Findon & Associates, LLC 12013 Frankstown Road Pittsburgh, PA 15235-3435



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## **Certified Public Accountants**

## **2023 Tax Information Sheet**

Taxpayer Name:	Occupation:	
Phone #: <u>( ) - E</u> mail:		
Spouse Name:	Occupation:	
Phone #: <u>( ) Email:</u>		
How would you like to receive your client copy of the tax retu Email copy F	•	
If you are receiving a refund, tell us how you would like to receive the refund. (Check only one)  O Apply the overpayment as a credit to 2024 tax liability O Check in the Mail		
Onition Deposit to your account we have on file (if account changed, fill out information below)  Financial Institution:		
Routing Number: Acco	ount Number:	<del></del>
Please fill in below for information during the year of 2023:		
Did you have a change in marital status?	ONO	<b>O</b> YES
Did you have a change in dependents?	Ono	<b>O</b> YES
Did you have a change in address? If so, please provide move date and new address below		OYES
If your dependent children have income, would you like us to prepare their tax returns?		<b>O</b> YES
Did you make estimated tax payments? If so, please provide amounts & dates paid below		<b>O</b> YES
Did you receive (as a reward, awards, or payment for services or property), sell, exchange, gift,		
or dispose of a digital asset (or a financial interest in a dig	gital asset)?	<b>O</b> YES
Do you own a direct financial interest in any foreign accounts or have signature authority?		<b>O</b> YES
Did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? ONO		<b>O</b> YES
Did you purchase anything energy efficient for your primary residence? If so, please provide details ONO		<b>O</b> YES
Did you purchase health insurance through the Health Insura	nce Marketplace?	OYES
*If you answered yes to above, you will need to provide us for	m 1095A	
Do you have Venmo, Paypal, eBay, or any other electronic payme	ent account & received Form 1099-KONO	OYES
If you are claiming dependents on your tax return or college	tax credits, please ask for our Questionn	aire to fill out
Additional Information, Comments, Questions:		
ALL INFORMATION I HAVE GIVEN IS TRUE AND CORRECT TO THE BE	EST OF MY KNOWLEDGE	
Signature:	Date:	