



### Drop off Form

Are you a returning Wink Tax Client?  Y |  N

If yes, do you have a preferred tax professional? (Please provide their name): \_\_\_\_\_

What date would you like for your return to be ready? \_\_\_\_\_

#### Client Information:

Marital Status:

Single |  Married |  Head of Household |  Widowed

Primary Taxpayer Name: \_\_\_\_\_ Spouse Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Spouse Date of Birth: \_\_\_\_\_

SSN or ITIN: \_\_\_\_\_ Spouse SSN or ITIN: \_\_\_\_\_

Occupation: \_\_\_\_\_ Occupation: \_\_\_\_\_

Physical Address: \_\_\_\_\_ Physical Address (if different): \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Preferred Contact Method:  Email |  Phone Preferred Contact Method:  Email |  Phone

Best Phone Number: \_\_\_\_\_ Best Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Date Issued: \_\_\_\_\_ State Issued: \_\_\_ Date Expired: \_\_\_\_\_ Date Issued: \_\_\_\_\_ State Issued: \_\_\_ Date Expired: \_\_\_\_\_

#### Dependents (or person living in your household)

Name	Relationship	Date of Birth	SSN or ITIN (new clients only)	Full-time Student?	Disabled?

Did all dependents live with the primary taxpayer all year?  Yes |  No

Please complete the back side of this page.

# Check all items that apply and provide supporting documents

## Taxpayer/Dependent Information

- Last year's tax return (**new client only**)
- Social Security cards (**new client only**)
- Social Security cards – new spouse/dependents
- Driver's license/ID (**new client only**)
- Death of taxpayer/dependent

## Income

- Form(s) W-2
- Interest Income (Form 1099-INT)
- Dividend Income (Form 1099-DIV)
- Prior year state refund amounts
- Alimony received
- Business Income and expenses
- Stock or personal asset sales
- Sale of a business or business assets
- IRA distributions (Form 1099-R)
- Pension/Annuity income (Form 1099-R)
- Rental property income and expenses
- Farm income and expenses
- Unemployment income (Form 1099-G)
- Social Security Benefits (Form 1099-SSA)
- Railroad Retirement (Form RRB-1099 (R))
- Gambling winnings/losses (Form W-2G)
- Miscellaneous Income (Form 1099-MISC)
- Non Employee Compensation (Form 1099-NEC)
- Payment Card and 3<sup>rd</sup> Party Network Payments (Form 1099-K)
- Refunds of amounts previously deducted
- Schedule K-1

## Adjustments to Income

- Health Savings Account contribution
- Moving expenses (military personnel only)
- SEP, SIMPLE contributions
- Early withdrawal penalty on savings
- Health insurance paid for self-employed
- Alimony paid (amount & SSN of recipient)
- IRA contributions
- Student loan interest
- Classroom supplies (K-12)

## Itemized Deductions

- Medical expenses (PAID)
  - After-tax insurance premiums
  - Hospital/Doctors/Dentists
  - Long-term insurance premiums
  - Prescriptions
  - Hearing aids/batteries
  - Eyeglasses/contacts/contact solution
  - Medical mileage
  - Marketplace Health Insurance
- Real estate taxes
- Personal property taxes
- Home mortgage interest (Form 1098)
- Charitable contributions (cash/check)
- Charitable contributions (noncash)
- Charitable mileage
- Casualty losses (Presidentially declared disaster areas)

## Credits

- Child and dependent care expenses
- Education expenses
  - Forms 1098T - E - or 1099Q
- Residential energy expenses
- Adoption expenses

## Taxes Paid

- Estimated taxes paid (federal and state)
- Extension payment

## Misc. Items

- First-time homebuyer credit repayment
- Household employee information
- Tips received
- Sale or purchase of a personal residence
- HUD-1 statement - **home purchase or refinance**

## Virtual / Digital Asset / Crypto Currency

- Yes - Bought, Sold, Traded or Spent
- NO – Did Not use, buy, sell.

## Other Information: