



Tax Preparation Checklist

Checklist of Information Needed to Complete Your Tax Return

If any item listed applies to you, check the box and attach the information

General Information

- If you are a new client or have had a change of address, email, or phone number, please complete the demographic information on page 3 of this checklist and provide a full copy of your 2017 federal/state tax returns.
- Did you have a child or other dependent that should be added to your return in 2018? If so, please complete the demographic information on page 3 of this checklist.
- Provide a copy of the front of a valid driver license for yourself and your spouse (we are now required to input this information before e-filing your tax return as an additional security measure)

Income Information

- Wages (Form W-2)
- Interest Income (Form 1099-INT)
- Foreign bank accounts, income +/- or paid taxes
- Dividend Income (Form 1099-DIV)
- Stock Sale Information/Capital Gains (Form 1099-B)
 - Each stock sale: If not included on 1099-B, Date purchased, number of shares bought, amount paid
- Other Income
 - Alimony Received¹
 - Unemployment Compensation (Form 1099-G)
 - Social Security Benefits (1099-SSA)
 - Disability Income
 - Jury Duty
 - Pension Distributions (Form 1099-R)
 - State / Local Refunds (Form 1099-G)
 - Gambling Income (Form W-2G)
 - Tip Income
 - Scholarships (Form 1098-T)
 - Education Savings Account Withdrawal (Form 1099-Q)
 - Bartering Income (Form 1099-B)
- Small Business (self-employed or independent contractor business owner)
 - Business Income (Form 1099-MISC plus items not on 1099-MISC)
 - Business Expenses (We will discuss possible deductions and accounting for them)
 - Vehicle Information (Year/Make/Model, business miles driven, total miles driven)
- Rental Property
 - Rental Income (Form 1099-MISC)
 - Related Expenses (Provide list)
- Schedules K-1 from Partnerships, S Corps, Trusts
- Sale of Real Estate
 - Closing Statement – Sale of Property
 - Closing Statement – Purchase of Property
 - List of additions/improvements while you owned the property.

¹ Specify if divorce decree was entered after 12/31/18.



Healthcare Information

Did each person on your tax return have health insurance for all of 2018? Yes No

Where was the policy obtained (Circle One):

Employer / Medicare / Medicaid / Marketplace (Exchange) / Other

If you had coverage for only part of the year, which months?

Deduction Information

- IRA Contributions
- SEP, Simple, Keogh Plans
- Student Loan Interest (Form 1098-E)
- Alimony Paid²
 - Recipient Name and SS #
- Investment Interest
- Medical Expenses (if over 7.5% of income)
 - Medical mileage
 - Out of Pocket Medical
- Real Estate Taxes
- Other Taxes (including Sales tax paid on the purchase of autos, boats and RVs for personal use)
- Annual Vehicle Registration Statement (front and back) showing personal property taxes paid
- Mortgage Interest (Form 1098)
- Investment Interest
- Cash and Noncash Charitable Contributions (provide list with name of charity/organization and amount. If in-kind contribution, briefly describe items)

Tax Credits and Payment Information:

- Child Care Expenses
 - Provide name, address, SS# or EIN, and amount paid for each child
- Estimated tax payments (provide documentary proof of each payment made)³
- Legal papers for adoption, divorce or separation involving custody of your dependent children
- Tuition Statements (Form 1098-T) & Education Expenses
- Energy or vehicle tax credit information

Sales & Use Tax

Total goods purchased for which state sales tax was not paid: _____

Direct Deposit or Refund Information:

- Bank Name _____
 - Checking Savings Routing _____ Account _____
- Individual Retirement Account Name _____
 - Routing _____ Account _____

² Specify if divorce decree was entered after 12/31/18.

³ If you are unable to provide cancelled check images, online confirmation receipt, or bank statements showing each payment, you can download your 2018

Account Transcript for free from the IRS online: <https://www.irs.gov/individuals/get-transcript>



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New Clients

| | Taxpayer | Spouse |
|---------------|-----------------|---------------|
| Name | | |
| Date of Birth | | |
| Address | | |
| Phone Number | | |
| Email Address | | |

Children/Dependents:

| Name | Does the Child have Income over \$2,100 | Date of Birth | Social Security Number |
|-------------|--|----------------------|-------------------------------|
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