

MLE Tax Advisors Inc

CLIENT INTAKE SHEET

Taxpayer Name (last, first)

Spouse Name (last, first)

Taxpayer Phone #

Spouse Phone #

Taxpayer Email

Spouse Email

Street Address &/or Apt #

City

State

Zip Code

Direct Deposit OR Direct Withdrawal Info: to be confirmed before completion of returns

Bank Name

Routing #

Account #

Please circle one:

Checking

Savings

Do you either of you have a **Health Savings Account?**

Yes / No circle one

If yes, please provide **Form 1099-SA** for **EACH** account

Do you or your spouse have **Health Insurance thru the Marketplace?**

Yes / No

If yes, **YOU MUST** provide **Form 1095-A**

circle one

If you are **NOT** providing us copies of Driver's Licenses for each taxpayer, please complete the following:

DL# & State

DL# & State

Birthdate

Birthdate

Issue Date

Issue Date

Expiration Date

Expiration Date

MLE Tax Advisors Inc

CLIENT INTAKE SHEET

**** SEE PAGE TWO (ON BACK) ****

NEW CLIENTS: Please be sure to provide us a copy of your prior year tax returns. Birthdates for dependents MUST be provided.

DEPENDENT INFORMATION:

Please list dependents to be claimed; if unsure it will be discussed/confirmed before completion

VIRTUAL CURRENCY

Did you or your spouse receive, sell, exchange, or otherwise acquire financial interest in any virtual currency?

(Bitcoin, Ethereum, Dogecoin, etc.) _____ YES _____ NO

FOREIGN BANK & FINANCIAL ACCOUNTS (FBAR)

Do you hold interest in any foreign bank accounts, investments, pension funds, life insurance policies or power of attorney for any foreign resident? _____ YES _____ NO These answers are required for Schedule B if necessary.

FBAR Reporting is not a tax return; it may be necessary for you to file this form. **This is not a service we provide.**

REFERRALS: If you are a **New CLIENT** and were referred to MLE Tax by someone, please provide what info you can below.

We would like to thank them!

Name

Phone

Street Address

City/State/Zip Code