

# Tax Year 2023 Tax Return Drop-Off Client Form

Date \_\_\_/\_\_\_/\_\_\_

Client Name \_\_\_\_\_ Spouse Name \_\_\_\_\_

SSN# \_\_\_\_\_

SSN# \_\_\_\_\_

Best Contact Phone# \_\_\_\_\_ Current Address: \_\_\_\_\_

Can we contact you in the evening?  Yes  No

How late can we contact you? \_\_\_\_\_

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

## ALL SUPPORTING DOCUMENTS ARE REQUIRED TO FILE 2023 TAX RETURN

**\*\* NEW CLIENTS - must provide a copy of their last year tax return**

**\*\*WE NEED A CURRENT COPY OF YOUR DRIVERS LICENCE(s) (unless we took a copy last year)**

### REVIEW ALL SECTIONS (Answer ALL questions that apply to you)

#### INCOME SOURCES:

Check box if applies to you:

- Employment (**W-2's**) from all Employers
- Unemployment (**1099-G**)
- Social Security (**SSA-1099**)
- Retirement plan/IRA distribution (**1099-R**)
- Interest (**1099-Int**)
- Dividends (**1099-Div**)
- Bought or Sold Stock/Mutual Funds (**1099-B**)
- Sale of Personal Items (**1099K**)
- Miscellaneous (**1099- MISC**)
- Lottery Winnings / Losses (**W2-G**)
- Cancellation of Debt (**1099-C**)
- Cash or Other Sources of Income (not reported on w-2 or 1099)
  - If yes, how much \$ \_\_\_\_\_
- Rental Income – Discuss with Tax Preparer
- Self-Employment – See additional questions in **Section B**

#### Miscellaneous:

- Did you purchase or sell a house in the past year?
  - We need Settlement Statement/Closing Document
- Have you made any energy efficient home improvements in 2023? (Must have receipts)
  - Windows, Doors, Insulation, Solar, Heating, Water Heater, Pellet Stove, Gas or Oil Furnaces \*Must be energy star approved\*
- Did you buy an *Electric Car*? (Need purchase agreement)

#### Are you a Massachusetts Resident? If yes, answer below:

Do you pay rent? If yes,

Rent paid per month \$ \_\_\_\_\_ # of Months \_\_\_\_\_

If **age 65** or older:

How much was your water & sewer bill? \$ \_\_\_\_\_

How much was your Real Estate Taxes? \$ \_\_\_\_\_

#### Are you a Connecticut Resident? if yes, answer below:

Personal Property Tax (Vehicle) Tax \$ \_\_\_\_\_

Personal Property Tax (Real Estate) \$ \_\_\_\_\_

#### Household:

- Do you, or your children attend College?
  - Do you have a **1098-T** and College Transcript?
- Student Loan Interest (**1098-E**)
- HSA Distributions (**1099-SA**)
- Proof of Health Insurance (**1095a Health Connector, 1095b, MA-HC**)
  - Yes, I had Health Insurance all year.
  - If No: I had partial year coverage: (Check Boxes below)

J F M A M J J A S O N D

Actual Months covered:

#### Retirement:

- Traditional IRA Contribution \$ \_\_\_\_\_
- Roth IRA Contribution \$ \_\_\_\_\_

#### Questions if you think you might qualify to Itemize Deductions:

1. Do you own your house? We need the **1098** Mortgage Interest & Real Estate Tax information
  - a. do you have a second mortgage?  Yes  No
2. **Massachusetts Resident:** Did you pay Vehicle Excise Tax? \$ \_\_\_\_\_
3. Did you make Charitable Contributions in 2023? How much \$ \_\_\_\_\_ (Need receipts or proof of contribution)
4. Did you have unusually large Medical Expenses  Yes  No \* If Yes, you will need to discuss this with your Tax Preparer

Do you have Children/Dependents living with you?  Yes  No

Section A

If yes, complete the following questions: \*\* If new to DFS, provide copies of SS Cards for all Dependents.

- Birth of a child in **2023** (Need copy of SS Card)
  - o Name: \_\_\_\_\_ DOB \_\_\_\_\_ SSN# \_\_\_\_\_ Months in home: \_\_\_\_\_
- Adopted a child in **2023** (Need copy of SS Card)
  - o Name: \_\_\_\_\_ DOB \_\_\_\_\_ SSN# \_\_\_\_\_ Months in home: \_\_\_\_\_
- Change in Dependents (No longer claiming) Who are you removing? Name: \_\_\_\_\_
- Did you have Day Care Expenses in **2023**? \$ \_\_\_\_\_
  - o Providers Name: \_\_\_\_\_ EIN# \_\_\_\_\_

Self Employed?  Yes  No

Section B

If YES, answer the following questions and schedule a meeting with the preparer.

1. Do you have an office in your home?  Yes  No
2. Did you make any Estimated Tax Payments?  Yes  No
  - If yes: Federal: Q1 \$ \_\_\_\_\_ State: \$ \_\_\_\_\_ Date: \_\_\_\_\_
  - Federal: Q2 \$ \_\_\_\_\_ State: \$ \_\_\_\_\_ Date: \_\_\_\_\_
  - Federal: Q3 \$ \_\_\_\_\_ State: \$ \_\_\_\_\_ Date: \_\_\_\_\_
  - Federal: Q4 \$ \_\_\_\_\_ State: \$ \_\_\_\_\_ Date: \_\_\_\_\_
3. Do you use your vehicle for Business purposes?
  - a. If yes, provide mileage: Business Miles \_\_\_\_\_ Total Miles for the Year \_\_\_\_\_
  - b. Excise Tax: \$ \_\_\_\_\_ / Vehicle Loan Interest \$ \_\_\_\_\_ / Tolls & Parking \$ \_\_\_\_\_
4. Did you receive any of the following?  1099-NEC  1099-MISC

Banking Information – For Direct Deposit or Direct Debit

Section C

Do you want Direct Deposit? (If you are filing jointly, both parties must be on the bank account)  Yes  No

Do you want Direct Debit? (Payment to IRS or State from your bank account)  Yes  No

We need the following information:

Bank Name	Routing No.	Account No.	Checking or Savings
_____	_____	_____	_____

AUDIT PROTECTION  Yes  No *Ask Tax Preparer for Details - MUST COMPLETE ADDITIONAL FORM*

Other Special Instructions:

\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

**Disclaimer:** Additional time spent on return due to missing or incomplete items may result in an **additional fee**.

This is not an all-inclusive list. There could be other situations that may affect your tax liability.

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