

NOBLE INCOME TAX, LLC

Office: 10015 Old Columbia Road, Suite B 215 Columbia Maryland 21046
Telephone: (301) 890-6360 Fax 888 503 5781

Thank you for contacting Noble Income Tax !

We are excited to hear from you and are prepared to earn your trust and Business. We have been providing Taxes Services for Individual and Small Businesses like you covering all 50 states of the Union for over 25 years!

In order to expedite your Tax Preparation, please complete the below fill-able questionnaire. After completion you can do one of the following:

1. Print the Questionnaire and Fax or mail your W-2s, 1098, 1099 etc and any other documents. (Include your last year Tax forms if available).

OR

Save the Questionnaire and send it to us by email to info@nobleincometax.com

OR

Print the completed Questionnaire and bring it with you for an office appointment.

Looking forward to earning your Business!

At Noble Income Tax You are # 1 with us !

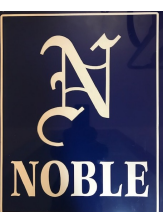
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Columbia, MD 21046

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Visit us today at: www.nobleincometax.com



NOBLE INCOME TAX, LLC

1 800 909 Taxes (8293)

Fax: 888 503 5781

Mailing to : Box 179 Burtonsville, MD 20866 Email: info@nobleincometax.com

2021 Tax Year

We need your Basic or updated Information for this year

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

Form with fields: 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, Did you receive Social Security Income this year

List below ONLY changes from last year or check box () Same dependents as Last Year

Table with 4 columns: NAME (first and Last names), Social Security #, Birthday, Relationship. Includes instructions to remove former dependents.

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

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

Form with fields: Interest Income, Dividend Income, Other income, Capital gain or loss, Unemployment compensation received, Real Estate Tax, Last refund, IRA contribution, IRA withdrawal, Interest paid on student loan last year, Charity Contribution, Out of pocket Teacher's expenses

Form with fields: CHILDCARE TOTAL EXPENSES, Child #1, Child #2, Child #3, Person or Organization who provided childcare and EIN, Name & Address, Zip code & city

Form with fields: Are you being claimed as a dependent on any other person's return?, Did you rent an Apt. or house last year in California?, 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 expenses: \$ _____
 Education (job related): \$ _____
 Last year Tax Prep. Fees: _____
 \$ Others: _____

ELIMINATED

Casualty & Theft (Police Report): \$