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Secure Portal  
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*For basic information, only complete any sections that have changed in 2024.*

Taxpayer First Name M.I. Last Name (Required)		Occupation	(OFFICE USE) Intake by: _____ Date: _____
Phone		Email (Required for portal signature)	SSN
Driver's License/State ID No. State Issue Date Exp. Date		Date of Birth	
Spouse First Name M.I. Last Name (Required)		Occupation	IRS IP PIN (if applicable)
Secondary Phone		Email (Required for portal signature)	SSN
Driver's License/State ID No. State Issue Date Exp. Date		Date of Birth	
Address		If you moved in 2024, Date of move	
Apt	City	State	Zip

Marital status at 12/31/24: Single Married Separated Widow(er) Married Filing Separately Unsure  
 Were you divorced or separated during the year? Yes No

Full name of dependent(s) Provide SS card(s) if new dependent	Social Security #	IP PIN	Date of birth	Months lived in home for 2024	Relationship to taxpayer	College student?	Income

Did any of the children have unearned income above \$1,100 for the year? Yes No  
 Do any of the children have a disability? Yes No  
 Is it anticipated that a different taxpayer will seek to claim a child listed above as their dependent for tax year 2024? Yes No

Bank Info - To be used for (please circle all that apply)	Direct deposit of refund	Direct debit of balance due Debit date:	Return preparation fees
Name of Bank	Checking Savings	Routing number	Account number
Preferred method of delivery for completed return (please circle)			
Scheduled in person signing appointment		Drop off signing (no appointment)	Secure online portal signing (email address required)

### Tax Preparation Checklist (FOR OFFICE USE ONLY)

W-2 (wages)	1099-G (government payments)
1099-INT (interest)	1099-C/1099-A (cancellation of debt)
1099-DIV (dividends)	1099-NEC (nonemployee/contractor compensation)
1099-B (investments transactions)	1099-MISC (miscellaneous income)
1099-R (retirement)	Schedule K-1 (partner/shareholder income/deductions)
SSA-1099 (social security)	1099-S/1099-SA (real estate and HSA distributions)
W-2G (gambling)	1099-K (payment card/third party transactions)
Business Income/Expenses or Financial Statements	Rental Income/Expenses
Farm Income/Expenses	Mileage logs

Do you have income from any sources other than items listed above? Yes No

Please complete the rest of this organizer. Please review the "Taxpayer Responsibilities" section carefully and sign on the first set of signature lines. If you have any questions, please speak to your tax preparer.

## 2024 Estimated Payments

Installment	Date paid	Federal	Date paid	State
First		\$		\$
Second		\$		\$
Third		\$		\$
Fourth		\$		\$
Amount applied from 2023 overpayment?		\$		\$
Total		\$		\$

## Questions — All Taxpayers

(Provide related statements or other documentation.)

"You" refers to both taxpayer and spouse — enter "?" if unsure about a question.

Yes	No	Did you purchase health insurance through a public exchange, such as the Healthcare Marketplace?
Yes	No	Will there be any significant changes in income or deductions next year, such as retirement?
Yes	No	Do you own or have financial interest in a foreign bank or financial account? Balance exceeds \$10,000
Yes	No	Did you, or do you plan to, contribute money before April 15, 2025 to an IRA for 2024?
Yes	No	Did you receive, sell, send, exchange, or otherwise dispose of any financial interest in any virtual currency/digital assets?
Yes	No	Did you, or do you plan to, contribute money before April 15, 2025 to an HSA for 2024? If yes, provide details.
Yes	No	Did you use any funds from an HSA to pay for qualified medical expenses?
Yes	No	If you sold a home, did you claim the First-Time Homebuyer Credit when it was purchased? If yes, provide details.

State info	Full year resident	Part-year resident	Nonresident	School district
States of residence during 2024 and dates				Do you rent or own your home? Rent Own

Would you like us to help monitor your IRS account? (Additional charge may apply)  Yes  No

## Notes

## Taxpayer Responsibilities

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review your documentation.
- You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the return carefully before signing to make sure the information is correct.
- Fees must be paid before your tax return is delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer is required for preparation of late returns.
- If we have to reprint your return due to you not providing us info there will be a reprint fee.
- You should keep a copy of your tax return and any related tax documents. You may be assessed a fee if you request a copy in the future.
- You acknowledge that you are responsible for paying any outstanding tax liability by April 15, 2025 (regardless of an extension) or you may be subject to penalties and/or interest.**

**Signatures.** By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities. For a joint return, both taxpayers must sign.

Taxpayer

Spouse

Date

(To be completed at return signing) Please sign to acknowledge you have received all original documents you provided

Taxpayer

Spouse

Date