

Youngs Tax Service

Drop-off Form

PERSONAL INFORMATION

Tax Year _____

	Taxpayer	Spouse
Last name**		
First name**		
Middle initial and suffix		
Social security number**		
Occupation		
Work phone/ext		
Cell phone		
Email address		
Driver's License (DL) state		
DL number		
DL issue date		
DL expiration date		
Birthdate		
Street address / Apt		
City / State / Zip		

DEPENDENT INFORMATION

Add additional sheet if needed for dependents

<u>Name</u>	<u>SSN</u>	<u>Relationship</u>	<u>Date of Birth</u>	<u>Months lived with</u>

**Note: If we prepared your return last year, please complete the ** fields and any other fields that have changed. Otherwise please complete all the above information.

Please note the quantity for all relevant items. Add additional sheets if necessary.

<u>Form / Item</u>	<u>Taxpayer</u>	<u>Spouse</u>	<u>Joint</u>
W-2s			n/a
1099-Rs			n/a
1099-MISC			n/a
1099-G Government payments			n/a
SSA-1099 Social security benefit statement			n/a
RRB 1099 Railroad retirement statement			n/a
1099-C Cancellation of debt			
1099-INT interest statement			
1099-DIV dividend statement			
1099-B proceeds statement (usually sales of stock)			
1099 Consolidated statement (from investment accounts)			
1099-SA Distributions from HSA/MSA			n/a
1098 Mortgage interest statement			
1098-T Tuition statement (use Joint column for dependents)			
Settlement statement from sale of home			
Settlement statement from purchase of home			
Other:			