



Hello,

Thank you for choosing us to help you with your tax needs. To help us prepare your return faster and more efficiently please fill out the questionnaire below. This will ensure that we have the most up to date information needed to file your return. Also attached to this document is a list of all the common forms that you may have received. Please provide any tax forms you received, so we will be able to help you determine if it must be claimed on your return.

Looking forward to working with you!

Cloudbooks+

Basic Info needed

Primary Tax Payer

First Name _____ Last Name _____

Date of Birth _____ SSN ____-____-_____

Address _____ Phone number _____

Email _____ Provide Copy of Drivers license

Secondary Payer

First Name _____ Last Name _____

Date of Birth _____ SSN ____-____-_____

Phone number _____

Secondary phone number is required when filing joint return. Thank you

Email _____ Provide Copy of Drivers license

Please let us know if there are divorce agreements that alter your dependent exemptions.

Dependent #1

Name _____ Date of Birth _____ SSN ____-____-_____

Dependent #2

Name _____ Date of Birth _____ SSN ____-____-_____



Dependent #3

Name _____ Date of Birth _____ SSN ____ - ____ - _____

Dependent #4

Name _____ Date of Birth _____ SSN ____ - ____ - _____

Was there any childcare expenses? If so please complete the next section:

Provider name: _____ Provider name: _____

Address: _____ Address: _____

Tax ID/SSN: _____ Tax ID/SSN: _____

Did anyone receive a form 1098-T for school? If so please answer the following four questions for **EACH** student:

Has the **Hope Scholarship Credit** or **American Opportunity Credit** already been claimed on 4 prior tax returns?

Yes ____ No ____

Was the student enrolled at least half-time?

Yes ____ No ____

Did the student complete the first 4 years of post-secondary education before 2017?

Yes ____ No ____

Was the student convicted, before the end of 2017, of a felony for possession or distribution of a controlled substance?

Yes ____ No ____

How do you wish to receive your refund if you are to receive one?

Check Mailed ____ Direct Deposit ____

For direct deposit please provide proof of account numbers. Either a voided check or documentation from bank is required. You may upload this to the client portal.



Please also Provide and upload to the client portal:

- Copies of Drivers license for both Taxpayer and Secondary payer
- Copy of Voided check or other verifying docs for your bank account.

Please provide copies of each if you receive:

○ **Income Data Required**

- Wages and/or Unemployment (W-2's, 1099's)
- Interest and/or Dividend Income
- State/Local income tax refunded
- Social security and/or disability assistance Income
- Pension/Annuity/Stock or Bond Sales
- Contract/Partnership/Trust/Estate Income
- Gambling/Lottery Winnings and Losses/Prizes/Bonus
- Alimony Income
- Rental Income
- Self-Employment/Tips
- Foreign Income

○ **Expense Data -If applicable**

- Dependent Care Costs
- Education/Tuition Costs/Materials Purchased
- Medical/Dental
- Mortgage/Home Equity Loan Interest/Mortgage Insurance
- Employment Related Expenses
 - Gambling/Lottery Expenses – to the extent of winnings

- Tax Return Preparation Expenses
- Investment Expenses
- Real Estate Taxes
- Estimated Tax Payments to Federal and State Government and Dates Paid
- Home Property Taxes
- Charitable Contributions Cash/Non-Cash
- Purchase qualifying for Residential Energy Credit
- IRA Contributions/Retirement Contributions
- Home Purchase/Moving Expenses
- Self-employment expenses (ask for our handy list)

For clients NEW to Cloudbooks please also provide the following:

- Copies of SSN cards for all house members
- Please provide a copy of your prior years tax return