

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, and Zip), telephone number, and email 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/ Retirement: 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 and 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 do not 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 Expenses

Additional Items for Rental Properties:

- Keys
- Condo
- 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 the 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 estimates.

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

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