



# Client Intake Form - 2023 Tax Year

To be prepared by: Bob \_\_\_ Jason \_\_\_ Joshua \_\_\_ Not Sure \_\_\_ Date: \_\_\_\_\_

**New Client**-In order to protect your information please return this completed form to a member of the MA Team, upload it to SmartVault, our secure online client portal, or mail to: Management Accounting, 18 Middle St Brunswick, ME 04011 How did you hear about Management Accounting? \_\_\_\_\_

**Returning Client** -SSN fields can be left blank. Completed form without SSNs can be returned to a member of the MA Team, uploaded to our secure online client portal, emailed to office@mainebcaccounters.com or mailed to the address listed above. \*Please be sure to add DOB and SS# for any dependent born during the current tax year.

<b>Tax payer name: (First MI Last) *Person listed first on prior year tax return</b>		<b>Social Security Number:</b>	<b>Date of Birth:</b>
Home Phone:		Cell:	
Address:		City:	State: Zip:
Taxpayer's Email:		Occupation:	

**Filing Status:**

Single  Married, Filing Jointly  Married, Filing Separately  Head of Household  Qualifying Surviving spouse  UNSURE

<b>Spouse's name:(First MI Last)</b>	<b>Spouse's Social Security Number:</b>	<b>Spouse's Date of Birth:</b>
Home Phone:		Cell:
Spouse's Email:		Spouse's Occupation:

-Were you divorced or separated in 2023?  NO  Yes **Date of Divorce:** \_\_\_\_\_

-Were there any deaths in your immediate family?  No  Yes, Name: \_\_\_\_\_ Date: \_\_\_\_\_

**TOTAL DEPENDENT CHILDREN:** \_\_\_\_\_ For 4 or more Dependents please use notes field to provide their information.

Child's Full Name (First Middle Last)	Date of Birth	Social Security Number	# of Months Lived in home in 2023	Relationship to Tax Payer	2023 529 Plan contribution amount	Unearned Income of more than \$1,150? (Y/N)

\*\*If a Dependant filed a return in 2023, please provide a copy of the return\*

-Do any of your children have a disability?  No  Yes \_\_\_\_\_

-Is it anticipated that a different taxpayer will seek to claim a child listed above as a Dependant for tax year 2023?  No  Yes \_\_\_\_\_

-Did you pay for child/dependent care in Tax Year 2023?  No  Yes If, yes please provide details below

Provider's Name	Tax ID	ADDRESS	Amount Paid	Child care for

\*\*Please use NOTES section for additional dependent care information

**BANKING INFORMATION: Used for Direct Deposit of Refund**

<b>Bank Name:</b>	<b>Routing Number</b>	<b>Account Number</b>	<b>Please specify, Checking or Savings</b>

Check this box and add banking information below **ONLY** if you would like to have your tax liabilities automatically withdrawn from your bank account rather than submitting payment to the IRS or State entities via check or online payment. Otherwise, leave these fields blank.

<b>Bank Name:</b>	<b>Routing Number</b>	<b>Account Number</b>	<b>Please specify, Checking or Savings</b>

**-Have you made any estimated payments for the tax year being discussed?**      **Yes**    **No**

Estimated Tax Payments — Tax Year 2023				
<i>Installment</i>	<i>Date paid</i>	<i>Federal</i>	<i>Date paid</i>	<i>State</i>
First		\$		\$
Second		\$		\$
Third		\$		\$
Fourth		\$		\$
Amount applied from 2021 overpayment?		\$		\$
Total		\$		\$

**-Did you or your spouse contribute to an HSA, beyond your employer contributions?**    *Please provide details for those below*

**-Your 2023 HSA Contributions:**    *Amount contributed:* \_\_\_\_\_    *Amount you plan to contribute:* \_\_\_\_\_

**-Spouse's 2023 HSA Contributions:** *Amount contributed:* \_\_\_\_\_    *Amount spouse plans to contribute:* \_\_\_\_\_

**-Your 2023 ROTH IRA Contributions:** *Amount contributed:* \_\_\_\_\_    *Amount you plan to contribute:* \_\_\_\_\_

**-Spouse's 2023 Roth IRA Contributions:** *Amount contributed:* \_\_\_\_\_    *Amount spouse plans to contribute:* \_\_\_\_\_

**-Your 2023 Traditional IRA Contributions:** *Amount contributed:* \_\_\_\_\_    *Amount you plan to contribute:* \_\_\_\_\_

**-Spouse's 2023 traditional IRA Contributions:** *Amount contributed:* \_\_\_\_\_    *Amount spouse plans to contribute:* \_\_\_\_\_

**-At any time during 2023, did you or your spouse (a) receive (as a reward, award, or payment for property or services) or (b) sell, exchange, gift, or otherwise dispose of a digital asset or a financial interest in a digital asset?**    **NO**    **YES**    **BOTH**

**-Did you or your spouse own a business in the tax year being discussed?**      **NO**    **YES**    **BOTH**

*Provide details below. For additional businesses add details to the NOTES section of this document*

**Business Name:** \_\_\_\_\_

**Owned by:**    *Primary Tax Payer, ownership %* \_\_\_\_\_    *Spouse, ownership %* \_\_\_\_\_

**Who is responsible for bookkeeping for this business?**

**Name:** \_\_\_\_\_    **Email:** \_\_\_\_\_

**What type of return does the business file?** 1040 (Schedule C/Single Member LLC)  1065  1120S  1120  Unsure

**Has a return been filed for the business for the Tax Year 2023?**     **YES**     **NO**    *Please provide K-1s from completed 2023 Tax Return*

**Who is the preparer for the business tax return?**

**Name:** \_\_\_\_\_    **Email:** \_\_\_\_\_

-If you own a Schedule C, Single Member LLC, or Farm Business please request our Schedule C Template. If you own Rental Properties, please request our Schedule E Template to provide financial details for 2023, or provide your access to your Quickbooks reports.

