## For the Tax Year 2023

## **ProAcct Financial Income Tax Intake Sheets**

ProAcct Financial Advantage LLC

You will need:  Tax Information such as Social security cards or Picture ID (such as valid	You are responsible for the information on your return. Please provide complete and accurate information.														
Email Address :													,		
Part I – Your Personal Inform	ation (If you are	filing a joi	nt return,	enter y	our name	s in the	same orde	r as las	st year's	return)			-		
1. Your first name	M.I.	Last nar			Social Security #						Are you a U.S. citizen?  ☐ Yes ☐ No				
2. Your spouse's first name	M.I.	Last nar	ne								pouse a U.S. citizen?				
3. Mailing address					Apt #	City					State		ZIP c	ode	
4. Your Date of Birth	5. Your job title	9		6. L	ast year,	were yo	ou:				a. Full-tir	me student		Yes	☐ No
						d permanently disal		bled	☐ Yes ☐ No		c. Legall			Yes	☐ No
7. Your spouse's Date of Birth	8. Your spouse's job title					, was your spouse:					a. Full-time student			Yes	☐ No
					d permanently disab		bled 🗌	☐ Yes	☐ Yes ☐ No	c. Legall	y blind		Yes	☐ No	
10. Can anyone claim you or yo						☐ Un									
11. Have you, your spouse, or	•			ted ide	ntity theft	or beer	n issued an	Identit	y Protec	ction PIN?				Yes	☐ No
Part II – Marital Status and															
1. As of December 31, 2023 what was your marital status? Never Married (This includes registered domestic partnerships, civil unions, or other formal relationships under state law)  a. If Yes, Did you get married in 2023?															
was your marital status?	☐ Marr	ried			, ,							☐ Yes			
	- 5:		b. Did	you liv	e with you	ur spou	se during a	ny part	of the la	ast six mor	ths of 202	3? ☐ Yes		No	
	Divo														
		ally Separa					nce decree								
		owed	Yea	ar or sp	ouse's de	atn									
2. List the names below of:															
everyone who lived with	you last year (d	other than	your spou	se) that	you are o	daïmïng	as a deper	ndent.							
Name (first, last) Do not enter your name or spouse's name below	(mm/dd/yy) to	you? on, aughter		US Citizen (yes/no)	Resident of US, or Mexico last year (yes/no)	Single or Married (S/M)	Full-time Student last year (yes/no)	Totally and Perman Disable (yes/no,	nently d	Social Securi	ty Number:				
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)							
1	n9				1	1		1	1						

Check	Check appropriate box for each question in each section									
Yes	No	Unsure	Part III – Income – Last Year, Did You (or Your Spouse) Receive							
			1. (B) Wages or Salary? (Form W-2) If yes, how many jobs did you have last year?							
			2. (A) Tip Income?							
			3. (B) Scholarships? (Forms W-2, 1098-T)							
			4. (B) Interest/Dividends from: checking/savings accounts, bonds, CDs, brokerage? (Forms 1099-INT, 1099-DIV)							
			5. (B) Refund of state/local income taxes? (Form 1099-G)							
			6. (B) Alimony income or separate maintenance payments?							
			7. (A) Self-Employment income? (Form 1099-MISC, cash, virtual currency, or other property or services)							
			8. (A) Cash/check/virtual currency payments, or other property or services for any work performed not reported on Forms W-2 or 1099?							
			9. (A) Income (or loss) from the sale or exchange of Stocks, Bonds, Virtual Currency or Real Estate? (Forms 1099-S, 1099-B)							
			10. (B) Disability income? (such as payments from insurance, or workers compensation) (Forms 1099-R, W-2)							
			11. (A) Retirement income or payments from Pensions. Annuities, and or IRA? (Form 1099-R)							
			12. (B) Unemployment Compensation? (Form 1099G)							
			13. (B) Social Security or Railroad Retirement Benefits? (Forms SSA-1099, RRB-1099)							
			14. (M) Income (or loss) from Rental Property?							
			15. (B) Other income? (gambling, lottery, prizes, awards, jury duty, virtual currency, Sch K-1, royalties, foreign income, other property or services,							
			etc.) Specify							
Yes	No	Unsure	Part IV – Expenses – Last Year, Did You <i>(or Your Spouse)</i> Pay							
			1. (B) Alimony or separate maintenance payments? If yes, do you have the recipient's SSN? ☐ Yes ☐ No							
			2. Contributions to a retirement account?							
			3. (B) College or post secondary educational expenses for yourself, spouse or dependents? (Form 1098-T)							
			4. (A) Any of the following?   Medical & Dental (including insurance premiums)  Mortgage Interest (Form 1098)							
			☐ Taxes (State, Real Estate, Personal Property, Sales) ☐ Charitable Contributions							
			5. (B) Child or dependent care expenses such as daycare? If yes, form from provider is needed.							
			6. (B) For supplies used as an eligible educator such as a teacher, teacher's aide, counselor, etc.?							
			7. (A) Expenses related to self-employment income or any other income you received?							
			8. (B) Student loan interest? (Form 1098-E)							
Yes	No	Unsure	Part V – Life Events – Last Year, Did You <i>(or Your Spouse)</i>							
			1. (HSA) Have a Health Savings Account? (Forms 5498-SA, 1099-SA, W-2 with code W in box 12)							
			2. (A) Have credit card or mortgage debt cancelled/forgiven by a lender or have a home foreclosure? (Forms 1099-C, 1099-A)							
			3. (A) Adopt a child?							
			4. (B) Have Earned Income Credit, Child Tax Credit or American Opportunity Credit disallowed in a prior year? If yes, for which tax year?							
			5. (A) Purchase and install energy-efficient home items? (such as windows, furnace, insulation, etc.)							
			6. (A) Receive the First Time Homebuyers Credit in 2008?							
			7. (B) Make estimated tax payments or apply last year's refund to this year's tax? If so how much?							
			8. (A) File a federal return last year containing a "capital loss carryover" on Form 1040 Schedule D?							
			9. (A) Have health coverage through the Marketplace (Exchange)? [Provide Form 1095-A]							