Sikora Blehm

2022 Tax Year DROP-OFF CHECKLIST

Drop Off Date:	
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Name:		Spous	se Name:			
Phone Number:	_	Spou	Spouse Phone Number:			
Email:		Spous	e Email:			
Preferred Contact Method:	TextCallE	mail				
Preferred Tax Professional:	First Available	Specific Profession	onal:			
When would you like for you	ur tax return to be	ready? ASAP	Within 1 week	No rush		
Tax Return Pick Up & Sign Method: Online In-Office: ReceptionistAppointment						
***Amount received for the Advance Child Tax Credit Payments (total):						
***Amount of cash/check/credit donations to church or charity during 2022:						
CLIENT INFORMATION						
Previous clients: Any changes from last year? YN(if yes, please enter them below)						
Physical Address:Date Moved:						
City, State, Zip:					<u> </u>	
Marital Status: Single M	arried Widowe	ed				
Date of Birth: Spouse Date of Birth:						
SSN# or ITIN:	N# or ITIN: Spouse SSN# or ITIN:					
Can you be claimed as a depe	endent by someone	else? Y N	<u> </u>			
DEPENDENTS* (or person living	ng in your household that	you are eligible to clai	m)			
Name	Relationship	Date of Birth	SSN# or ITIN	# of Months Lived With You	Full-Time Student?	
* If any dependents listed did not	live at the primary tax	paver's address the	e entire vear please o	liscuss this with your ta	ax	
* If any dependents listed did not live at the primary taxpayer's address the entire year, please discuss this with your tax professional. This is critical to help us help you accurately report your residency and dependency to the taxing authorities.						
Refund Method Preferred: Check mailed to home Direct Deposit						
If Direct Deposit selected, enter	er current account ir	nformation:				
Routing Number:	Acco	unt Number:		Checking Sav	vinas	

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Income: (Check all that apply & include documents)	Expenses: (Check all that apply & include documents)			
Employer (W-2) Self-Employment* Unemployment (1099-G) Social Security (SSA-1099) Retirement plan distribution* (1099-R) Interest (1099-Int) Dividends (1099-Div) Stock or Mutual Fund sale (1099-B) Rental Property* Schedule K-1 1099-MISC	Self-Employment (or 1099-NEC)*Un-reimbursed by employerEducationMedical/Dental CareUnion DuesRental Property*			
Credits & Deductions: (Check all that apply & include documents)	Health Insurance: (Check all that apply & include documents)			
Donate cash or goods to a charity?Pay Student Loan interest?Pay Child/Dependent Care expense?Have a Mortgage Payment (1098)Make an IRA Contribution?Make a major taxable purchase?Pay Property Taxes?Make an HSA Contribution?	Were you or any members of your household: Covered by a qualified employer, private or other health insurance plan? Enrolled in a health insurance plan through Government marketplace/Healthcare.gov?			
Miscellaneous: (Check all that apply & include documents) Sell a home? Pay/Receive alimony? Adopt a child? Suffer catastrophic loss? Have gambling winnings/losses? Change in marital status? Have major home improvements?	* If this applies, we recommend you talk with your Tax Professional to discuss your tax situation before your tax return is prepared.			
TELL US ABOUT YOUR YEAR: We want to find as many credits & deductions that we can. Here are some examples Bought property. Installed energy efficient windows. Had a child. Also include any details on address changes and dates moved, new children, death in the family etc.				