



# Wink Tax Services, Inc.

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## Drop off Form

Form can be sent in with tax documents:

1. Drop off in office
2. Mail
3. Secure File Portal: <https://verifyle.com/@winktax> [No password Required on documents]
4. Email – Please password protect your information

**IMPORTANT:** Tax Documents received after the following dates will be put on **Extension**.

1. Individual	March 30
2. Corporation	March 30
3. Partnership, S Corporation	February 28

Are you a returning Wink Tax Client?  Y |  N

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

If No, how did you find Wink Tax Services Inc.? \_\_\_\_\_

### 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: \_\_\_\_\_

**Direct Deposit Information:** **IMPORTANT – Effective 9/30/2025 the IRS is prohibited in mailing out paper checks.**

Bank / Credit Union Name: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Change in Filing Status:  Yes |  No

Change in Dependents:  Yes |  No

Please complete the back side of this page.

**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

**Other Information:**

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
  - Tip Log
  - Overtime Log [Paystub year end]
  - Occupation \_\_\_\_\_
- 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)
  - Tip Log
  - Overtime Log
  - Occupation \_\_\_\_\_
- Payment Card & Third Party Network Transactions (Form 1099-K)
- Distributions From an HAS, Archer MSA or Medicare Advantage MSA (Form 1099-SA)
- Refunds of amounts previously deducted
- Schedule K-1

### Adjustments to Income

- Health Savings Account contribution - HSA
- 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) Educator Expenses

### 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)

### New Vehicle Loan Interest [New for 2025]

- Vehicle Assembled in United States

- Vehicle Purchased in 2025

- VIN # \_\_\_\_\_

- 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

### Health Insurance

#### **Form 1095-A if you enrolled in an insurance plan through the Marketplace (Exchange)**

- Form 1095-B and/or 1095-C if you had insurance coverage through any other source (i.e. an employer, insurance company, government health plan such as
- Medicare, Medicaid, CHIP, TRICARE, VA, etc.
- Marketplace exemption certificate (ECN) if you applied for and received an exemption from the Marketplace (Exchange)

### Retirement & Other Savings

- Form 5498-SA showing HSA contributions

- Form 5498 showing IRA contributions

- All other 5498 series forms (5498-QA, 5498-ESA)

### 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

- Disaster Declaration Federal \_\_\_\_\_

### **Virtual / Digital Asset / Crypto Currency**

- Yes - Bought, Sold, Traded or Spent

- NO - Did Not use, buy, sell