



Part 1: Your Personal Information (If you are filing a joint return, enter your names in the same order as last year's return)

TAXPAYER NAME AS IT APPEARS ON SS CARD:	SPOUSE NAME AS IT APPEARS ON SS CARD:
Social Security Number:	Social Security Number:
Date of Birth:	Date of Birth:
Occupation:	Occupation:
Contact Number:	Contact Number:
Contact Email:	Contact Email:
Are you a U.S. Citizen? <input type="checkbox"/> YES <input type="checkbox"/> No	Are you a U.S. Citizen? <input type="checkbox"/> YES <input type="checkbox"/> No
Can anyone claim you as a dependent? : <input type="checkbox"/> YES <input type="checkbox"/> No	Can anyone claim you as a dependent? : <input type="checkbox"/> YES <input type="checkbox"/> No

(Only enter if different than Street)

Street Address:	Mailing Address:
City:	City:
State: Zip	State: Zip

Part 2: Please list:

Everyone: That lived with you last year (other than spouse).

Anyone: That did not live with you but that you supported more than 50%.

Name: (first, last) do not enter spouse.	Date of Birth (mm/dd/yy)	Social Security Number:	Relationship (example: child, parent, none):	Number of months lived in your home last year.	Full Time Student: Y/N	Totally and Permanently Disabled: Y/N

Part 3: Income – Last Year, Did You (or Your Spouse) Receive:

YES	NO	UNSURE	
			Wages or Salary (You should have received Form W-2 from each job held last year) If YES: How many jobs held: _____
			Income from Tips (such as waitressing/waitering or other service industries)
			Unemployment Compensation? (Form 1099G)
			Retirement income or payments from Pensions, Annuities, and or IRA? (Form 1099-R)
			Social Security or Railroad Retirement Benefits? (Forms SSA-1099, RRB-1099)
			Scholarships (You should have received (Form W-2 or Form 1098-T))
			Interest/Dividends from: checking/savings accounts, bonds, CDs, brokerage? (Forms 1099-INT, 1099-DIV)

Confidentiality Note: This letter and any attachments are confidential and may be protected by legal privilege. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of this mail or any attachment is prohibited. If you have received this mail in error, please notify us immediately by returning it to the sender and delete this copy from your system.

			Income (or loss) from the sale or exchange of Stocks, Bonds, Virtual Currency or Real Estate? (including your home) (Forms 1099-S,1099-B)
			Alimony income or separate maintenance payments?
			Self-Employment income? (Form 1099-MISC, 1099-NEC)
			Income (or loss) from Rental Property?
			Cash/check/virtual currency payments, or other property or services for any work performed not reported on Forms W-2 or 1099?
			Other income? (gambling, lottery, prizes, awards, jury duty, virtual currency, Sch K-1, royalties, foreign income, etc.)

Part 4: Expenses – Last Year, Did You (or Your Spouse):

YES	NO	UNSURE	
			Pay Alimony or separate maintenance payments? If yes, do you have the recipient’s SSN?
			Pay Contributions or repayments to a retirement account? IRA <input type="checkbox"/> 401K <input type="checkbox"/> Roth IRA <input type="checkbox"/> Other <input type="checkbox"/>
			Pay College or post-secondary educational expenses for yourself, spouse, or dependents? (Form 1098-T)
			Pay Student loan interest? (Form 1098-E)
			Pay Child or dependent care expenses such as daycare?
			Pay For supplies used as an eligible educator such as a teacher, teacher’s aide, counselor, etc.?
			Pay Expenses related to self-employment income or any other income you received?
			Pay Student loan interest? (Form 1098-E)
			Pay Medical & Dental (including insurance premiums)
			Pay Mortgage Interest (Form 1098)
			Pay Taxes (State, Real Estate, Personal Property, Sales)
			Pay Charitable Contributions

Part 5: Life Events and Miscellaneous Items – Last Year, Did You (or Your Spouse):

YES	NO	UNSURE	
			Adopt a child?
			Have a Health Savings Account? (Forms 5498-SA, 1099-SA, W-2 with code W in box 12)
			Have health coverage through the Marketplace (Exchange)? [Provide Form 1095-A]
			Have credit card, student loan or mortgage debt cancelled/forgiven by a lender? (Forms 1099-C, 1099-A)
			Have a home foreclosure? (Forms 1099-C, 1099-A)
			Have Earned Income Credit, Child Tax Credit or American Opportunity Credit disallowed in a prior year? If yes, for which tax year?: _____
			Purchase and install energy-efficient home items? (such as Solar Panels , windows, insulation, etc.)
			Purchase an Electric Vehicle (EV)
			Make estimated tax payments or apply last year’s refund to this year’s tax? If YES, please have records available.
			File a federal return last year containing a “capital loss carryover” on Form 1040 Schedule D ?
			Receive an Economic Impact Payment (stimulus) in 2021?
			Did you, or your spouse if filing jointly, receive a letter from the IRS?

Confidentiality Note: This letter and any attachments are confidential and may be protected by legal privilege. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of this mail or any attachment is prohibited. If you have received this mail in error, please notify us immediately by returning it to the sender and delete this copy from your system.

Additional Comments:

Part 6: If you are due a refund, how would you like to receive your Refund?

- Direct Deposit:** **Checking** **Savings**

Routing Number: _____

Account Number: _____

- I wish to split between multiple accounts (Form 8888 required)**
- I wish to Purchase U.S Savings Bonds**
- I wish to receive a Paper Check in the Mail**

Confidentiality Note: This letter and any attachments are confidential and may be protected by legal privilege. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of this mail or any attachment is prohibited. If you have received this mail in error, please notify us immediately by returning it to the sender and delete this copy from your system.



CONSENT TO DISCLOSURE OF TAX RETURN INFORMATION

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot disclose your tax return information to third parties for purposes other than those related to the preparation and filing of your tax return without your consent. If you consent to the disclosure of your tax return information, Federal law may not protect your tax return information from further use or distribution.

You are not required to complete this form. If you agree to the disclosure of your tax return information, your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of signature.

This consent to disclose may result in your tax return information being disclosed to a tax return preparer located outside the United States, including your personally identifiable information such as your Social Security Number (“SSN”). Both the tax return preparer in the United States that will disclose your SSN and the tax return preparer located outside the United States that will receive your SSN maintain an adequate data protection safeguard (as required by the regulations under 26 U.S.C. Section 7216) to protect privacy and prevent unauthorized access of tax return information. If you consent to the disclosure of your tax return information, Federal agencies may not be able to enforce U.S. laws that protect the privacy of your tax return information against a tax return preparer located outside of the U.S. to which the information is disclosed.

If you (and your spouse) agree to allow Anchor Solutions, LLC. (U.S. based firm) to disclose your tax return information, including your SSN, to the foreign entity or entities listed below for purposes of aiding in the preparation of your (**INSERT YEAR: _____**) individual tax return, please check the box below, provide the information requested, sign and date your consent to the disclosure of your tax return information.

I (We) authorize Anchor Solutions, LLC. to disclose to (**Insert Entity: _____**) my (our) tax return information including my (our) SSN(s) to allow the described entity to assist in providing me (us) with tax return preparation services.

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by e-mail at complaints@tigta.treas.gov.

Confidentiality Note: This letter and any attachments are confidential and may be protected by legal privilege. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of this mail or any attachment is prohibited. If you have received this mail in error, please notify us immediately by returning it to the sender and delete this copy from your system.