________	______-_____-_______	_____/_____/______	____	____________________
____________________	______-_____-_______	_____/_____/______	____	____________________

Any additional dependents please list on back side of this form.

By signing below, you understand your personal tax return is prepared based upon the information that you provide to us. It is our goal to make sure that you understand how it is prepared, and to make sure you receive the great service you will come to expect from our company. When presented with your completed tax return, please review all information to make sure that there are no omissions or misstatements of material facts and income. We suggest that you keep your receipts and documentation for up to seven (7) years. We value your business and appreciate your continued support!

Signature: ____ Date: ________________