

# COLLINS ACCOUNTING & TAX SERVICE

## TAX RETURN DROP OFF FORM

Please review and complete this checklist, where applicable, in lieu of an appointment. Your extra effort in completing this form assists us to prepare your tax return efficiently and accurately. Your tax professional will contact you shortly to ask any additional questions required to complete your tax return. **Feel free to write any additional information or questions you might have on the back of this sheet. If you have dependents, please complete the Dependent section on the next page.**

CLIENT NAME \_\_\_\_\_ SPOUSE'S NAME \_\_\_\_\_  
**NEW CLIENTS ONLY:** CLIENT DOB \_\_\_\_\_ SPOUSE DOB \_\_\_\_\_  
**NEW CLIENTS ONLY:** CLIENT SSN \_\_\_\_\_ SPOUSE SSN \_\_\_\_\_  
CURRENT PHONE NUMBER \_\_\_\_\_ BEST TIME TO CALL \_\_\_\_\_  
ALTERNATE PHONE NUMBER (If applicable) \_\_\_\_\_  
EMAIL ADDRESS \_\_\_\_\_

Is the address on last year's return still current? ☐ YES ☐ NO (**NEW CLIENTS: provide a copy of last year tax return**)

If no, enter current address: \_\_\_\_\_ Date moved to new address: \_\_\_\_\_

State of residence: \_\_\_\_\_ Did you live and work the entire year in this state? ☐ YES ☐ NO

If no, list other state(s): \_\_\_\_\_

**Please answer the following questions and attach all relevant documentation for tax year 2023 (i.e. W-2s, 1098s, 1099s, K-1s, etc.):**

- Has your filing status changed (e.g. got married, divorced, etc.)? ☐ YES ☐ NO
- Did you and/or your spouse receive a Form W-2 this year? ☐ YES ☐ NO
- Did you and/or your spouse receive any interest, dividends, or capital gains? ☐ YES ☐ NO
- Did you and/or your spouse receive any distributions from a retirement account? ☐ YES ☐ NO
- Did you and/or your spouse receive social security payments? ☐ YES ☐ NO
- Did you and/or your spouse receive income from self-employment? ☐ YES ☐ NO
- Did you and/or your spouse receive income or incur expenses as an independent contractor (e.g. Shipt, Instacart, DoorDash, Uber)? If yes, please provide documentation. ☐ YES ☐ NO
- Did you and/or your spouse receive rental income? ☐ YES ☐ NO
- Did you and/or your spouse receive income from any other sources? ☐ YES ☐ NO
  - If yes, please explain: \_\_\_\_\_
- Are you claimed as a dependent on someone else's tax return? ☐ YES ☐ NO
- Are you a member of the military? ☐ YES ☐ NO
- Do you own a home? ☐ YES ☐ NO
- Did you, your spouse or your dependents have college tuition? ☐ YES ☐ NO
  - If yes, please attach copies of your Form 1098-T and details of out-of-pocket costs.
- Did you and/or your spouse make any estimated tax payments? ☐ YES ☐ NO
- Did you and/or your spouse pay any student loan interest? ☐ YES ☐ NO
- Did you and/or your spouse have any unreimbursed educator expenses? ☐ YES ☐ NO
- Did you and/or your spouse have any cash or non-cash charitable contributions? ☐ YES ☐ NO
- Did you and/or your spouse pay any unreimbursed medical expenses? ☐ YES ☐ NO
- Did you and/or your spouse contribute to an IRA or Roth IRA? ☐ YES ☐ NO
  - If yes, please indicate account type and amount contributed: \_\_\_\_\_
- Did you and/or your spouse have any other deductions or contributions? ☐ YES ☐ NO
  - If yes, please explain: \_\_\_\_\_
- Did you receive (as a reward, award or payment for property or services) or sell, exchange, gift, or dispose of a digital asset? ☐ YES ☐ NO
- Did any member of your household have healthcare coverage through the Marketplace? ☐ YES ☐ NO
  - If yes, please provide copies of Form 1095-A
- Did you receive any distributions from a Health Savings Account (HSA) during the year? ☐ YES ☐ NO
- Did you purchase a new or previously owned clean vehicle (electric vehicle, plug-in hybrid, etc.) during the year? If so, provide the report the dealer is required to provide you. ☐ YES ☐ NO

**\*\*If there is additional information or notes you would like to provide that are necessary in the preparation of your tax return, please include details on the next page. \*\***

If you are entitled to federal and/or state refunds, would you like to set up direct deposit ☐ YES ☐ NO

If yes, please attach a copy of a voided check or check the box below if you are a current client:

☐ Direct Deposit information is the same as last year.

By signing below, you are acknowledging that you have to the best of your knowledge, fully disclosed all necessary and accurate information for the preparation of your tax return(s) with the enclosed documents attached or written on this drop off form. If the information is not here, it will not be on your tax return and an amended return may be required at an additional fee plus any penalty and interest assessed by the IRS on the amended tax return.

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

***ONLY COMPLETE NEXT SECTION IF YOU HAVE DEPENDENTS THAT YOU CLAIM  
ON YOUR TAX RETURN***

**Please answer the following questions and attach all relevant documentation for tax year 2023:**

- Is your dependent a citizen, national, or resident of the United States? ☐ YES ☐ NO
- Did your dependent(s) live with you for more than half of the year? ☐ YES ☐ NO
- Did you provide more than half the support for your dependent(s)? ☐ YES ☐ NO
- Could another person claim the dependent(s)? ☐ YES ☐ NO
- Did your dependent(s) earn income during the year? ☐ YES ☐ NO
  - If so, please indicate the name of the dependent(s) and total income earned \_\_\_\_\_
- Did you incur childcare expenses? ☐ YES ☐ NO
  - If yes, please provide a statement from the childcare provider with the Name, EIN, or SSN, address, and amount paid.
- Did you and/or your spouse make any contributions to a 529 plan? ☐ YES ☐ NO
  - Amount of contribution and name of plan (if statement is not attached): \_\_\_\_\_
- Did you have any children under age 19 or a full-time student under age 24 with more than \$2,500 of unearned income? ☐ YES ☐ NO

**Please complete the following for any new dependents in 2023 (please include copy of social security card):**

Name _____	SSN _____
Date of Birth _____	Relationship _____
Name _____	SSN _____
Date of Birth _____	Relationship _____

\*If more than two, please enter additional information on the back of this sheet.

*\*If you claim the Earned Income Credit, we must have 1 form of proof of residency per child\**

*\*\*Please note that you may not claim the Child Tax Credit (CTC) or the Additional Child Tax Credit (ACTC) if your dependent did not live with you for more than half the year. \*\**