

TAX EXPRESS GROUP**508-853-2767**

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Office: 166 Lincoln Street Worcester, MA, 01605 Email info@taxexpressgroup.com**2021 Tax Year**

We need your Basic or updated Information for this year

First:	Last:	Spouse's First:
Address:		
Zip code:	City	State
Telephone	Time available to receive call	
Work Phone	Cell Phone	: am pm
Your B-day:	Your Occupation:	Your SS:
Spouse's B-day	Spouse's:	Spouse SS :
E mail Address :		

Single: **Married Filing Jnt.** **Married filing Sep.** **Head of H** **Widower**
 Your Employer #1 _____ \$
 Your Employer #2 _____ \$
 Spouse's Employer #1: _____ \$
 Spouse's Employer #2 _____ \$
 Did you receive any Other Incomes (e.g,1099) ? **You** ()Yes ()No **Spouse** ()Yes ()No
 Did you receive Social Security Income this year ? **You** ()Yes ()No **Spouse** () Yes ()No
 List below **ONLY** changes from last year or check box () Same dependents as Last Year

Please remove the following former Dependents for this year:

1 _____ (2) _____ (3) _____ (4) _____

Current Dependents (do not list your name or spouse's) (** names only if on file)

NAME (first and Last names)	Social Security #	Birthday	Relationship
1 _____	- -	- - -	_____
2 _____	- -	- - -	_____
3 _____	- -	- - -	_____

Did you receive Advance Third Economic Stimulus Impact in 2021? Amount :

Do you Family have Medical Insurance coverage for this year ? # of months _____ :

() Interest Income: \$ _____ () Dividend Income \$ _____

() Other income (Alimony, Gambling, Part time job paid in cash) \$ _____

() Capital gain or loss from sale investments (if applicable) \$ _____

() **Unemployment compensation received:** \$ _____() **Real Estate Tax** (if you are not filing long form otherwise write on page 2) \$ _____() **Last refund** (if you filed a long form last year) \$ _____() IRA contribution \$ _____ (Regular or Roth). **IRA withdrawal:** \$ _____

() Interest paid on student loan last year: \$ _____ Charity Contribution : _____

() Out of pocket Teacher's expenses (\$250 max.) \$ _____

CHILDCARE TOTAL EXPENSES \$ _____ Do you participate in Payroll Childcare deduction ()

Child #1 \$ _____ Child #2 \$ _____ Child #3 \$ _____

Person or Organization who provided childcare and EIN

Name & Address: _____

Zip code & city: _____

Are you being claimed as a dependent on any other person's return? () **YES** or () **NO**

Did you rent an Apt. or house last year in California ? : () Yes or () No, # of months ? ()

Landlord Address & Phone:

() **e file with Direct.** () **Collect Fee from refund** I will pay via Paypal or Website

Continuation of Employer's Info:

Your Employer #3 _____ \$

Your Employer #4 _____ \$

Spouse's Employer #3: _____ \$

Spouse's Employer #4 _____ \$

*******LONG FORM CLIENTS ONLY*******

Medical Expenses:
 Dr Visits \$ _____
 Dental...Bills..\$ _____
 Med..Ins...Premium\$ _____
 Med. Mileages\$ _____

Filing Status	Standard Deduction Amount
Single	\$12,550
Married Filing Jointly & Surviving Spouses	\$25,100
Married Filing Separately	\$12,550
Heads of Household	\$18,800

Taxes Real Estate \$ _____
 Vehicle registration \$ _____
 Other Taxes \$ _____

Your notes to us below:

MORTGAGE INTEREST: (Lender form 1098)
 Primary Lender \$ _____
 Secondary Lender \$ _____
 Other Lender \$ _____

CHARITABLE CONTRIBUTION:
 Church contribution: \$ _____
 Other than cash:\$ _____

OFFICE use only (missing information)

JOB RELATED EXPENSES:
 Union dues: \$ _____
 Work clothes & upkeep: \$ _____
 Tools, materials, tools: \$ _____
 Job related travel: \$ _____
 Education (job related): \$ _____
 Last year Tax Prep. Fees: _____
 \$ Others: _____

ELIMINATED

Casualty & Theft (Police Report): \$ _____