

Document Checklist (1040)

Please return this completed form with the tax documentation you submit to our office.

Thank you. **Anything left blank will be considered "Not Applicable".**

Taxpayer Information:

Last Name _____ First Name _____

SS# _____ - _____ - _____ Email _____

Current address _____

Filing Status: Married Single Married Filing Separately

Is this status different from last year? Yes or No

Is there a new dependent to be added this year? If so, please provide date of birth _____

New dependent's legal name _____ SS# _____ - _____ - _____

Any change in dependent status? Yes or No

If so explain who and the date effective _____

Please check the box next to the Tax Documents you are supplying us with

Form 1095- A Health Insurance subsidies, per IRS requirement

W-2's

W-2 G's (gambling Winnings report) and Win/ Loss report to offset Winnings included.

1099's (Miscellaneous income, NEC's, interest/dividends, unemployment, etc.)

1099-C's (Cancellation of Debt)

1099-R's (Retirement/Pension Benefits) SSA-1099's (Social Security Benefits)

K-1's (Income/Loss from Partnerships, S Corporations, Trusts, etc.)

Please include basis statement for S-Corporations when applicable.

Alimony amount received (excluding child support)

Schedule C business, please provide detail expense and income worksheet for the year.

1099-B's Sales of Stocks & Bonds

We must have the original purchase date and cost basis for each item sold.

December 31st Year-End brokerage statements for all intangible assets

All bank statements Jan.-Dec. for **any foreign held bank accounts, brokerage accounts, mutual funds, trusts or other financial accounts owned by you/your spouse or for which you/your spouse have signature authorization.**

Do you own any foreign companies, or foreign non-US income?

Crypto Currency, Virtual/Digital Currency, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency, **if so, please provide documentation and check this box.**

Closing statements for any real estate bought, sold or foreclosed during this tax year, **we must have the original purchase date and purchase price and records for any major renovation expenses.** Include details if property is a rental but previously primary residency.

All income and expense information for any rental properties with the full address and type of property i.e. multi-family, etc. **If a property was not rented the entire year, please indicate the number of days it was rented during the year.**

Deductions/Expense Questions. Check all that apply and provide the information

Contributions made to any retirement plans (IRA's, 401K's, etc.)

Alimony paid in 202_ (excluding child support) with payee's full name & SSN. Divorce date _____

1098's/Mortgage Interest Statements

Property Tax Statement/Bill

Medical/Dental expenses **out-of-pocket** (please provide documentation) & health insurance costs.

Did you make any contributions to an HSA? Yes or No If yes, Amount _____

Sales contract/info for any motor vehicle purchased or leased in this tax year.

Is the vehicle a plug-in vehicle/electric vehicle. Yes or No

Tuition Fees Statement/1098 T's/1099 Q's (for prepaid plans and ESA's)

Student Loan Interest Statements/1098 E's

Child/Dependent Care & Aftercare Expenses & Info/Provider name, EIN/SS#, address & amount

Receipts or canceled checks for all cash contributions

Receipts with amounts for all non-cash contributions

Any estimated tax payments made for 202_, including dates and amounts. _____

Purchased energy efficient appliances, solar panels or made energy efficient improvements

Please note anything else we need to know regarding your tax situation (Examples: employment change, mortgage refinance, change in marital status, new dependent or retired.)

For direct deposit of any refund you may receive:

Direct Deposit Info (please use check or savings passbook to verify):

Bank Name _____ Checking or Savings

Account#: _____ Routing#: _____