

# GOOSBY TAX SERVICE, LLC

1400 Mercantile Lane, Suite 174  
Largo, Maryland 20774  
(301) 386-2725 Office  
(301) 386-0057 Fax

## CLIENT INFORMATION FORM (Please complete all information below that Apply)

TODAY'S DATE: \_\_\_\_\_ PLEASE INDICATE TAX YEAR: \_\_\_\_\_

AMENDED YEAR: \_\_\_\_\_

NEW CLIENT: \_\_\_\_\_ RETURNING CLIENTS: \_\_\_\_\_

✓ Check only one of the following:

Single     Married Filing Jointly \*     Head of the House     Qualifying Widow  
 Married Filing Separate\*

Mr./Mrs./Ms./Miss (please circle one)

PRIMARY NAME: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

SECONDARY NAME: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

\*(Please provide spouse information – If filing jointly or married filing separate)

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

YOUR HOME #: \_\_\_\_\_ YOUR WK #: \_\_\_\_\_ YOUR CELL #: \_\_\_\_\_

SPOUSE HOME #: \_\_\_\_\_ SPOUSE WK #: \_\_\_\_\_ SPOUSE Cell #: \_\_\_\_\_

YOUR OCCUPATION: \_\_\_\_\_ SPOUSE OCCUPATION: \_\_\_\_\_

REFERRED BY: _____	EMAIL: _____
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DEPENDENTS NAME	D.O.B	SOCIAL SECURITY NUMBER	RELATIONSHIP

Please indicate your method of payment to Mr. Goosby below:

CASH: \_\_\_\_\_ VISA/DEBIT CARD: \_\_\_\_\_ CHECK: \_\_\_\_\_ FEE'S WITHHELD: \_\_\_\_\_

Please indicate how you wish to receive your refund below:

CHECK BY MAIL: \_\_\_\_\_ BANK CARD: \_\_\_\_\_ BANK ACCOUNT: \_\_\_\_\_

PLEASE SUBMIT

PHOTO ID  
BANK ACCOUNT INFORMATION  
DRIVER LICENSE \*BIRTH CERTIFICATE (children) SSN Card (children)

Note: This Information Must Be Accurate!

Revised (February 2020)

## PREPARATION CHECK LIST FOR TAX RETURN

LIST OF OF DOCUMENTS	✓ CHECK LIST COLUMN
Social Security Card(s)	
Driver's License(s)	
Dependents' Social Security Numbers & Dates of Birth	
Last Year's Federal and State Tax Returns	
Wage Statements - Form W-2	
Pension or Retirement Income - Form 1099-R	
Interest and Dividend Income - Form 1099-INT/Form 1099-DIV	
State Income Tax Refund Amount - Form 1099-G	
Social Security Income - Form SSA-1099	
Unemployment Income - Form 1099-G	
Commissions Received/Paid	
Information on sales of Stocks or Bonds - Form 1099-B	
Self-Employed Business/Farm Income & Expenses - Form 1099-MISC	
Merchant Card and Third Party Network Payments 1099-K	
Lottery or Gambling Winnings - Form W-2G	
Lottery or Gambling Losses	
Income and Expenses From Rentals	
Income from Partnerships, S Corporations, Trusts, and Estates - Schedule K-1	
IRA Contributions	
Alimony Paid or Received	
Child Care Expenses & Provider Information	
Medical, Eye Care, and Dental Expenses	
Cash and Non-cash Charitable Donations	
Record of Purchase or Sale of Residence	
Mortgage or Home Equity Loan Interest Paid - Form 1098	
Real Estate and Personal Property Taxes Paid	
State or Local Sales Taxes Paid	
Un-reimbursed Employment-Related Expenses	
Job-Related Educational Expenses	
Educator Expenses	
Tuition and Education Fees - Form 1098-T	
Student Loan Interest - Form 1098-E	
Casualty or Theft Losses	
Estimated Taxes	
Foreign Taxes Paid	
<b>Proof of Health Insurance 1095A, B or C</b>	
<b>1<sup>st</sup> Stimulus (Need exact Amount)</b>	\$
<b>2<sup>nd</sup> Stimulus (Need Exact Amount)</b>	\$
Were you a Member of US Army Forces in 2020(Yes or No)	