

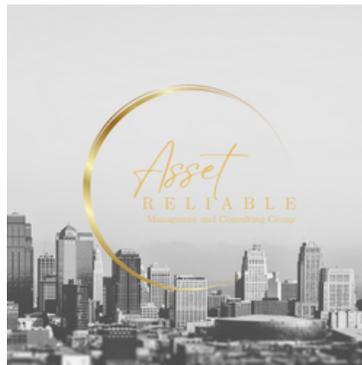
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# Tax Preparation

GUIDE

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Asset Reliable  
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210-383-8072  
[assetreliablemcg@gmail.com](mailto:assetreliablemcg@gmail.com)

# CLIENT INTAKE *form*

Please complete this form completely and legibly

## TAXPAYER

Name:	DOB:	Date:
Address:		
City:	State:	Zip:
Email:		
Occupation:	SSN:	
Phone:	Permission to call: <input type="radio"/> Yes <input type="radio"/> No	

Returning Client  New Client Referred by: \_\_\_\_\_

Filing Status:  Single  Head of Household  Married Filing Separate  
 Married Filing Joint  Qualifying Widower

Full time Student:  Yes  No

Disabled:  Yes  No

Legally Blind:  Yes  No

## SPOUSE

Name:	DOB:	
Address:		
City:	State:	Zip:
Email:		
Occupation:	SSN:	
Phone:	Permission to call: <input type="radio"/> Yes <input type="radio"/> No	

Full time Student:  Yes  No

Disabled:  Yes  No

Legally Blind:  Yes  No

Taxpayer Dependent:  Yes  No

# PERSONAL *information*

Please complete this form completely and legibly

## DEPENDENTS

Name:	DOB:	SSN:
Relationship:	Disabled: <input type="radio"/> Yes <input type="radio"/> No	
Name:	DOB:	SSN:
Relationship:	Disabled: <input type="radio"/> Yes <input type="radio"/> No	
Name:	DOB:	SSN:
Relationship:	Disabled: <input type="radio"/> Yes <input type="radio"/> No	
Name:	DOB:	SSN:
Relationship:	Disabled: <input type="radio"/> Yes <input type="radio"/> No	
Name:	DOB:	SSN:
Relationship:	Disabled: <input type="radio"/> Yes <input type="radio"/> No	
Name:	DOB:	SSN:
Relationship:	Disabled: <input type="radio"/> Yes <input type="radio"/> No	

## HEALTH INSURANCE COVERAGE

Does you, your spouse, and your dependents have health insurance within 12 months last year?

If yes, who covers for it?

	Coverage	Employer	Spouse Insurance	Exchange/ Marketplace	Direct with Insurer	Medicare	Medicaid
Taxpayer	Y N						
Spouse	Y N						
Dependent 1	Y N						
Dependent 2	Y N						
Dependent 3	Y N						
Dependent 4	Y N						
Dependent 5	Y N						
Dependent 6	Y N						

# TAX PREP *checklist*

## INCOME (select/upload all that apply)

- W-2 | Wage and Tax Statement
- 1099-G | Unemployment
- 1099-R | Retirement
- SSA-1099, RRB-1099 | Social Security/RRB
- 1099-INT, 1099-DIV, etc. | Interest/Dividend
- 1099-B | Proceeds from Broker and Barter Exchange Transactions
- Royalties
- Cryptocurrency/NFT
- 1099-G | State Income Tax Refund
- K-1 | Partner's Share of Income, Deductions, Credits, etc.
- W-2G | Lottery/Casino Winnings
- 1099-SA | Distributions from an HSA, Archer MSA, or Medicare Advantage
- Other 1099's

## Self Employed (select/upload all that apply)

- 1099s
- List of Assets and Equipment
- Home Office Information
- Tax ID
- Mileage Logs
- Business Income and Expenses
- Asset Purchases
- Estimated Tax Payments
- Insurance Premiums & Expenses

## Rental Properties (select/upload all that apply)

- Income Records
- 1099s
- Mileage and Receipts for Upgrades and Repairs
- Expense Records
- Rental Property Information (cost/date purchased, etc.)

## Credits/Deductions (select/upload all that apply)

- 1098 | Home Mortgage Interest
- Charitable Donations
- 1095-A | Health Insurance Marketplace
- 1098-T | Tuition Expense
- Teacher non reimbursed expenses
- 5498 | IRA Contributions
- Real Estate Taxes
- Medical Expenses
- Childcare Expenses
- 1098-E | Student Loan Interest
- State Sales Tax for Large Purchases
- Energy Efficient Purchases

## Other (select/upload all that apply)

- Copy of Last Year's Tax Return
- Loan Statement
- Bank Accounts \ Routing Numbers
- Rental Property Information (cost/date purchased, etc.)