

# J-tax-S Inc.

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## Client Worksheet

### Personal Information:

Taxpayer Name: \_\_\_\_\_

Spouse Name: \_\_\_\_\_

SS#: \_\_\_\_\_

SS#: \_\_\_\_\_

DOB: \_\_\_\_\_

DOB: \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Are either legally blind or disabled? \_\_\_\_\_ (must provide Doctor Statement)

Taxpayer Email: \_\_\_\_\_

Spouse Email: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Best way to contact you? (Email, Cell Phone, Home Phone, Text)? \_\_\_\_\_

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

List the names and relationship of anyone other than taxpayer and spouse who lived in your home last year if not a dependent on the other sheet.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did you provide financial assistance to anyone else?

YES  NO

Have you ever been notified by the IRS that the Earned Income Tax Credit or Child Tax Credit claimed on a return filed by you was denied or reduced?  YES  NO

At any time during 2020 did you receive, sell, exchange, or otherwise acquire any financial interest in any virtual currency? (Cryptocurrency, Bitcoin, etc.)  YES  NO

Do you have property, assets or financial interest (stake) in anything outside of the U.S.?  YES  NO

Did you receive a COVID19 Stimulus Check?  YES  NO

If so, How much did you receive for 1<sup>st</sup> Stimulus: \_\_\_\_\_

How much did you receive for 2<sup>st</sup> Stimulus: \_\_\_\_\_

Do you still have Form 1444 or Bank Statement to show payment amounts?  YES  NO

Did you make any charitable contributions or goods? (even if not itemizing deductions)  YES  NO

*If yes, you will need receipts to verify amounts*

Did you move last year?  YES  NO Was move job related?  YES  NO

If yes, please provide previous address, school district, municipality, and date of move \_\_\_\_\_

Do you own your home and pay Real Estate Taxes? \_\_\_\_\_ Mortgage Interest? \_\_\_\_\_

Do you owe a re-payment for the First Time Homeowner Credit?

YES  NO

If you got divorced in 2020, was the divorce final before the end of the tax year (12/31/2020)?

YES  NO

Date Divorce was final? \_\_\_\_\_

Did you receive or pay alimony?

YES  NO

When did Alimony start? \_\_\_\_\_

Do you have any out-of-pocket job expenses?

YES  NO

Did you pay any student loan interest?

YES  NO

Did you receive any of the following?

- Jury Duty income
- Gambling/lottery winnings
- Tips not reported on W-2
- Disability income
- Bonuses
- Commissions and fees
- Workers Comp
- Prizes

Estimated Tax payments made (Dates and Amounts paid)

Federal	PA	Local
_____	_____	_____
_____	_____	_____
_____	_____	_____

Did you take any money from an HSA Account?  YES  NO

If so, was it all used for medical expenses?  YES  NO

Did you have any long term care expenses?  YES  NO

Did you receive any payments from Insurance Company for long term care?

Did you take out money from Retirement Accounts (IRA, 401K, etc.) due to COVID?  YES  NO

Did you contribute any money to an IRA in 2020 or plan to do so before April 15, 2021?

Taxpayer:    Traditional \$ \_\_\_\_\_                      Spouse:        Traditional \$ \_\_\_\_\_  
                   Roth        \$ \_\_\_\_\_    Roth            \$ \_\_\_\_\_

**If you would like your refund direct deposited, please provide**

**Bank Name:** \_\_\_\_\_

**Routing Number:** \_\_\_\_\_

**Bank Account Number:** \_\_\_\_\_

By signing below, I verify that the above information is true and correct.

\_\_\_\_\_  
Taxpayer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse Signature

\_\_\_\_\_  
Date