

Taxpayer Name _____ SSN _____ DOB _____
Occupation _____ Phone # _____
Driver's License # _____ State _____ Issue Date _____ Exp Date _____

Spouse Name _____ SSN _____ DOB _____
Occupation _____ Contact # _____
Driver's License # _____ State _____ Issue Date _____ Exp Date _____

Address
Street _____ City _____
State _____ Zip _____ Email _____

Filing Status Single Married Married-filing Separately Head of Household

Did you receive Health Insurance through the Health Insurance Marketplace?
 Yes (must provide IRS Form 1095-A) No

**If incorrectly answered, this will result in a delay and changes to your return by the IRS.*

At anytime during the year, did you receive, sell, send, or exchange or otherwise acquire financial interest in virtual currency (e.g. Bitcoin, Dogecoin, Litecoin, etc.)?
 Yes No

How would you like to be contacted once your tax return is complete?

Text Phone Email

Direct Deposit - If you wish to have your refund direct deposited complete the following (if applicable).

Name of Financial Institution _____ Checking Savings
Routing # _____ Account # _____

Signature _____ Date _____

By signing above you believe to the best of your knowledge that all information is true and correct.

Dependents:

Name _____ SSN _____ DOB _____

of months lived with you _____ Relationship _____ Income _____

Can anyone else claim this dependent? _____ Was this dependent a student? _____

Name _____ SSN _____ DOB _____

of months lived with you _____ Relationship _____ Income _____

Can anyone else claim this dependent? _____ Was this dependent a student? _____

Name _____ SSN _____ DOB _____

of months lived with you _____ Relationship _____ Income _____

Can anyone else claim this dependent? _____ Was this dependent a student? _____

Name _____ SSN _____ DOB _____

of months lived with you _____ Relationship _____ Income _____

Can anyone else claim this dependent? _____ Was this dependent a student? _____

THIS SECTION FOR BUSINESS OWNERS ONLY

Do we need to file a Tennessee Business/Business Licenses renewal for you? Yes No

Do we need to file a Tennessee Franchise and Excise Return for you? Yes No

Are you required to file form 1099s? Yes No

Did you file the required form 1099s? Yes No

By signing below, I attest I can provide documentation as proof of dependent status if requested by the IRS.

Signature _____ Date _____