Income Tax Checklist

Taxpayer's name	SSN	
Spouse's name	SSN	
Taxpayer's occupation	Birthdate	Blind?
Spouse's occupation	Birthdate	Blind?
Address		

Phone

Did you receive, sell, send, exchange or acquire any financial interest in virtual currency? Y or N

DEPENDENTS					
Name		SSN*	Birthdate	Relationship	
1)					
2)					
3)					
4)					
Income	Support by you	Support	by others	Months in your home	
1) \$	\$	\$			
2) \$	\$	\$			
3) \$	\$	\$			
4) \$	\$	\$			
* You must provide a S	Social Security number for all depend	lents.			

PAPERWORK TO BRING

ECONOMIC IMPACT PAYMENTS

1099-DIVs

Other 1099s

K-1s	Property tax bill

W-2s

Last year's tax return

Amount received for first payment

Amount received for second payment

___1099-INTs

Taxpayer & Spouse \$ \$

Dependents \$_ \$

OTHER INCOME

SALE OF STOCK OR OTHER PROPERTY	Cost	Sales price

Please bring supporting documents (Form 1099-Bs and statements)

- If you have a business or rental property, please attach an • income/loss statement and supporting documents.
- If you borrow money and the debt is canceled or forgiven, • please include Form 1099-A and/or 1099-C.

If you have other income, please bring all figures and supporting data. Examples:

Health insurance coverage information

Tips		
Pensions/annuities		
Jury duty		
Unemployment (1099	9-G)	
Alimony received*		
Prizes (1099-MISC)		
Self-employment		
Partnerships and S c	orporations	
Estates & trusts		
Social Security benef	its	
Scholarships & fellow	<i>iships</i>	
Tax refunds		
Royalties		
Nontaxable income		
Gambling		
Hobby income		
Other		

* Not taxable for divorces commencing after Dec. 31, 2018

Deductions and Credit Items

RETIREMENT		INTERE	EST EXPENSE	
Contributions to a traditional IRA Taxpayer Date Spouse Date Contributions to a Roth IRA Taxpayer Date		Home mortgage (1098) _ Home mortgage – pd. to in _ (Include name and SSN of		
Spouse Date Penalty for early withdrawal Alimony pd. (can't deduct for divorces commencing after 12/	/31/18)	Investment interest** Interest pd. on student loar	ns (1098-E)	
Self-employed health insurance Keogh, SEP & SIMPLE contributions		CONT	RIBUTIONS	
MEDICAL EXPENSES Medical savings account (MSA) contribution Health savings account (HSA) contributions Insurance & Medicare premiums Prescriptions Eyeglasses Doctors Dentists Hospital Ambulance	IS	Other cash contributions Charitable auto mileage Property donated for which receipts (fair market value	e)	
Medical auto mileage Other medical travel expenses		 For 2020, taxpayers using the above-the-line charitable contr 	ibution of up to \$300.	e allowed an
Hearing aids & batteries Other medical expenses Reimbursements		 CASUALTY The following expenses ma presidentially declared disast 		a
TAXES Real estate tax Personal property tax* City/county tax* Sales tax		Cost of property lost Fair market value of proper Insurance reimbursement re	ty	
Other* Estimated Taxes State	Federal	 Only active military personn deductions. 		
Date pd.Date pd.Date pd.Date pd.Date pd.		Travel & lodging Moving household goods Total moving miles		
		S – Bring list of monthly totals		
Provider's name		Address	ID# of provider(s)	Amount pd.

EDUCATION CREDITS (1098-T)					
Name of institution	Tuition pd.	Who attended	When cl	asses began	

LOANS: If you borrowed money during the year, bring a list showing the amounts, dates and use of proceeds.

* Taxpayers who itemize can deduct their state individual income, sales and property taxes up to a limit of \$10,000 in total.

** For taxpayers who itemize, your investment interest expense deduction is limited to your net investment income.