

Recurring Client Form Please read carefully, fill out all fields that apply, and sign the bottom of page 2.

Let us know if you need any help filling this out. Call or email anytime. ☺.

We need your Driver's License info this year:

License #: _____, State: _____, issue date: _____, expiration date: _____

Spouse License #: _____, State: _____, issue date: _____, expiration date: _____

Name	
Only fill out this section if different from last year:	
New Occupation	
New Cell Phone	
New Alt. Phone	
New Email	
New Address	

Did you get married by 12/31 of the tax year?	
Spouse Name	
Social Security #	
Birthdate	
Occupation	
Cell Phone	
Alt. Phone	
Email	

- Single;
- Married filing Joint
- Married but filing Separate Give spouse Name/SSN/birthdate above
- Lived separate from spouse for last 6 months of year or more
- Divorced during the tax year
- Head of Household (unmarried with dependent(s) in the house)
- Widowed during the tax year. Date: _____

I have a child that I claim on my return and will fill out **1 Dependent Form** for each child. New this year we have a detailed form for you to get every credit and deduction possible for your dependents and to protect you - and us - from the new penalties. Please fill it out completely for each dependent – thanks! ☺.

Had health insurance the whole year. Bought it on the ACA marketplace/exchange – If so, we need form 1095-A

Did not have health insurance for these months: _____

Spent \$ _____ this year on higher education - for Me, My Spouse , (If for a dependent include it on the Dependent Form). It was for: Undergraduate, Graduate, I included the 1098-T with my documents (required).

Moved: Date: ___/___/___ from (city, State): _____ to (city, ST): _____. Spent \$ _____ on moving/storage & \$ _____ on travel/lodging. Moved 50 miles closer to work; Changed workplace/base; Temporary Assignment

I have a traditional IRA , and/or Roth – outside of work

Made Traditional IRA, or Roth contributions. For myself \$ _____, Spouse \$ _____

I have an HSA, I have a high deductible health insurance plan

I have an old 401k from a previous job and would like to know the benefits of rolling it over into an IRA.

I have over \$10,000 in a foreign bank account. If so, ask us for the FBAR worksheet (or download it from our website).

Bought a car/boat, RV, large purchase. The sales tax was \$ _____;

The tax deductible portion of my annual car registration amount (called ad valorem on the bill) is: \$ _____ (not deductible in IL or other states that use a flat tax)

Donated money to charity: total amount: \$ _____, I pay \$ _____ each year for my safe deposit box,

Donated items to charity: estimated value: \$ _____, If over \$500 worth of items donated we'll need to know: Which Charity? _____, What kind of items? Clothing, Furniture, Household items, other: _____.

Spent \$ _____ out of pocket on medical - Include long term care premiums paid after tax (not pre-tax).

- Health insurance premiums I paid out of pocket (not through my job) \$ _____.
- Drove _____ miles doing volunteer work for a 501c3 charity. Drove _____ miles for doctor visits.
- Sent in quarterly Estimated Taxes: Dates & amounts: _____
- Deposit my refund directly into same account as last year, ending in these 4 digits _____. If new account:
Bank Name _____, Routing # (9 digits) _____, Account# _____

Remember to send/bring these items (if they apply to you):

- ◆ W-2(s) from your employer(s),
- ◆ 1099-MISC forms for self-employment income,
- ◆ 1099-INT (interest) and 1099-DIV (dividends),
- ◆ 1098 Mortgage Interest Statement,
- ◆ Property Tax bill (if not escrowed in mortgage),
- ◆ 1098-E Student Loan Interest Statement
- ◆ 1098-T College or Graduate School Statement
- ◆ 1099-SSA form showing Social Security received,
- ◆ 1099-B forms for brokerage trades: stocks/bonds,
- ◆ K-1 forms from partnership, Corp., or trust,
- ◆ 1095-A for health insurance bought on exchange
- ◆ 1099 SSA if you have HSA Health Savings Account
- ◆ Bought a new house: HUD statement (3 pages)

Did anything else happen this year that might influence your taxes? (continue on back or separate sheet)
These might include – received or paid alimony, carrying capital losses from last year, etc.:

I would like to receive a printed copy of my tax return and supporting documents by snail-mail for \$10 extra. (We are now paperless and our secure online portal will allow you 24/7 access to a digital version of your tax return(s). You will be able to pay your invoice, e-sign your e-file authorizations and download your returns at your convenience).

Please read and sign below: I am paying for the time and expertise of a professional tax preparer. I understand that I will be charged for the preparation of this return before I am told the amount of my refund or liability to the IRS (Sorry to sound so hardcore! In 2015 we did hours of work for new clients, and if their refund amount matched online software they wouldn't pay, so we had to add this threatening-sounding clause, but you're already a client and you know we're super nice!).

I understand that my return will be prepared based on the information I provide, and my documents will not be returned to me by mail unless I chose the snail-mail option above. My documents will be available to me in digital form. I am solely responsible for the accuracy of the data that I provide.

If I am uploading or emailing documents digitally I am scanning them all together into 1 or 2 PDFs (not a bunch of single documents – because I love my tax preparers and want them to stay sane and ulcer-free!).

Signature: _____ **(REQUIRED)**

Upload to secure portal (link on website: AirlineTaxes.com or RoseTaxAndFinancial.com).

Or send to: Rose Tax & Financial, 605 Edwards Avenue, West Dundee, IL 60118 Phone: (847) 715-8930

Flight Crew email: airlinetaxes@gmail.com , Email for everyone else: jenyarose@gmail.com Fax: (815)301-2671

Dependent Form: Please fill this out **completely** if you have dependent(s) that are under 24 years old (or are disabled and any age). Fill out 1 sheet per child (photocopy this if you have more than one child to claim).

Your child is considered your dependent if they are younger than 19 by the end of the tax year or, if they are in college, and younger than 24. They must not be claimed by someone else and if they are filing their own return they need to mark on it that they are the “dependent of someone” and not eligible to claim their exemption.

Dependent # _____ (It’s easiest to designate the oldest as dependent #1):

Name	Social Security #	Date of Birth	Relationship to you	# of months in your home

YES/NO: I have the right to claim dependent #1 and haven’t released my claim to anyone. (If “No” don’t continue form.)

YES/NO: This dependent lived in my home for 183 days or more (if in college he/she spent vacation at home; if there is another parent the dependent spent more time at my home than the other parent’s home)

YES/NO: I was a non-resident alien for part of the year. YES/NO: Part of my salary goes into a dependent care account.

YES/NO: My main home (and that of my spouse if filing together) was in the US for more than half of the year.

YES/NO: I (or my spouse) could be claimed as a child or dependent on someone else’s federal tax return.

YES/NO: The child on this form is married. YES/NO: He/she lived with me in the US for over half the year.

YES/NO: The IRS has previously disallowed my child credit or earned income credit. Which year(s)? _____

If I had to I could provide for the IRS: social security card, birth certificate, a piece of mail the child has received at my address, school records, medical records, a health care provider statement (check all that apply)

YES/NO: Another person could qualify to claim this child.

YES/NO: There is an active Form 8332 Release of Claim to exemption by the custodial parent.

YES/NO: This child is not my son or daughter. If yes, why is the parent not claiming them: _____

This child was under the age of 12 by 12/31 of the tax year and I paid for non-educational care (camp, after-school program, pre-school): Spent \$ _____ on childcare for this child while I was working/school full-time:

Provider: _____; SSN/EIN: _____

Address _____

This child is a student in K-12. He/she is in grade: _____,

the name of the school: _____, in this city: _____

I am an IL resident that spent money on K-12 education-related items for this child. Spent \$ _____ on tuition, registration fees, lab fees, musical instrument rental from the school.

This child is in college: Spent \$ _____ this year on higher education. \$ _____ for the actual classes (Include the 1098-T from the college with your documents), and \$ _____ for supplies including books, software, etc. The education was: Undergraduate, Graduate. I am planning on taking the American Opportunity Credit (the largest undergraduate credit) and realize I can only take it for 4 years. I have already taken the credit for _____ years (it’s on or near line 50 and 68 of your previous tax returns). If you took the credit with us disregard this part of the question.

If you’re filing Head of Household (single person -or lived separate last 6 months of year - with children) please answer:

I am: not married, married, but lived apart from my spouse for the last 6 months of the year,

I could provide the IRS with these items if asked: divorce decree, separate maintenance or separation agreement, property tax bill, lease agreement, utility bills, grocery receipts, other household bills.

YES/NO: I receive non-taxable support: food stamps, housing assistance, childcare assistance