

J-tax-S Inc.

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Client Worksheet

Personal Information:

Taxpayer Name: _____

Spouse Name: _____

SS#: _____

SS#: _____

DOB: _____

DOB: _____

Occupation: _____

Occupation: _____

Taxpayer Email: _____

Spouse Email: _____

Cell Phone: _____

Cell Phone: _____

Home Phone: _____

Best way to contact you? (Email, Cell Phone, Home Phone, Text)? _____

Address: _____

Did you move in 2023? YES NO Was move job related? YES NO

If yes, please provide previous address, school district, municipality, and date of move _____

Are either legally blind or disabled? _____ (Must provide Doctor Statement)

Did you provide financial assistance to anyone else?

YES NO

List the names and relationship of anyone other than taxpayer, spouse or dependent who lived in your home.

Have you ever been notified by the IRS that the Earned Income Tax Credit or Other credits claimed on a return filed by you was denied or reduced? YES NO

Did you make any charitable contributions or goods? YES NO

Do you own your home and pay Real Estate Taxes? _____ Mortgage Interest? _____

Do you owe a re-payment for the First Time Homeowner Credit? YES NO

If you got divorced was the divorce final before the end of the tax year (12/31/2023)?

YES NO

Did you receive or pay alimony?

YES NO

When did Alimony start? _____

Do you have any out-of-pocket job expenses? Educator K-12 Exp?

YES, NO Amt _____

Did you pay any student loan interest?

YES NO

Did you receive any of the following?

Jury Duty income Gambling/lottery winnings/Prizes Tips not reported on W-2

Estimated Tax payments made (Dates and Amounts paid) – **DO NOT** include W2 or 1099R payments

Federal	PA	Local
_____	_____	_____
_____	_____	_____
_____	_____	_____

Did you take any money from an HSA Account? YES NO

If so, was it all used for medical expenses? YES NO

Did you have any long term care expenses? YES NO

Did you pay or receive any payments from Insurance Company for long term care? YES NO

Did you contribute any money to an IRA in 2023 or plan to do so before April 15, 2024?

Taxpayer: Traditional \$ _____ Spouse: Traditional \$ _____
 Roth \$ _____ Roth \$ _____

Did you give any gifts and contributions to 529 Plan or ABLE accts that total more than \$10,000 to any one person in 2023? YES NO

Did you receive income from any other source other than from a gift? YES NO

Do you have Marketplace Insurance? YES NO

Do you live in a Federal Disaster Area? YES NO

Did you do any home improvements - Windows, Doors, Insulation, Furnace, Central Air, Hot Water Heater, Solar, or Solar Roof Tiles? YES NO

Did you purchase an electric vehicle in 2024? YES NO

**If you would like your refund direct deposited to your account or
Would like to pay your balance due from your account, please provide:**

Bank Name: _____ Checking or savings? _____

Routing Number: _____

Bank Account Number: _____

Date you would like your payments made – Federal _____ State _____

*If account information is the same as prior year, please provide bank name and last 4 digits of account # above, for verification purposes.

Do you have property, accounts, homes, inheritance, other possessions, assets or financial interest (stake) in anything outside of the U.S.? YES NO

At any time during 2023 did you receive, sell, exchange, mine for, or otherwise acquire any financial interest in any virtual currency? (Cryptocurrency, Bitcoin, etc.) YES NO

Did you buy, sell or exchange any Virtual Currency? YES NO

Did you use Virtual Currency to buy anything? YES NO

Did you do any mining, staking, or validating Virtual Currency? YES NO

Did you receive any Airdrops or forks from Virtual Currency? YES NO

By signing below, I verify that all information provided including the information on Virtual Currency and Foreign Interests on this form is true and correct. Your signature below releases liability from J-tax-S for incorrect information provided in regards to these matters.

Taxpayer Signature

Date

Spouse Signature

Date