# E-File Questionnaire 2023

### PLEASE PRINT CLEARLY - THIS IS A FILLABLE FORM - OPEN AND TYPE

All information pertaining to your current tax return must be filled in.

New IRS regulations beginning January 1, 2010 require us to notify our clients of the following information: We do not disclose any personal information to anyone and for your protection we will not release any information via phone, fax or mail without a written release form from you for each request. Check one answer for each question.

| Yes | No | Question   |
|-----|----|--|
|     |    | Do you have any foreign bank accounts?   |
|     |    | Does the paperwork turned in for income tax preparation include all income and expenses? |
|     |    | Have you ever been denied Earned Income Tax Credit by the IRS in the last 3 years?       |

#### **Taxpayers** - All information must be identical to Social Security records.

|   | Mr. Taxpayer | Ms Taxpayer |  |
|---|--------------|-------------|--|
| Name  |              |             |  |
| SS#   |              |             |  |
| Occupation  |              |             |  |
| Date of Birth   |              |             |  |
| Phone Number  |              |             |  |
| Filing Status – Single, Married filing Joint, Married Filing Separately, HOH (Circle One) |              |             |  |

## **Dependents -** All information must be identical to Social Security records.

| Name | SS Number | Date of Birth | Relationship |  |
|------|-----------|---------------|--------------|--|
|      |           |               |              |  |
|      |           |               |              |  |
|      |           |               |              |  |
|      |           |               |              |  |
|      |           |               |              |  |
|      |           |               |              |  |

>>>>>DO NOT FORGET YOUR EMAIL ADDRESS<

| E-Mail Address:                   |  |  |  |  |
|-----------------------------------|--|--|--|--|
| Direct Deposit Information YES NO |  |  |  |  |
| Bank Name:                        |  |  |  |  |
| Routing Number:                   |  |  |  |  |
| Account Number:                   |  |  |  |  |

Tax Year: 2023

Because of the new requirements by the Internal Revenue Service, I understand that I must have receipts for all deductions claimed on my tax return in case of an audit. I also understand that I must have receipts to go with cancelled checks.

By signing this statement, I understand that I am responsible for all figures given to my tax preparer and he is waived of any liability from the figures that I have given him.

I have provided proof of all dependents that I am claiming Earned Income credit for.

I understand that my tax return will not be submitted to the IRS until my entire preparation fee has been paid. NO CREDIT FOR ANYONE.

| Signed:                | Date:                       |  |
|------------------------|-----------------------------|--|
| Your Current Address t | that you want on Tax Return |  |
| Address                |                             |  |
| <br>Citv               |                             |  |

A copy of your tax return will be emailed to you – save a copy to your computer or print a copy – additional emails will cost you \$50. The password is the taxpayer's complete social security number without the dashes. If I can not read your email address, you won't receive a copy. It will cost you \$50 for a printed copy. Additional copies are also \$50 for each year.

# IGN BELOW AT THE CHECK MARK

Form **88/9** (Rev. January 2021)

IRS e-file Signature Authorization

Department of the Treasury Internal Revenue Service ► ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

| Spouse's name    Spouse's social security number  | Subm  | nission Identification Number (SID)   |  |  | -   |   |  |  |
|---|---|---|--|--|---|---|--|--|
| Part II Tax Return Information — Tax Year Ending December 31, (Enter year you are authorizing.)  Enter whole dollars only on lines 1 through 5.  Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1 Adjusted gross income 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 Greater lines and the second of the seco | Taxpayer's name   |   |  | Social security number   |   |   |  |  |
| Enter whole dollars only on lines 1 through 5.  Note: Form 10:40-SS files use line 4 only, Leave lines 1, 2, 3, and 5 blank.  1   | Spouse  | se's name   |  | Spouse's soo   | ial sec                                   | urity nun   | nber   |  |
| Enter whole dollars only on lines 1 through 5.  Note: Form 10:40-SS files use line 4 only, Leave lines 1, 2, 3, and 5 blank.  1   | Par   | Tax Return Information — Tax Year Ending December 31.   | (Enter   | vear vou a   | ire au                                    | thorizi   | na )   |  |
| Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.  1 Adjusted gross income 2 Total tax   |   | -   | (Littor  | your your  | ii C dd                                   | 101121  | 119.7  |  |
| Adjusted gross income 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099 3 Amount you want refunded to you 5 Amount you want refunded to you 6 Amount you want refunded to you 7 Amount you want refunded to you 8 Amount you want refunded to you 9 Amount you want you 9 Amount you 9 |   | · · · · · · · · · · · · · · · · · · ·   |  |  |   |   |  |  |
| 2 Total tax 3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099   |   | •   |  |  | 1   |   |  |  |
| Amount you want refunded to you  A mount you want refunded to the best on your refunded to you  A mount you want refunded to the best of any refunding the service of the tensor so for rejection of the transmission, (b) the reason for rejection of the refunded Finance and you are for the refunded Finance and you  A mount yet want to refund the yet yet yet yet yet ye | 2   | , ,   |  |  | 2   |   |  |  |
| Amount you want refunded to you  Amount you owe  Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)  Under penalties of perjuy, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best or work knowledge and belief, it is tire, correct, and complete. I further declare that the amounts in Part I above are mounts from the income tax return (original or amended) I am now authorizing, and to the best or to send my return to the IRS and to receive from the IRIS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or returd, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury rains dissignated Financial Agent to initiate an ACH electronic funds withdrawal (sired cleably either to the IRIS and an ACH electronic funds withdrawal (sired cleably either to the IRIS and an ACH electronic funds withdrawal (sired cleably either to the IRIS (a) and account indicated that perpenantion software for any delay in processing the return or return, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury Financial Agent at 1-88-8354-8357. Payment cancellation requests must be received in other than a business days prior to the payment [settlement] date. I also authorize the financial institutions involved in the processing of the electronic payment or taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment be received no later than a business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment or the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.  Taxpayer's PIN: check one box only  I authorize ERO irm name  signature on the income tax return (original or amended) I am now  | 3   |   |  |  | 3   |   |  |  |
| Amount you owe Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best on my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing, and to the best on my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the Income tax return (original or amended) I am now authorizing, and to the best on my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the IRS (at I and I an | 4   | **  |  |  | 4   |   |  |  |
| Part II   | 5   |   |  |  | 5   |   |  |  |
| Under penalties of perjuy, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best or wy knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for retion of the transmission, (b) the record of the transmission, the provider of the provider o | Par   |   |  |  | y of y                                    | our re  | eturr  | <u>1)</u>  |
| I authorize   | for any<br>Agent<br>payme<br>author<br>payme<br>busine<br>taxes<br>persor | by delay in processing the return or refund, and <b>(c)</b> the date of any refund. If applicable, I at to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution to find the financial tax, and the financial tax, and the financial tax, and the financial in the financial tax, and the financial in the financial tax, and the financial in the financial fi | authorize the Ú. on account indicancial institution on to terminate ancellation required in the patent to the patent to the patent to the patent to the patent in the pate | S. Treasury a cated in the to to debit the the authorizates must be processing o ayment. I fur | nd its ax pre entry ation. e rece f the e | designation to this a To revoluted no lectronic cknowle | ted Fi<br>softwaccou<br>ke (ca<br>later<br>payi<br>dge t | inancial<br>vare for<br>nt. This<br>ancel) a<br>than 2<br>ment of<br>hat the |
| ERO firm name signature on the income tax return (original or amended) I am now authorizing.  ☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part II below.  Your signature ▶  Spouse's PIN: check one box only ☐ I authorize  | Taxp  | payer's PIN: check one box only   |  |  |   |   |  |  |
| signature on the income tax return (original or amended) I am now authorizing.  ☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part II below.  Your signature ▶  Spouse's PIN: check one box only ☐ I authorize  |   | I authorize to enter  | or generate r  | ny PIN 💄   |   |   | -  | as my  |
| Spouse's PIN: check one box only  □   authorize   |   | signature on the income tax return (original or amended) I am now authorizin  I will enter my PIN as my signature on the income tax return (original or ame if you are entering your own PIN and your return is filed using the Practition  | ended) I am no   | ow authorizi   | ng. C                                     | heck th   | is bo  |  |
| I authorize   | Your  | signature >   | Date ► _   |  |   |   |  |  |
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| ERO firm name signature on the income tax return (original or amended) I am now authorizing.  I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part II below.  Spouse's signature  Practitioner PIN Method Returns Only—continue below  Part III  Certification and Authentication — Practitioner PIN Method Only  ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.  Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature  Date  Date   | Ороц  |   | or ganarata r  | my DINI  |   |   |  | 00 m)/   |
| signature on the income tax return (original or amended) I am now authorizing.  I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part II below.  Spouse's signature  Practitioner PIN Method Returns Only—continue below  Part III  Certification and Authentication — Practitioner PIN Method Only  ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.  Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature  Date  Date   | L   |   | or generate i  |  | ter five                                  | digits h  |  | as IIIy  |
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| Part III Certification and Authentication — Practitioner PIN Method Only  ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.  Don't enter all zeros  I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.  ERO's signature ▶  Date ▶   | Spou  | <u> </u>  |  |  |   |   |  |  |
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| FR() Must Retain This Form — See Instructions   |   | ERO Must Retain This Form — See Inst  |  |  |   |   |  |  |