

Elite Tax & Financial Services, LLC

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Tax year 2023 EXISTING CLIENT INFORMATION FORM

Please fill out all questions completely, this will avoid the preparer contacting you for questions on this form.

There will be extra charge for emails asking you questions on this form.

Last year's Preparer _____

Personal Contact Information

Filing Status: Single ___ Head of Household ___ Married/Joint ___ Married/Separate ___ If Divorced and receive or pay

All clients will receive a digital copy of their tax returns.

If you want a paper copy you will have to come to the office, and we will print you one at that time and give to you.

Taxpayer SS# _____ PLEASE ENTER Spouse SS# _____ No need to enter unless changed

Taxpayer's Name: _____ PLEASE ENTER Spouse Name: _____ If changed

Taxpayer's Date of Death: _____ if applicable Spouse Date of Death: _____ if applicable

Taxpayer's Occupation: _____ if changed Spouse Occupation: _____ if changed

Taxpayer's Cell Phone: _____ PLEASE ENTER Spouse Cell Phone: _____ PLEASE ENTER

Home phone (if applicable) _____

Taxpayer's e-mail: _____ PLEASE ENTER Spouse accurate E-mail: _____ PLEASE ENTER

Please provide an email that you use because this is the main way we communicate with taxpayers.

Did your address Change: Yes ___ No ___

If Address changed: Street: _____ City: _____ State: _____ Zip: _____

Dependent Information - If same dependent from prior year then just fill in the first name please.

1. Name: _____ M ___ F ___ 3. Name: _____ M ___ F ___

Date of Birth: _____ Date of Birth: _____

SS#: _____ SS#: _____

2. Name: _____ M ___ F ___ 4. Name: _____ M ___ F ___

Date of Birth: _____ Date of Birth: _____

SS#: _____ SS#: _____

Please verify if you would like the following (must be filled out completely if you answer YES):

Getting a refund and would like Direct Deposit ___ YES OR ___ NO (Check one)

You are owing and would like Direct Debit ___ YES specify direct debit date _____ OR ___ NO

Please enter the name of the bank, and at least the last 4 numbers in the account number "each year" to avoid complications with either refunds or payments made to the taxing authorities.

Name of Bank _____ ___ Checking or ___ Savings (Check one)

Routing # _____ Acct # _____ give us at least the last 4 of account number so we can match from prior year

Our engagement letter is the same every year. Please check it out on the website and check that you have read and agreed to what the engagement letter states.

I have read the engagement letter and fully understand it.

Taxpayer or spouse signature

Date read the engagement letter

Please check all that apply to you:

- | | |
|--|---|
| <input type="checkbox"/> W-2's | <input type="checkbox"/> Scholarships or Grants for school |
| <input type="checkbox"/> Interest or dividends | <input type="checkbox"/> Winnings from gambling |
| <input type="checkbox"/> Unemployment compensation | <input type="checkbox"/> Rental Income |
| <input type="checkbox"/> Receive 1099 Misc Or NEC | <input type="checkbox"/> Foreign Earned/Investment Income |
| <input type="checkbox"/> Farm Income | <input type="checkbox"/> Pension, annuity, Roth, IRA or retirement income |
| <input type="checkbox"/> Social Security Income | <input type="checkbox"/> Minister income with Housing |
| <input type="checkbox"/> Received Alimony | <input type="checkbox"/> State refund |
| How much _____ (yr) | <input type="checkbox"/> Bartering income (yes this is income) |
| Divorce Date _____ | <input type="checkbox"/> Cancellation of Debt Income (1099C) |
| <input type="checkbox"/> Jury Duty Pay | <input type="checkbox"/> Have you reported all your income? |

Were you Active Duty Military anytime during 2023? Yes ___ No ___

Did you receive Military Pension? Yes ___ No ___ Did you have at least 20 yrs of service? Yes ___ No ___

If you receive a Military Pension, were you medically retired (not including severance)? Yes ___ No ___

Pay Any (please check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Paid Alimony, How much? _____ | <input type="checkbox"/> Mortgage Interest |
| <input type="checkbox"/> Student loan interest | <input type="checkbox"/> Mortgage Insurance Premiums |
| <input type="checkbox"/> Daycare or childcare | <input type="checkbox"/> Medical Out of Pocket |
| <input type="checkbox"/> Real Estate Taxes | <input type="checkbox"/> Contributions to charity, church, Etc |

Check all that apply to you:

- | | |
|--|--|
| <input type="checkbox"/> Own your own business or were self-employed | <input type="checkbox"/> Sell any other property |
| <input type="checkbox"/> Sell any stock, mutual fund or other securities | We will need closing papers for any sells. |
| <input type="checkbox"/> Sell stock to cover for taxes | <input type="checkbox"/> Did you receive a 1099S for sale of any home |
| <input type="checkbox"/> Receive any gifts or give any gifts | <input type="checkbox"/> Receive any royalties |
| (over \$17000 cash or any item over \$17000 value) | <input type="checkbox"/> Operate a farm |
| <input type="checkbox"/> Sell your Primary home | <input type="checkbox"/> Receive installment pmts on property sold |
| <input type="checkbox"/> Own any rental property | <input type="checkbox"/> Have interest in a partnership, S-Corp, estate or trust |

Did you make any: Estimated pmts to IRS? Yes ___ No ___ Estimated pmts to the State? Yes ___ No ___ Not including W-2 withholding

Please provide all payments and the dates they were made. We do not automatically provide ES tax forms you must ask for them.

Did you have any of the following?

- | | |
|--|--|
| <input type="checkbox"/> Foreign Bank Accounts | <input type="checkbox"/> Contribute to: Non-Deductible Traditional IRA |
| <input type="checkbox"/> Foreign Assets | <input type="checkbox"/> College Expenses last year |
| <input type="checkbox"/> Contribute to a: Roth IRA (we need basis) | <input type="checkbox"/> Healthcare Marketplace |
| <input type="checkbox"/> Contribute to a: Deductible Traditional IRA | <input type="checkbox"/> Contribute to HAS |
| <input type="checkbox"/> SEP (Self Employed Pension Plan) | <input type="checkbox"/> Did you have student loan debt forgiven? |

At any time during 2023, did you receive, sell, send, exchange or otherwise acquire any financial interest in any virtual currency or have any Bit Coin transactions? Yes ___ No ___

At anytime during 2023, did you receive as a reward, award or payment of a digital asset? Yes ___ No ___

** Were you issued a security PIN from the Internal Revenue Service YES ___

What kind of Audit Protection Plan would you like to have? Basic \$39.95, Silver \$89.95 Gold \$149.95

Write in the type or write NONE for not wanting any Audit Protection Plan. Please refer to the website for all details on the audit protection plan. Type of Plan _____

All information I have given is true and correct to the best of my knowledge.

_____ Date: _____

Taxpayer or Spouse Signature