

CONWAY CPAs LLC

ACCOUNTANTS & ADVISORS

www.conwaycpas.com

2021 INDIVIDUAL TAXPAYER INFORMATION SHEET

Taxpayer: _____ Date of Birth: _____ SS# _____
Driver License #: _____ State: _____ Issued: _____ Exp Date: _____
Preferred Email Address: _____ Preferred Phone #: _____
Spouse (if applicable): _____ Date of Birth: _____ SS# _____
Driver License #: _____ State: _____ Issued: _____ Exp Date: _____
Preferred Email Address: _____ Preferred Phone #: _____

Address: _____ City: _____ State: _____ Zip: _____
Resident State: _____ Did you move during 2020? _____ Marital Status as 12/31/2020: _____
Were you divorced/separated during 2020? Yes No Were there any deaths in the family? Yes No
Have you received any notices from the IRS or state department within the past year? Yes No

DEPENDENT INFORMATION*

Full Legal Name	Date of Birth	Social Security Number

**If your dependent is filing their own tax return for 2020, make CERTAIN they select the box allowing someone else to claim them on their tax return. If this box is not selected, YOUR tax return may be REJECTED.*

INCOME TAX REFUNDS

If you are due a refund, would you like it directly deposited into your bank account? Yes No
We will need a voided check to ensure accuracy, please include with your tax documents.

STIMULUS CHECKS

Did you receive the first round of Stimulus money? Yes No Amount Received: \$ _____
Did you receive the second round of Stimulus money? Yes No Amount Received: \$ _____

Important Questions: Please answer with Yes or No in this section. If you are not sure, please put a “?” mark.

- ___ Did you pay or receive alimony in 2020? If yes amount paid: _____ or amount received _____
- ___ Did you have health insurance for you, your spouse, and all dependents the entire year of 2020?
- ___ Did you purchase an energy efficient vehicle or make any energy-efficient improvements to your home?
- ___ Do you own or have financial interest in a foreign bank or financial account?
- ___ Were any children born or adopted in 2020?
- ___ Were any children attending college or private high school in 2020?
- ___ Did you pay for any dependent care so you could work or go to school?

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Greenville, TX 75402
Office (903) 455-9898
Fax (903) 454-3181

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Rockwall, TX 75087
Office (972) 771-1065
Fax (972) 771-1022

Important Questions: Please answer with Yes or No in this section. If you are not sure, please put a “?” mark.

___ Did you, or will you, contribute any money to an IRA for 2020? Traditional or Roth (T or R) _____

___ Did you roll any amounts from a retirement account in 2020?

___ Did you make any charitable contributions in 2020?

___ Do you own a business or interest in a partnership, corporation, LLC, farming or other ventures?

Name of the company: _____

ADJUSTMENTS INFORMATION

Amount of Educator Expenses: \$ _____ Health Savings Account deduction: \$ _____

Self-Employed SEP, SIMPLE, and Qualified Plan contributions: \$ _____

Self-Employed Health Insurance Premiums paid in 2020: \$ _____

IRA Deduction for Traditional IRA's: \$ _____ Student Loan Interest Deduction: \$ _____

ESTIMATED TAX PAYMENTS MADE FOR 2020

Please list ALL ESTIMATED and ANY ADDITIONAL federal tax payments made for 2020 tax year.

List the DATE and AMOUNT paid. Please add any additional payments in the comments section.

IRS Payment Date	Amount	Comments	State Agency Payment Date	Amount	Comments

TAXPAYER RESPONSIBILITIES

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you must contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases we may ask to review your documentation.
- You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the return CAREFULLY before signing to make sure the information is correct.
- Fees MUST be paid before your tax return is delivered to you or filed on your behalf. If you terminate the engagement before completion, you agree to pay a fee for work completed. A retainer is required for preparation of late returns.
- You should keep a copy of your return for 7 years
- If you prefer a full tax organizer printed from the tax software, please call Karla at the Greenville office, or Jamin at the Rockwall office. Either of them would be glad to send you a full organizer to assist you.

Signatures: By signing below you acknowledge that you have read, understand, and accept your obligations and responsibilities. This includes the information you have provided on this organizer and the information provided on your Individual Tax Engagement Letter.

Taxpayer Signature

Date

Spouse Signature

Date