

Tax Checklist

This form is to assist you in gathering your income tax information. Use it as a guide for information you need to provide. Please call or e-mail with any questions.

GENERAL INFORMATION:

- First, middle initial, and last names of taxpayers and dependents as written on the Social Security cards, and dates of birth for taxpayers and all dependents, *especially* new dependents.
- Address (city, state, zip), telephone number, and e-mail address.
- Marital Status: Single ___ Married ___ Head of Household ___ Separated ___
- Number of Dependents: ___ Did any dependents have any income? Yes ___ No ___
- Do all dependents live with you? Yes ___ No ___

TYPES OF INCOME AND TAX REPORTING FORMS:

- Wages: All W-2's
- Pensions/Retirements: 1099-R
- Social Security: SSA-1099
- Bank Interest: 1099-INT
- Dividends: 1099-DIV
- Commissions: 1099-MISC
- Tips and Gratuities
- Sales of Stock, Mutual Funds: 1099-B
- Income from Rentals: All 1099-MISC
- Business Income: All 1099-MISC & 1099-K
- Farm Income
- Alimony Received: Total amount
- Unemployment: 1099-G
- State Tax Refund: 1099-G
- Miscellaneous: Jury Duty, Gambling, Other

BUSINESS INCOME & EXPENSE ITEMS: This list is not all encompassing. If you don't see an expense listed below, ask.

| | | |
|------------------------------|----------------------|----------------------------|
| Total (Gross) Income | Advertising | Auto: Parking &Tolls |
| Business Phone Expense | Cell Phone Expense | Subcontractors |
| Commissions Paid | Insurance | Interest Paid |
| General Office Expense | Rent/Lease Fees Paid | Legal or Professional Fees |
| Repairs | Cleaning/Maintenance | Dues & Publications |
| Equipment/Supplies | Tools | License Fees/Taxes Paid |
| Utilities | Education Expense | Association Dues |
| Bank/Credit Card Fees | Postage | Meals/Entertainment |
| Business Miles & Total Miles | Asset Purchases | Hotel/Travel Expense |

ADDITIONAL ITEMS FOR RENTAL PROPERTIES:

| | | |
|---------------------|----------------|---------------------------|
| Keys | Condo/PUD Fees | Management Fees |
| Mortgage Statements | Yard Work | Termite Treatment Expense |
| Utilities | Mileage/Travel | Other |

DEDUCTIONS/CREDITS TO INCOME:

| | | |
|---|------------------|---------------------------|
| Self-employed Health Insurance | IRAs /Keogh/SEPs | Retirement Saver's Credit |
| Medical Savings Account | Teacher Expenses | Adoption Expenses |
| Penalty on Early Withdrawal of Savings | | Moving Expenses |
| American Opportunity/Lifetime Learning/Student Loan Interest/Education Expenses | | |

* Total Alimony Paid: Must have name and Social Security number of recipient, and amount paid.

* Child Care/Day Care Credit: Must have name, address, Social Security number or EIN of provider, and amount paid per child.

ESTIMATED TAXES PAID:

Date of payment and amount paid for *each* Federal and State quarterly tax estimate.

ITEMIZED DEDUCTIONS:

MEDICAL

| | | |
|------------------------|---|------------------------|
| Medical & Dental bills | Prescriptions | Glasses/Contact Lenses |
| Out-of-pocket expenses | Medical miles | Lab fees |
| Hearing Aids | Medical/dental/long term care insurance | |

TAXES

| | | |
|---------------------------|-----------------------|-----------|
| Prior year state tax paid | City/local tax | Sales tax |
| Real estate tax | Personal property tax | Other |

CHARITABLE CONTRIBUTIONS

| | | |
|----------------------------------|------------------|--------------------|
| Church | Boy/Girl Scouts | United Way/CFC |
| March of Dimes | American Heart | Easter Seals |
| Red Cross | MDA/MS | YWCA/YMCA |
| Salvation Army | FoodBank | Payroll deductions |
| Out-of-pocket Volunteer Expenses | Charitable miles | Other |

Date of donation, list and Fair Market Value for *each* donation of household goods and clothing items donated to a Charitable Organizations.