

**COMPREHENSIVE TAX SERVICE, INC.
CLIENT INFORMATION SHEET**

Date: _____

Home/Cell Phone: _____ Work Phone: _____ E-MAIL: _____

Taxpayer Spouse

Name: _____

Soc. Sec. No: _____

Date of Birth: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Occupation: _____

County of Residence at 1/1/2023: _____

Can you be claimed by your parents or another taxpayer? Yes _____ No _____

Filing Status: Single
 Married Filing Jointly
 Married Filing Separately ----- (Must have Spouse's Name and SSN)
 Head of Household (Qualifying Child's Name _____, If not your dependent)

Dependents: (Every child listed must have birth date and Social Security Number (SSN) even if born in 2023)

Claiming for:

Name	SSN	Birth Date	Months lived with you	EIC	Dependent

Can any of the above dependents be claimed by another taxpayer? Yes _____ No _____

Other Dependents:

Name	Relationship	Number of Months lived in Your Home	Date of Birth	Dependents Social Security Number	Did you provide more than 50% of Dependent's support

If you are claiming a child or other dependent for any type of tax credit, we will need to call you to go over due diligence questions in accordance with requirements from the Internal Revenue Service.

If you are claiming a dependent that does not live with you, you must complete a FORM 8332 and get the custodial parent's signature.

The following questions must be answered:

- | | Yes | No |
|---|--------------------------|--------------------------|
| 1. Did you have health insurance coverage through the Marketplace for any/all of 2023? (If yes, you must provide the form 1095-A from the provider) This does not pertain to insurance coverage through your employer. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you have a financial interest in, signature authority, or other authority over foreign financial accounts of an aggregate value that exceeds \$10,000? (If yes, you must file a Report of Foreign Bank and Financial Accounts) | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Did you receive a distribution from, OR were you a grantor of a foreign trust of an aggregate value that exceeds \$10,000 at any time during 2023? (If yes, you must file a Report of Foreign Bank and Financial Accounts) (FBAR) | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset) (e.g. Digital currency, Cryptocurrency, Bitcoin, etc.) If yes, we need documents showing 2023 activity. | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Did you spend any funds from a Health Savings Account(HSA)? (If yes, we need the Form 1099-SA to show it was for medical purposes.) | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Did you have any unemployment compensation in 2023? (If yes, you will need to print the Form 1099-G from your online account.) | <input type="checkbox"/> | <input type="checkbox"/> |

PLEASE COMPLETE THE BACK SIDE OF THIS FORM AND SIGN THE CERTIFICATION.

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(Continued)**

Did you rent an apartment or house as your principal residence in 2023? If yes, complete the following:

Rental Address (if different from address on front page) _____

Total Rent paid in 2023: _____ Number of months rented in 2023: _____

Landlord's Name: _____

Landlord's Address: _____

Did you have online/out-of-state purchases for which you did not pay sales tax? Amount of purchases in 2023: \$ _____

Did you pay property tax on your principal residence? Amount paid in 2023: \$ _____

Did you contribute money to any charities? Amount contributed in 2023: \$ _____

Are you an eligible K-12 educator that personally paid for classroom expenses? Amount paid in 2023: \$ _____

Child Care Credit:

Babysitter's/Day Care's Name: _____ SSN or Federal ID No. _____
(Must have this number to take deduction)

Babysitter's/Day Care's Address: _____

Amount Paid in 2023: _____ Number of Children Receiving Care _____

Educational Credits:

You must submit a form 1098-T and possibly tuition statements for higher educational costs.

Student's Name (Must be claiming in 2023): _____

Number of Years Educational Credits have been claimed (per student) _____

Indiana 529 contributions: Please provide the year-end statement showing the account number and the year-to-date contributions.

Interest on Education Loans : Please provide us the statement showing the amount of interest paid in 2023.

Estimated Taxes Paid for the 2023 Tax Year:
(taxes paid personally - not on W-2)

Federal State

1ST Quarter - Due 4-18-2023		
2ND Quarter - Due 6-15-2023		
3RD Quarter - Due 9-15-2023		
4TH Quarter - Due 1-16-2024		

Traditional & Roth IRA Contributions
(not paid through your employer)

Taxpayer Spouse

Traditional IRA Contributions in 2023		
Roth IRA Contributions in 2023		

If you think you may be able to itemize your deductions, based on the new standard deduction limits, find the itemized deduction worksheet on our website, comprehensivetaxservice.com.

I/We certify that all tax information, including cash received for payment of services and bartering income, has been forwarded to you or shown on the front and/or back of this form and it is true, accurate and complete to the best of my/our knowledge. I/We also, give my preparer permission to discuss my tax information with the Internal Revenue Service and/or the Indiana Department of Revenue.

Taxpayer's Signature: _____

Date: _____

Spouse's Signature: _____

Date: _____