

☐ Checking box gives us permission to text

OBTS Date Received: \_\_\_\_\_ Initials \_\_\_\_\_

## 2023 Questionnaire Short-Form For Current Clients That Did Not Move or Change Marital Status

Taxpayer(s) Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

### Bank Verification (Must be completed unless it's the same as last year and we have proof on file.)

Name of Financial Institution \_\_\_\_\_ or ☐ same as last year

Routing Number \_\_\_\_\_ Direct Deposit: Y N

Account Number \_\_\_\_\_ Direct Debit: Y N

Check one: Checking Savings Must be joint account if joint return.

HSA (Health Savings Account) Information Y N

If you have an HSA (code W on your W-2), you **must** provide us with Form 1099-SA if you had distributions.

☐ All distributions were used to pay medical expenses. (Please check the box if correct.) ☐ No 2022 distributions.

### Ohio State Use Tax Certification-MUST BE ANSWERED

If sales tax was paid on all purchases, check here ☐

OR I have taxable purchases made that I never paid any sales tax Total \$ \_\_\_\_\_

### Estimates \*includes RITA (\$10 fee if we have to get your RITA estimates)

If you were required to make any estimates (Federal, State, School District or City) you **MUST** provide the amount paid by taxing authority (i.e. IRS, Ohio, Ohio SD, RITA) on the back of this form.

IRA Contributions: Roth: Taxpayer \_\_\_\_\_ Spouse \_\_\_\_\_

Traditional: Taxpayer \_\_\_\_\_ Spouse \_\_\_\_\_

### Virtual Currency Statement-MUST BE ANSWERED

At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)?

i.e. BitCoin or Ethereum Y N

### Refund Options if not Direct Deposit

☐ Check Mailed to Taxpayer

☐ Bank Product (Tax preparation fees withheld from refund. Minimum \$38.95 additional fee.)

### Signature Documents Options

☐ Sign at office and pick up taxes.

☐ E-Sign over client portal-copy of return uploaded to portal (requires e-mail address)

☐ Please also mail a copy of my tax returns. (\$5 extra)

### Please read and sign below:

I understand that my return will be prepared based on the information I provided. I am solely responsible for the accuracy of that information and for maintaining the records to support it. My documents will not be returned to me by mail unless I chose the regular mail option above or will be available for me to pick up at the office.

Signature \_\_\_\_\_ (REQUIRED) Date: \_\_\_\_\_

Signature \_\_\_\_\_ (REQUIRED) Date: \_\_\_\_\_