**AUDIBERT, BISSONNETTE & COMPANY, LLC**
**102 Wolcott Road, Wolcott, CT 06716   Phone: 203-879-4329  Fax: 203-879-7842**

**CLIENT DROP-OFF WORKSHEET – TAX YEAR 2021**

**Today's date: _________________**

Name: ____________________________________________________________________

Changes only:  Address ______________________________________________________

Home #________________________   cell #__________________________

Email: ________________________________________________________

Thank you for choosing Audibert, Bissonnette & Co., LLC to prepare your 2021 income tax return.

Please provide us with ALL your 2021 tax forms.  Tax forms may be mailed or available on-line. Incomplete information will delay processing.  Please review and complete the attached checklist for forms, letters, and additional documentation required to complete your return.

If you are claiming dependents on your tax return that also must file their own tax return – would you like us to prepare their return? ____YES ____NO
If we do not prepare their return, it is important that they do not claim themselves on their return.

Would you like any refunds to be directly deposited to your bank account? ____YES ____NO
Would you like any tax payments to be automatically withdrawn from your bank account? ____YES ____NO
If YES to either of the above – is this the SAME ACCOUNT as last year? ____YES ____NO
If NO – please provide a VOIDED CHECK.

We are required to electronically file your tax return (E-FILE), which provides more accurate processing and faster refunds. If you do NOT want to E-FILE, we will provide you with an "OPT-OUT" form to be completed.

In an effort to reduce paper consumption, your client copy of the tax return will be provided electronically via our Secure File Portal.  If you would like a paper copy of the tax return, there will be a $25.00 fee.  This fee will be waived for clients who are 65 of older and veterans. Check here for paper copy____YES

All personal income tax return invoices are due and payable prior to filing.  In the event of non-payment, you will be responsible for legal fees to collect the debt owed.  For your convenience, we accept MasterCard, Visa, Amex, checks or cash.

## Tell us about any changes from last year, for example filing status, dependents, etc.

______________________________________________________________________________

______________________________________________________________________________

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**PLEASE READ AND SIGN THE NEXT PAGE**

**PLEASE NOTE**: By signing below, you confirm your understanding of the terms of our agreement and the nature and extent of the services we will provide. Based on the information you provide, we will prepare your federal and applicable state income tax returns. We will not audit or otherwise verify the data you submit, although we may ask you for clarification when necessary. All the information you give us will, to the best of your knowledge, be correct and complete and include all information necessary for the completion of your tax return. We will also prepare any required estimated tax vouchers. If you anticipate a substantial change in income or withholding taxes for the next tax year, please advise us as soon as possible. We will then determine whether an adjustment should be made to your tax estimates. Your returns are subject to review by the taxing authorities. Any items that may be resolved against you by the examining agent are subject to certain rights of appeal. In the event of an examination, we will be available upon request to represent you, or to review the results of any examination. Billing for these additional services will be at our standard rates. You should retain all the documents, canceled checks and other data that support your reported income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the returns, so you should review them carefully before signing for them. The charges for our services are based on our fee schedule and the complexity of the returns.

________________________________________

Taxpayer Signature

**PRIVACY POLICY:** The privacy of your client information has always been important to us, and we have always been bound by professional standards of confidentiality. We collect nonpublic personal information about you that is provided by your or obtained by us with your authorization. This information may come from various sources, including information we receive from personal interviews, phone calls, e-mails, worksheets, and other documents necessary to provide professional services to you. We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as permitted by law or when necessary to process transactions requested by a client. We restrict access to nonpublic personal information about you to members of our firm who need to know that information in order to provide you with professional services. We retain records relating to the professional services that we provide you in accordance with accounting and governmental standards. We employ physical, electronic, and procedural security safeguards to protect your nonpublic personal information. Your confidence and trust are important to us. If you have any questions or concerns regarding the privacy of your nonpublic personal information, please contact us.

**Individual Tax Checklist:**

**Forms/Letters needed:**

| | | | |
|---|---|---|---|
| - IRS Letter 6475 (3rd Economic Impact Payment) Required | _____Yes | ______No | _____N/A |
| - IRS Letter 6419 (Advance Child Tax Credit Payments) | _____Yes | ______No | _____N/A |
| - Form W-2 from employers | _____Yes | ______No | _____N/A |
| - Form K-1's from partnerships, trusts & estates | _____Yes | ______No | _____N/A |
| - Form 1099 INT, DIV & B (interest,dividends,stock sales) | _____Yes | ______No | _____N/A |
| - Form 1099-G - Unemployment Compensation | _____Yes | ______No | _____N/A |
| - Form 1099-SA - HSA account statements | _____Yes | ______No | _____N/A |
| - Form 1095-A (CT Access Health statement) | _____Yes | ______No | _____N/A |
| - Form 1098 Mortgage Interest paid | _____Yes | ______No | _____N/A |
| - Form 1098-T - Tuition paid | _____Yes | ______No | _____N/A |
| - Form 1098-E - Student Loan interest paid | _____Yes | ______No | _____N/A |

**Questions (if YES, provide DETAILS and DOCUMENTATION):**

| | | | |
|---|---|---|---|
| - Did you have VIRTUAL CURRENCY TRANSACTIONS | _____Yes | ______No | _____N/A |
| - Do you have FOREIGN financial assets? | _____Yes | ______No | _____N/A |
| - Do you have DONATIONS? (up to $600.00 ded) | _____Yes | ______No | _____N/A |
| - Did you pay Federal or State TAX ESTIMATES? | _____Yes | ______No | _____N/A |
| - Did you make a CHET contribution? | _____Yes | ______No | _____N/A |
| - Did you have DAYCARE expenses? | _____Yes | ______No | _____N/A |
| - Did you pay CAR TAXES and/or HOUSE TAXES? | _____Yes | ______No | _____N/A |
| - Did you buy or sell REAL ESTATE? | _____Yes | ______No | _____N/A |
| - Did you make an IRA contribution? | _____Yes | ______No | _____N/A |
| - Did you obtain a PPP Loan? | _____Yes | ______No | _____N/A |
| - If yes, was it forgiven? | _____Yes | ______No | _____N/A |
| - Did you have to file 1099-NEC or 1099-MISC forms? | _____Yes | ______No | _____N/A |
| - If yes, did you file them? | _____Yes | ______No | _____N/A |
| - Did you have business mileage? | _____Yes | ______No | _____N/A |

- If yes, total business mileage_____________________

And total annual mileage ________________________

**Additional information needed for New Clients Only**

Taxpayer SS#: ________________________________ Birthdate:______________________

Spouse SS#: __________________________________ Birthdate: ______________________

Please list dependents you will claim on your return:

| Name | SS# | Birthdate |
|---|---|---|
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**We will need a copy of last year's return.**