

Progressive Tax Service - Tax Year 2021
1803 Smizer Station Road, Fenton, MO 63026 (636) 225-3708

Note: items in gray that have not changed since last year do not need to be completed.

Your Name:	SSN (yours)
Spouse Name:	SSN (spouse)
Street Address	Date of Birth (yours)
City, State & ZIP	Date of Birth (spouse)
Primary Telephone	Live Within St. Louis City Limits? Y N
Taxpayer's Email Address	
Spouse's Email Address	
Taxpayer's Driver's License #	State: Issue date: Exp date:
Spouse's Driver's License #	State: Issue date: Exp date:
Have you received any notice from the IRS or state revenue department in 2021? Y N	
Marital Status at 12/31/2021 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Widow(er)	
Did you marry, divorce or separate during 2021? Y N	
Can you be claimed as a dependent by another taxpayer, such as a parent? Y N	

Dependents: Do not list yourself or your spouse. List dependent children or other dependents:

Name:	Birth Date:	SSN:	Relationship:	Months lived in home 2021	College student
					Y N
					Y N
					Y N

Did you receive advance child tax credit payments during 2021? **Please provide the IRS letter received stating this amount.**

Do any of the children have a disability? Y N

Do you anticipate a different taxpayer will seek to claim a child listed above as their dependent for tax year 2021? Y N

Questions for ALL Taxpayers --- These questions MUST be answered.

Note "You" refers to both taxpayer and spouse; if unsure, please enter "?"

Lifestyle and Taxes	Y N	If you are due a refund, would you like direct deposit? (Enter details below if new.) Please circle SAME if unchanged.	
	Bank name	Routing #	
	Account type:	Account #	
	<input type="checkbox"/> Checking <input type="checkbox"/> Savings		
	Y N	Would you like to split your refund into two accounts or utilize direct debit from above account to pay a balance due?	
	Y N	Are you or your spouse legally blind? If yes, who?	
	Y N	Did you pay or receive alimony in 2021? (circle: PAY or RECEIVE) Amount: \$	
		What date was the divorce or separation finalized? Recipient SSN:	
	Y N	Did you purchase your health insurance through a public exchange (Affordable Care Act Marketplace or ObamaCare)?	
	Y N	Will there be significant changes in income or deductions next year, such as retirement?	
	Y N	Have you, your spouse, or any of your dependents received an IP Pin from the IRS? Please include letter if yes.	
	Y N	Have you paid alternative minimum tax (AMT) in any previous years?	
	Y N	Did you pay an individual for domestic services in your home (nanny, housekeeping or the like)?	
	Y N	Did you purchase a new energy-efficient (electric) vehicle that is eligible for a tax credit?	
	Children	Y N	Are you involved in bankruptcy, foreclosure, repossession, or had any debt (including credit cards) cancelled?
Y N		Are you a member of the military?	
Y N		Do you own or have financial interest in a foreign bank account or financial account	
Y N		Did you receive the third economic impact payment (Spring, 2021)? Total amount received: \$	
Y N		Would you like to allow your tax preparer to discuss this return with the IRS, should it be necessary?	
Y N		Were any children born or adopted in 2021?	
Y N		Do any dependent children have unearned income of \$1,100 or more (such as investment income)?	
Y N		Were any children attending college? If so, year in college? 1st 2nd 3rd 4th Victory lap+ <i>Additional information will be needed for tax credit, including 1098T and amounts paid for tuition and books.</i>	
Education		Y N	Did you pay tuition for a private elementary/secondary school for a dependent?
		Y N	Did you or your spouse take college classes? <i>If so, we will need additional information.</i>
	Y N	Did you pay any student loan interest? If so, please include interest amount paid. \$	
	Y N	Did you pay for child or dependent care (day care) so that both spouses could work or attend school?	

EC			<i>If so, we will need provider name, address, EIN and amounts paid.</i>	
Home	Y	N	Did you contribute to a §529 plan in 2021? Amount:	
	Y	N	Did you purchase or sell a home during the year? <i>If yes, additional information including all closing stmts are needed.</i>	
	Y	N	If you sold a home, did you claim the First-Time Homebuyer Credit when purchased? <i>If yes, provide details.</i>	
	Y	N	Did you refinance a mortgage or take a home equity loan? <i>If yes, please provide closing statement.</i>	
	Y	N	Have you used mortgage loan proceeds for purposes other than to buy, build or substantially improve the home?	
	Y	N	Did you make any new energy-efficient improvements to your home? <i>If yes, provide details.</i>	
Business	Y	N	Do you own a business or an interest in a partnership, corporation, LLC, farming activity or other venture? <i>Please call our office if you need a self employed income worksheet.</i>	
	Y	N	Did you receive income from a sharing/gig economy activity such as AirBnB, Uber or Shipt?	
	Y	N	Did you have income from a rental property, farm, self employed business, gambling, legal settlements, disability, or any other income? Please provide details (our office may have worksheet available for some income types).	
Investments	Y	N	Did you, or will you, contribute any money to an IRA for 2021? Taxpayer Amount: Traditional \$ <input type="text"/> Roth IRA \$ <input type="text"/> Spouse Amount: Traditional \$ <input type="text"/> Roth IRA \$ <input type="text"/>	
	Y	N	Did you rollover any amounts from a retirement account in 2021?	
	Y	N	Did you sell or transfer any stock or sell rental or investment property in 2021?	
	Y	N	Did you receive any income from an installment sale?	
	Y	N	Did you have any investments that became worthless in 2021?	
	Y	N	Did you receive, sell, send, exchange or otherwise acquire any financial interest in any virtual currency?	
	Y	N	Were you granted, or did you exercise, any employee stock options during 2021?	
Other	Y	N	Did you/will you make a contribution to an HSA for 2021 (due by 4/18/2022) or distributions from an HSA?	
	Y	N	Did you pay any interest on a loan for a boat or RV that has full living quarters? <i>If yes, provide details.</i>	
	Y	N	Did you make any charitable contributions in 2021? If so please provide details.	
	Y	N	Did you pay sales taxes on a major purchase in 2021, such as a vehicle, boat or RV?	

Income Please provide ALL W-2s, W-2Gs and 1099s (of ALL kinds - INT, DIV, B, S, Composite, R, SSA, RRB, MISC, NEC, G etc.)

Number of W-2s

Number of 1099s

Please list names of each issuer and provide all tax documents:

W-2s:		Pensions and Retirement Accounts (1099-R):	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
Interest (1099-INT):		Dividends (1099DIV):	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
Tax Exempt Interest: _____			
Other Income:			
State Tax Refund	\$	Unreported tips	\$
Unemployment Compensation	\$	Other income description:	
Social Security (taxpayer)	\$		\$
Social Security (spouse)	\$		\$

Adjustments

Educator expenses. Classroom expenses of teachers, counselors and principals. Maximum \$250 each	\$	<input type="text"/>
Health savings account after-tax contributions (not paid by employer or thru payroll deduction) **	\$	<input type="text"/>
Self employed SEP, SIMPLE and qualified plans **	\$	<input type="text"/>
Self employed health insurance	\$	<input type="text"/>
Penalty on early withdrawal of savings	\$	<input type="text"/>
IRA deduction for traditional IRAs **	\$	<input type="text"/>
Student loan interest	\$	<input type="text"/>

** Note: some contributions for 2021 may be made in 2022.

Itemized Deductions

Deductions must exceed \$12,550 (Single or married filing separate), \$18,800 (head of household) or \$25,100 (married/joint) to be beneficial. **You are allowed a charitable contribution deduction (cash/check/cc) of up to \$300 (\$600 MFJ) without itemizing.**

Medical Expenses (note: must exceed 7.5% of income to be a benefit; include cost for dependents; do not include any costs that were reimbursed by insurance or paid with pre-tax dollars such as health insurance paid thru your employer or costs paid with health savings accounts, flexible spending accounts or medical savings accounts.)

Doctors & Dentists	\$		Medical transportation	\$	
Prescription meds and insulin	\$		Hearing aids & dentures	\$	
Hospitals & nursing homes	\$		Eyeglasses & contacts	\$	
Health insurance premiums	\$		Long term care ins - self	\$	
Other:	\$		Long term care ins - spouse	\$	
Medical miles --- enter # of miles			@ \$0.16/mile	\$	

Taxes

State estimated tax paid 2021	\$		Personal property tax	\$	
Real estate tax - primary home	\$		Foreign tax paid	\$	
Real estate tax - other	\$		Other	\$	
Sales tax paid car/boat/RV	\$				

Mortgage Interest Paid Please provide all Forms 1098 or lender information including EIN and address of leinholder.

Main home	\$		Points	\$	
Second home	\$		Equity loan	\$	
Were proceeds of equity loan used to purchase or substantially improve the home?				Y	N
Did you pay mortgage insurance premiums?				Y	N

Charitable Contributions Note: IRS rules require the taxpayer to retain documentation for all cash contributions (includes checks and credit card transactions. Please note if any donations were transferred from an IRA account.

Payee:	Amount:	Payee:	Amount:
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

Non-cash (**items** donated) contributions over \$500 require additional reporting on IRS Form 8283.

Total non-cash donations	\$		Please provide donation receipts if over \$500.
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Estimated Tax Payments

Federal

Applied from prior year	\$	
Qtr 1 date:	\$	
Qtr 2 date:	\$	
Qtr 3 date:	\$	
Qtr 4 date:	\$	

State

Applied from prior year	\$	
Qtr 1 date:	\$	
Qtr 2 date:	\$	
Qtr 3 date:	\$	
Qtr 4 date:	\$	

Tax Preparation Checklist

- All Forms W-2 (wages), 1099-INT (interest), 1099-DIV (dividends), 1099-B (proceeds from broker transactions), 1099-R (pensions and IRS distributions), Schedules K-1 from partnerships, S Corporations, estates and trusts) and other income reporting statements, including all copies provided from the payer.
- Please provide all correspondence received from the IRS or state taxing authorities, including IRS letters #6419 and #6475 with information regarding advance child tax credit payments and economic impact payments received during 2021.**
- Form 1095-A, B or C (for health insurance purchased either in or outside a public exchange or employer provided).
- If you are a new client, provide copies of last year's tax returns.
- Copies of closing statements if you bought or sold real estate.

- Mileage figures for any automobile expenses claimed, including total, commuting and business mileage.
- Income and deductions categorized (worksheets available) for business or rental activities.
- Details of estimated tax payments made, if any.
- Completed Individual Income Tax Organizer/aka Interview Sheet. **Please note, if you choose not to complete the organizer, all taxpayers must at least answer the yes/no questions under the heading "Questions for All Taxpayers."**
- Please note, before your completed returns can be delivered and/or electronically filed, we must have Form 8879 and our engagement letter signed. If married filing jointly, both spouses must sign. If one spouse is unable to come to our office to sign, please discuss options with your preparer or one of our staff members.**

Privacy Policy

The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from applications, worksheets, reporting statements and other forms, as well as interviews and conversations with our clients. We may also review banking and credit card information in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or **obtained with your permission.**

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will **NOT** disclose your personal information to a third party without your permission, except where required by law. We maintain physical, electronic and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.

Certification/Signatures

I/We certify that the information provided for our tax preparation service is true and complete to the best of my/our knowledge.

Taxpayer

Date

Spouse

Date