



Client Information Sheet

Tax Year: _____

NOTE: The Government requires that this information be provided EACH year

Last Name: _____

Address To Be Used on Tax Return: _____

OWN RENT

County you live in: _____ State of Residency: _____

PRIMARY TAXPAYER

Name: _____

Social Security Number: _____

Birthdate: _____

Telephone No: _____ Cell Landline Work

Email: _____

Driver's License Number: _____ State: _____ Issue Date: _____ Expiration Date: _____

SPOUSE

Name: _____

Social Security Number: _____

Birthdate: _____

Telephone No: _____ Cell Landline Work

Email: _____

Driver's License Number: _____ State: _____ Issue Date: _____ Expiration Date: _____

If you are married, do you wish to file: _____ Married Filing Jointly _____ Married Filing Separately

Did you live together at least 6 months during the tax year? YES NO

Are either of you a "dependent of another" for tax purposes (Does someone else claim you)? YES NO

Are either of you active military? YES NO

Are either of you educators? YES NO

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Do you have any children or other dependents? YES NO (If YES, you must complete the Dependent Questionnaire)

Do you have an HSA? YES NO (If YES, please provide your 1099-SAs or 5498-SAs)

If YES, what activity is recorded? Rolled Over to 2022 Used the Money for Medical Expenses

Did you have Health Insurance? YES NO

Was everyone in your household covered all year? YES NO

If NO, please explain: _____

Did you use Covered California for Health Insurance? YES NO (If YES, you MUST provide Form 1095A Health Insurance Marketplace Statement AND Form 3895 CA Health Insurance Marketplace Statement)

Did you receive any Cancellation of Debt? YES NO If YES, you MUST provide the 1099-C to our office

Has the IRS assigned an Identity Protection PIN to your Social Security Number? (for theft protection) YES NO (If YES, you must provide the IRS letter with the new number assigned to you each year)

YES NO

- _____ 1. Did you receive any Social Security, Paid Family Leave, or Disability payments? If so, how many? _____
- _____ 2. Did you receive any Unemployment payments? If so, how many? _____
- _____ 3. Did you receive any K-1s? If so, how many? _____
- _____ 4. Did you receive any 1099s? If so, how many? _____
- _____ 5. Did you receive any W2s? If so, how many? _____
- _____ 6. Did you receive any Advanced Child Tax Credit payments from the federal government?
- _____ 7. Do you have any active rental properties? (If YES, you must complete the Rental Property Questionnaire)
- _____ 8. Did you have any digital asset or virtual currency activity?
- _____ 9. Did you have any gambling winnings or losses?
- _____ 10. Did you have a sole proprietorship (unincorporated business) this tax year?
- _____ 11. Did you sell any real estate?
- _____ 12. Did you sell any stocks or other capital assets?
- _____ 13. Did you receive more than \$10 in bank interest?
- _____ 14. Do you have a Mortgage Credit Certificate (MCC)? (You would have applied during escrow)
- _____ 15. Did you pay any qualified tuition or higher education expenses?
- _____ 16. Would you like to file an extension? **NOTE: Your current year tax liability must still be paid by April 15th**

Did you contribute to a Retirement Savings Account outside of payroll? YES NO

Total outside payroll contributed to ROTH: \$ _____

Total outside payroll contributed to IRA: \$ _____

Total outside payroll contributed to SEP \$ _____

Last Name: _____

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YES **NO**

_____ 17. Did you receive or pay any alimony? Date of Divorce: _____

_____ 18. Did you give any gifts over \$15,000 per person?

_____ 19. Did you purchase anything outside of California for use in California (ex. cars, boats, equipment, etc.)?

_____ 20. Did/Do you have financial interest or signature authority over any foreign financial accounts?
If so, did/do the accounts collectively total over \$10,000? YES NO

_____ 21. Did/Do you have any interest or connection to a foreign trust?

Quarterly Tax Payments

Quarterly Tax payments are required of some taxpayers. If you were required to make these payments, you would have received quarterly vouchers when you filed taxes last year. If you made these payments, or paid Quarterly Taxes for any other reason, please provide the following information:

I DID NOT MAKE ANY ESTIMATED/QUARTERLY TAX PAYMENTS

NOTE: DO NOT INCLUDE ANY TAXES PAID THROUGH A W2, EMPLOYER PAYROLL, SOCIAL SECURITY, OR OTHER WITHHOLDING

1st Qtr Fed _____

3rd Qtr Fed _____

1st Qtr State _____

3rd Qtr State _____

2nd Qtr Fed _____

4th Qtr Fed _____

2nd Qtr State _____

4th Qtr State _____

Direct Deposit and Withdrawal Information

Check all that apply:

Directly deposit any refunds to the account indicated below

Apply my/our 2022 refunds to any estimated taxes owed for 2023, and refund the remainder to the account indicated below

Directly withdraw any tax liabilities from the account indicated below

Directly withdraw any estimated payments for the 2023 tax year (April 15, June 15, Sept 15, Jan 15) from the account indicated below

I would like to pay AAG San Diego invoices for tax services with the account indicated below

Routing Number: _____

Ckg Svgs

Account Number: _____

I certify that all the above answers are true and correct.

SIGNATURE

DATE

SPOUSE SIGNATURE (if applicable)

DATE