

New Client Income Tax Checklist

General Information

- Copy of Last Year's Tax Return
- Social Security Cards for all in household
- Birthdays for all in household
- Dependents Name and Birthday's
- Address & Phone Number
- Bank Account information if you desire direct deposit

Income

- All Forms for Wages, Salaries, and Tips: W-2's
- Interest Income Statements: 1099 INT & 1099 OID
- Dividends: 1099 DIV
- Alimony Received or Paid
- Miscellaneous Income: 1099 MISC
- Retirement Income: 1099 R
- Unemployment Income: 1099 G
- Social Security Income: SSA 1099
- Cancellation of Debt: 1099 C
- K1 Income from Partnerships, Trusts, and S Corporations
- Federal Tax Refund
- State Tax Refunds
- Sales of Stock, Land, etc.: Form 1099 B
- Sales of Real Estate: 1099 S

Business Income

- Business Income & Expenses
- Rental Income & Expenses
- Farm Income & Expenses
- Miles Traveled for Business Purposes

Adjustments

- Educator Expenses
- Health Savings Account
- Moving Expenses (if work related)
- IRA Contribution
- Student Loan Interest
- Tuition & Fees: 1098 T
- Education Expenses and year of schooling you are currently in

Deductions

- Medical Insurance Paid out of Pocket
- Unreimbursed Medical & Dental Expenses (including Prescriptions)
- Miles Traveled for Medical Purposes
- IRS or State Tax Payments made (Estimated and 1040 Previous Year)
- Real Estate Taxes
- Personal Property Taxes
- Vehicle Registrations (that includes the breakdown of fees)
- Mortgage Interest: Form 1098
- Refinance or Purchase of a Home
- Gifts by Cash or Check
- Non-Cash Gifts (if more than \$250.00, provide receipt)
- Miles Traveled for Volunteer Purposes
- Unreimbursed Work Expenses
- Union & Professional Dues
- Union Dues
- Childcare Expenses
- Childcare Provider Information (Name, Address, Phone and ID #)
- Safe Deposit Box Expense
- Investment Expenses

*****VERIFICATION AND PROOF OF HEALTH CARE COVERAGE FOR EACH MONTH, FOR EVERY MEMBER CLAIMED ON YOUR RETURN*****