



### Background Information

This information will be used to determine your filing status. If you have recently married, be sure that your spouse has a social security number and that if her name has been changed it is reflected on her social security card.

Taxpayer Name: \_\_\_\_\_ Date of Birth (MM/DD/YY): \_\_\_\_\_

U.S. Social Security #: \_\_\_\_\_ Canadian Tax ID #: \_\_\_\_\_

Marital Status:  Single  Married  Divorced Is This a Change From Last Year?  Yes  No

Driver's License Number (US Only): \_\_\_\_\_ Not Issued by US State

Issuing State: \_\_\_\_\_ Date Issued (MM/DD/YY): \_\_\_\_\_ Expiration (MM/DD/YY): \_\_\_\_\_

### Preferred Method of Contact:

Phone: \_\_\_\_\_  Call  Text Email : \_\_\_\_\_

### Spouse Information (If Applicable)

Legal Name: \_\_\_\_\_ Date of Birth (MM/DD/YY): \_\_\_\_\_

U.S. Social Security #: \_\_\_\_\_ Canadian Tax ID #: \_\_\_\_\_

Driver's License Number (US Only): \_\_\_\_\_ Not Issued by US State

Issuing State: \_\_\_\_\_ Date Issued (MM/DD/YY): \_\_\_\_\_ Expiration (MM/DD/YY): \_\_\_\_\_

### Mailing Address for Refunds & Correspondences:

\_\_\_\_\_  
House Number & Street Apartment/Unit

\_\_\_\_\_  
City State Postal Code

Agent Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Financial Advisor: \_\_\_\_\_ Phone: \_\_\_\_\_

### Cryptocurrency

During 2021, did you hold any cryptocurrency?  Held  Bought  Sold, please see page 4

**Direct Deposit** - Note if you have a balance due, I will notify you of the amount due prior to filing your taxes.

Do you want your refunds directly deposited into your bank account?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you want any balances owed directly withdrawn from your bank account?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If we did your taxes last year, should we use the same bank info as last year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No (Fill below)

Bank Name: \_\_\_\_\_ Bank Routing: \_\_\_\_\_

Bank Account #: \_\_\_\_\_  Checking  Savings

## Dependents

If we did your taxes last year, please feel free to only list any children that were born during 2020 or 2021. If you have a significant other (or parent) that you pay more than half of their expenses, please indicate them as well. If you are a new client, please provide all of your dependents' information. Feel free to include a separate document.

Dependent's Name	Birthdate	Social Security Number	Relationship
_____	_____	_____	_____
_____	_____	_____	_____

Can you claim all the dependents we have on record and listed above?

Yes  No (Who?): \_\_\_\_\_

If you have any dependents who are 19 years or older, please check what applies below:

- They are your child in college  
 They lived with you for at least half the year  
 You paid for at least half of their living expenses

### Child Care Expenses

A credit is allowed for all qualified child care expenses paid. You are only eligible if both parents work (or attend school) and your child is under the age of 13.

Name of child: \_\_\_\_\_

Care provider name: \_\_\_\_\_

SS # or Business ID #: \_\_\_\_\_

Care provider address: \_\_\_\_\_

Dates care was provided: \_\_\_\_\_ to \_\_\_\_\_ total amount paid: \$ \_\_\_\_\_

Important: Please provide separate information for each child's expenses that were paid and separate information for each childcare provider used.

### Higher Education Tuition and Interest

Tax credits are available for tuition and student loan interest incurred by students pursuing college or graduate degrees. The taxpayer, spouse or any of their dependents can incur these expenses. These deductions and credits are limited to your income level – however if you have paid tuition or student loan interest, please include the amounts here and let me determine whether you qualify.

Name of student: \_\_\_\_\_ University or College: \_\_\_\_\_

Tuition paid (include 1098-T form): \$ \_\_\_\_\_

Student loan interest paid (include 1098-E form): \_\_\_\_\_

#### Tax Tip

Please note that under certain circumstances significant others or other individuals who are without wages and who you support can be claimed as a dependent.

### Employment Income – U.S. & Canada

Please list all employers that provided a W-2 (US) or T-4 (Canada)

Employer/Team	Recipient	Wage Slip Enclosed?
_____	<input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> Taxpayer <input type="checkbox"/> Spouse	<input type="checkbox"/> Yes <input type="checkbox"/> No

**IMPORTANT – Please indicate any road trips you did not travel with the team for any reason:**

\_\_\_\_\_

### Employment Income – Outside U.S. & Canada

If you played or earned income in Europe, Asia, or South America this past year please indicate below and attach any wage slips and paystubs you may have.

Employer/Team	Wage Slip Enclosed	Amount Received	Currency
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/> Foreign <input type="checkbox"/> USD
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/> Foreign <input type="checkbox"/> USD
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/> Foreign <input type="checkbox"/> USD

### Other Income – Endorsement, Self-Employment, Unemployment

If you received income from appearances, card signings, coaching, consulting, educational clinics or camps, or unemployment/maternity leave, which were not included in any of the sources listed above, you still need to report this income. **This income should be reported on a 1099-MISC or 1099-NEC slip.**

Payer/Source	Type of Income	Amount
_____	<input type="checkbox"/> Endorsement <input type="checkbox"/> Self-employment <input type="checkbox"/> Unemployment	\$ _____
_____	<input type="checkbox"/> Endorsement <input type="checkbox"/> Self-employment <input type="checkbox"/> Unemployment	\$ _____
_____	<input type="checkbox"/> Endorsement <input type="checkbox"/> Self-employment <input type="checkbox"/> Unemployment	\$ _____

### Stimulus Payments

Did you receive the third stimulus payment?  No  Unsure  Yes – Amount \$ \_\_\_\_\_

Did you receive advance child tax credit payments?  No  Unsure  Yes – Amount \$ \_\_\_\_\_

**If you received either of the above, please enclose Notice 1444-C (stimulus) and/or Letter 6419 (Child Credit). Note: If our address is used on your return, these were sent to us.**

## Retirement Contributions

### Traditional IRA

Does your offer a 401k (or 403b) retirement plan?  yes  no  unsure/foreign employer

If your employer does not offer a 401k plan, you could benefit from contributing to a Traditional IRA. Contributing provides two benefits:

- Reduce your current tax liability
- Provide funds for your retirement

Amount to contribute: \$\_\_\_\_\_ (you must do this prior to April 15<sup>th</sup>)

If your employer offered a retirement plan you may not receive any benefit from contributing to a traditional IRA – however there are exceptions based on your income level. **If you are interested in learning if you qualify, please feel free to ask.**

The tax savings for a Traditional IRA are immediate. Any contribution you make will lower your taxable income by your tax rate. Therefore, if your tax rate is 25% you will save \$250 for every \$1,000 you contribute

### Roth IRA

If your employer offers a retirement plan and your total household income is less than \$208,000 (married) or \$140,000 (single) you may contribute to a Roth IRA. However, there is a legal backdoor way to contribute to a ROTH IRA even if your income is higher than the limits – please notify us if you're interested in finding out how.

Amount to contribute: \$\_\_\_\_\_ (you must do this prior to April 15<sup>th</sup>)

**Please call to discuss my IRA contribution options**

There are no immediate tax savings on a Roth IRA – however when you withdraw your money later in life you will not have to pay tax on that money plus any interest that has been earned on that money. Therefore, if you contribute \$1,000 and that money grows to \$5,000 over the next 30 years you will not have to pay tax on the \$5,000 when you withdraw it.

### RRSP

**This only applies if you filed a Canadian tax return.**

RRSP's are tax deferred savings plans for your retirement (like a traditional IRA). RRSP contributions are different for each individual and are determined by your income. If you are interested in making a RRSP contribution you need to make it prior to the **February 28<sup>th</sup> deadline.**

Yes, I'm interested in a RRSP contribution please call me.

Amount to contribute: \$\_\_\_\_\_

## Foreign Bank Account

If you have a financial interest in or signature authority over a foreign financial account, including a bank account, brokerage account, mutual fund, retirement account, or any other money held or invested in a foreign entity, please indicate so below. This information does not impact your tax calculations but each account that exceeds \$10,000 needs to be reported.

Bank Name & Address	Account Number	Maximum Amount	Currency
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____

## Investments – Stocks & Cryptocurrency

Did you sell any stocks or cryptocurrency during 2021? If so, you should have received a summary page from the brokerage firm that shows the price you sold the stock or cryptocurrency for, the price you bought it for, and the number of shares. Please include that document. If you are missing any of that information, please let us know.

Brokerage Firm	Stock or Crypto?	Summary Document Included?
_____	<input type="checkbox"/> Stock <input type="checkbox"/> Crypto	<input type="checkbox"/> Yes <input type="checkbox"/> No – Contact Advisor? <input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> Stock <input type="checkbox"/> Crypto	<input type="checkbox"/> Yes <input type="checkbox"/> No – Contact Advisor? <input type="checkbox"/> Yes <input type="checkbox"/> No

## Interest & Dividends

If you received interest or dividends from a bank account or brokerage firm, please indicate below all financial institutions in which you have investment income. All information will be reported on forms 1099-INT or 1099-DIV in the US and T4 or T5 slips in Canada

Bank or Firm	Slip Enclosed?	Amount
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No – Contact Advisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	\$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No – Contact Advisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	\$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No – Contact Advisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	\$ _____

## Partnership Revenue

If you have a financial interest in a business or partnership, please attach all K-1 forms that you received.

Partnership/Investment	Active or Passive Participation?	K-1 Slip Enclosed?
_____	<input type="checkbox"/> Actively Run <input type="checkbox"/> Passive Investment	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> Actively Run <input type="checkbox"/> Passive Investment	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Deductions & Credits

Deductions lower your taxable income while credits lower your actual tax. All deductions & credits should be substantiated with receipts.

### Business Deductions – Not Related to Self-Employment

Changes to tax law have greatly reduced the amount of business deductions individuals are allowed to take. **Self-employed individuals (Sole Proprietors) should use page 8.**

Agent Fees: \$ \_\_\_\_\_ Union Dues: \$ \_\_\_\_\_

Conditioning Expense (Trainers/coaches, gym, ice fees, equipment, supplements): \$ \_\_\_\_\_

Receipts Included?  Yes  No

### Property – Not Rented

If you only own **rental property**, please use **page 9**. If **you don't own property**, please skip this section.

Did you buy or sell your property over the past year?  No

Yes - *Please include HUD & closing statement*

Sale Price: \$ \_\_\_\_\_ Purchase Price: \$ \_\_\_\_\_

### Taxes and Interest

Please indicate any property taxes or mortgage interest from a home loan paid during the year. *If these payments were made through an escrow account, this amount will be found on a 1098-MIS statement.* Otherwise, you should collect receipts to show the amounts paid. ***If you paid interest on a home equity loan and/or refinance of your home, please include that information as well.***

Property Address (Not Rented)	Tax Paid	Interest Paid	1098-MIS Slip
_____	\$ _____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	\$ _____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	\$ _____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

### Personal Property Taxes

Please include any amounts of personal property tax you paid on your car (or boat, RV, etc.).

Registration Tax Amount: \$ \_\_\_\_\_ State paid to: \_\_\_\_\_ Receipt Enclosed  Yes  No

Registration Tax Amount: \$ \_\_\_\_\_ State paid to: \_\_\_\_\_ Receipt Enclosed  Yes  No

## Charitable Contributions

Contributions of money or property to a qualified organization are deductible. For contributions over \$250, please include a receipt.

Organization	Donation Type	Amount	Receipt?
_____	<input type="checkbox"/> Cash <input type="checkbox"/> In-Kind _____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> Cash <input type="checkbox"/> In-Kind _____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> Cash <input type="checkbox"/> In-Kind _____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> Cash <input type="checkbox"/> In-Kind _____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	<input type="checkbox"/> Cash <input type="checkbox"/> In-Kind _____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Charitable Miles: \_\_\_\_\_

## Gifts

If you provided any gift to someone other than your spouse for more than \$15,000, please provide their information below. This includes paying bills for another individual.

Name	Social Security Number	Amount	Relationship
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____

## Medical Expenses

Medical expenses are amounts that are not paid by insurance, or your employer and **they must exceed 7.5% of your income. Unless you have a large amount of expenses or do not have health care through your employer, you will probably not qualify for this deduction.**

Expense	Amount	Expense	Amount
Prescriptions	\$ _____	Doctor/Dentist Visits	\$ _____
Hospital Expenses	\$ _____	Medicine/Prescriptions	\$ _____

## Health Insurance

- 1) Did you receive health insurance coverage through your employer?  Yes  No – Proceed to #2
- 2) If not, did you purchase insurance through the marketplace?  Yes – Proceed to #3  No
- 3) Were you issued a 1095-A form?  Yes – Please include that form  None was issued

## Small Business Revenue – Sole Proprietorships

If you or your spouse own/operate a small business, your income from this business will need to be reported. You should also include any expenses related to the business and they should be substantiated with a receipt. ***If you run more than one business, please fill out this page for each one.***

Name of Business: \_\_\_\_\_ Business ID#: \_\_\_\_\_

Income From Operations: \$ \_\_\_\_\_

Expense	Amount	Receipts?
Cost of Goods Sold/Materials	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Contract Labor	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Advertising	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Parking Fees & Tolls	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Commissions & Fees	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Health Insurance	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Insurance (Other than health)	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Interest Paid	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Legal & Professional Services	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Office Expense	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Repairs & Maintenance	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Business Supplies	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Estimated Tax Payments (Enclose Receipts)	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Business Travel (Hotels, Flights, etc.)	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Business Meals	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Cell Phone	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Internet	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Utilities	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other _____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Mileage Expense** Business Miles: \_\_\_\_\_ Total Miles Driven \_\_\_\_\_

**Home Office Expense** Total sq footage of home: \_\_\_\_\_ Area used for business \_\_\_\_\_

Rent: \$ \_\_\_\_\_ Utilities: \$ \_\_\_\_\_ Repairs: \$ \_\_\_\_\_



## Rental Real Estate

If you and/or your spouse own a property that you rent, please provide that information below. ***If you own more than one property, please fill out this page for each one.***

Kind of Property:  Single Family Home  Condo/Apartment  Duplex  Other \_\_\_\_\_

Property Address: \_\_\_\_\_

Purchase Date: \_\_\_\_\_ Purchase Price: \$ \_\_\_\_\_ Capital Improvements: \$ \_\_\_\_\_

Are you (and your spouse) the sole owner(s)?  Yes  No

If not, who else owns the property? \_\_\_\_\_ What % do you own? \_\_\_\_\_%

Did you live in the property during the year?  No  Yes – Dates: \_\_\_\_\_

Rents Collected: \$ \_\_\_\_\_

Expense	Amount	Receipts?
Advertising	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Auto & Travel	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Cleaning & Maintenance	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Commissions	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Insurance	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Legal & Professional Services	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
HOA Fees	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Management Fees	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Mortgage Interest	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Repairs	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Taxes	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Supplies	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Utilities	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other _____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

### If You Sold the Property During the Year – Please Include the HUD & Closing Statements

Date of Sale: \_\_\_\_\_ Sale Price: \$ \_\_\_\_\_