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PLAZATAX ADVISORS
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2020 Tax Year DROP-OFF CHECKLIST Drop Off Date:_____

Name:_____ Spouse Name:_____

Phone Number:_____ Spouse Phone Number:_____

Email:_____ Spouse Email:_____

Preferred Contact Method: Text ___ Call ___ Email ___

When would you like for your tax return to be ready? Within 48 hours ___ Within 1 week ___ No rush ___

Tax Return Pick Up & Sign Method: In-Office___ Online* ___ (*please provide email address)

Do you have a preferred Tax Professional? (if yes, please provide name):_____

*****Amount received for the Economic Stimulus Payments: 1st_____ 2nd:_____**

*****Amount of cash/check/credit donations to church or charity during 2020: _____**

CLIENT INFORMATION

Previous clients: Any changes from last year? Y___ N___ (if yes, please enter them below)

Physical Address:_____ Date Moved:_____

City, State, Zip:_____

Marital Status: Single ___ Married ___ Widowed ___

Date of Birth: _____ Spouse Date of Birth:_____

SSN# or ITIN:_____ Spouse SSN# or ITIN:_____

Can you be claimed as a dependent by someone else? Y___ N___

DEPENDENTS* **(**or person living in your household)

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 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___ Debit Card* ___

If Direct Deposit selected, enter current account information**:**

Routing Number:_____ Account Number:_____ Checking___ Savings___

Are you interested in the Preparer Fees being taken out of the refund, if applicable? Y*___ N___
*additional $39 fee may apply

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Income:
(Check all that apply & include documents)

___Employer (W-2)
___Self-Employment (or 1099-NEC)*
___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*

Expenses:
(Check all that apply & include documents)

___Self-Employment*
___Un-reimbursed by employer
___Education
___Medical/Dental Care
___Union Dues
___Rental Property*

Credits & Deductions:
(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?

Health Insurance:
(Check all that apply & include documents)

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, etc.

_____
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