



2020 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 email with any questions.

GENERAL INFORMATION

- First, middle initial, and last names of taxpayers and dependents as written on the Social Security cards.
- Dates of birth for taxpayers and all dependents, *especially* new dependents.
- Address (city, state, and zip), telephone number, and e-mail address.
- Marital Status: Single ___ Married ___ Head of Household ___ Separated ___ Registered Domestic Partners ___
- Number of Dependents: ___ Did any dependents have any income? Yes ___ No ___
- Did all dependents live with you for 6 months or more? Yes ___ No ___

FOREIGN INCOME

- Did you receive a distribution from, or were you a grantor or transferor for a foreign trust?
- Did you have a financial interest in or signature authority over a financial account located in a foreign country?
- Did you have any foreign financial accounts, foreign financial assets, or hold interest in a foreign entity?

TYPES OF INCOME & TAX REPORTING FORMS

- Wages: All W-2s
- Pensions/Retirements: 1099-R
- Social Security: SSA-1099
- Bank Interest: 1099-INT
- Dividends: 1099-DIV
- Commissions: 1099-MISC
- Tips and Gratuities
- Affordable Care Act Reporting: Form 1095-A
- 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
- K-1 forms from Partnership, S-Corporation, or Trust

BUSINESS INCOME & EXPENSE ITEMS – If you don't see an expense listed below, please ask.

Total (Gross) Income

- Advertising
- Asset Purchases
- Auto: Parking &Tolls
- Bank/Credit Card Fees
- Business Phone Expense
- Business Vehicle:
 - ___Auto
 - ___Date Placed in Service
 - ___Business Miles
- ___Total Miles
- Cell Phone Expense
- Cleaning/Maintenance
- Commissions Paid
- Contractors/Subcontractors
- Dues & Publications
- Education Expense
- Equipment/Supplies
- General Office Expense

- Hotel/Travel Expense
- Insurance
- Interest Paid
- Legal or Professional Fees
- License Fees/Taxes Paid
- Meals/Entertainment
- Postage
- Rent/Lease Fees Paid
- Repairs
- Tools
- Utilities

ADDITIONAL ITEMS FOR RENTAL PROPERTIES

- Days Rented ____
- Condo/PUD Association Fees
- Gardening/Yard Work
- Management Fees
- Room Rentals (in home)
- Mileage/Travel
- Mortgage Interest
- Termite Treatment
- Vacation Rental
- Keys/Other
- Property Tax
- Utilities

DEDUCTIONS/CREDITS TO INCOME

- Adoption Expense
- Alimony Paid*
- Child Care Expenses: ____Provider Name
____Phone Number ____EIN ____Amount Paid
- Education Expenses
- IRAs/Keogh/SEPs (Form 5498)
- Medical Savings Account (5498-SA/1099-SA)
- Moving Expenses
- Penalty on Early Savings Withdrawal
- Retirement Contributions (not through employer)
- Self-employed Health Insurance
- Teacher Expenses

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

ESTIMATED TAXES PAID

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

HEALTH CARE INFORMATION

- Did you have qualifying health care coverage (employer group plan coverage or government-sponsored coverage) for every month of 2019 for you, your spouse and all members of your family as claimed on your tax return?
- Did you or anyone in your family qualify for an exemption from the health care coverage mandate?
- Did you acquire health care coverage through the Marketplace under the Affordable Care Act? If yes, provide Form(s) 1095-A and 1095-C.
- Did you make any contributions to or receive distributions from a Health Savings Account, Archer MSA or Medicare Advantage MSA?

ITEMIZED DEDUCTIONS

MEDICAL

- Medical & Dental Bills
- Prescriptions
- Glasses/Contact Lenses or Hearing Aids
- Medical Insurance Premiums ____Medical ____Dental ____Long-term Care
- Lab Fees
- Medical Miles
- Out-of-pocket Expenses

TAXES & INTEREST

- Local Tax (found on previous year's return)
- Sales Tax
- Real Estate Tax
- Personal Property Tax (Vehicle License Fee)
- Mortgage Interest
- Mortgage Insurance Premiums
- Investment Interest

CHARITABLE CONTRIBUTIONS

- Cash Contributions *
- Non-Cash Contributions **
- IRA RMD Charitable Distribution
- Out-of-pocket Volunteer Expenses
- Charitable Miles
- Other

* Documentation required.

** Donation dates, list of items donated with Fair Market Value for *each* non-cash donation to a Charitable Organizations are needed.

ADDITIONAL TAX DOCUMENTS

- Completed Organizer
- Year-End Broker Statements
- HUD Statement (for each home sold, purchased or refinanced)
- Signed Engagement Letter
- Notices Received from IRS or FTB

IDENTITY THEFT

Did you receive an Identity Protection PIN from the Internal Revenue Service or have you been a victim of identity theft? *If so, please provide the IRS letter.*

VIRTUAL CURRENCY

At any time during 2019, did you receive, sell, send, exchange or otherwise acquire any financial interest in any virtual currency? If so, please provide details.