

**"RETURNING" CLIENT INFORMATION SHEET**



**DLM SERVICES**  
Tax Preparation & Notary

Tax Year: \_\_\_\_\_ Date: \_\_\_\_\_  
 MARITAL STATUS:      SINGLE                      MARRIED

**CHECK ALL THAT APPLY:**

- You obtained a **Marriage License**?                      Date of Marriage? \_\_\_\_\_
- You and your spouse **lived apart** during tax year?                      Did you live together at any time after June 30?
- Someone else **claimed** you (or spouse) as a dependent. If so, who claimed you & why:
- You received Pandemic Unemployment Assistance (PUA for 2020/2021).
- You are holding a **Business License** as of December 31, 2023?

**FOR SINGLE/MARRIED FILING SEPARATELY FILERS ONLY**

- You have no mortgage or your home is paid off.                      You pay more than 50% of the rent.
- You pay more than 50% of the mortgage.                      You pay more than 50% for utilities in your home.
- You share rent.                      You pay more than 50% for groceries in your home.
- You pay more than 50% of rent (utilities included)                      Another person in the household has a higher income?  
If yes, Who? \_\_\_\_\_

OTHER LIVING ARRANGEMENT

**Answer the following if you or your spouse were a college student, had tuition, or had education expenses:** (The following schools are not Eligible for Education Credit: Mariacy, GCA Trades Academy, Guam Marianas Trade Center, or any International College/University not participating in U.S. Department of Education Financial Aid Program.)

	Tuition covered by:	Full or Part-Time Student?	Year in College	Name of College:
Taxpayer:	If not covered, method of payment:			
Spouse:	If not covered, method of payment:			

\* Student Loans are not considered part of FAFSA; please provide documentation.

\*\* If Tuition is covered by Merit Scholarship, it will be reflected on the Tuition Statement Form 1098-T.

**COVID RELATED QUESTIONNAIRE (ONLY IF YOU ARE FILING TY 2020 &/OR 2021)**

**For TY 2021**

I/We received **Advance CTC**. Total amount received: \$ \_\_\_\_\_  
 I/We (dependents) received **3rd EIP**. Total amount received: \$ \_\_\_\_\_

**For TY 2020**

I/We (dependents) received **1st EIP**. Total amount received: \$ \_\_\_\_\_  
 I/We (dependents) received **2nd EIP**. Total amount received: \$ \_\_\_\_\_

**INDICATE HOW MANY DOCUMENTS YOU ARE SUBMITTING:**

- |                                     |                                     |  |
|-------------------------------------|-------------------------------------|--|
| Wage Statement (W-2)                | Tuition Statement (1098-T)          | Mortgage Interest Statement (1098)       |
| Corrected W-2 (W-2C)                | Pre-K Receipts                      | Paid Real Estate Taxes                   |
| Miscellaneous (1099-MISC/NEC)       | Daycare Statement/Receipts          | Charitable/Religious Contributions       |
| PUA (1099-G)                        | Deed Program Receipts               | Schedule K-1                             |
| Received Interest (1099-INT)        | Lottery or Gambling Winnings (W-2G) | Business/Professional License            |
| Received Dividends (1099-DIV)       | Sold Stocks or Bonds                | GRT                                      |
| Form 1099-R                         | Marriage License/Certificate        | Totaled Gambling Loss \$ _____           |
| Social Security Benefits (SSA-1099) | Death Certificate                   | Totaled Medical/Dental Expenses \$ _____ |
| Health Savings Account (1099-SA)    | Legal Guardianship/POA              | Other: _____                             |