Personal Information

Your Full Name ____ DOB ___________

Occupation _____________________________________ Social Security # _______________

Spouse's Full Name ____ DOB __________

Occupation______________________________________ Social Security # _______________

Address ____ City _______________

State ____ Zip ___________________________

Home Phone ______________________________ Cell Phone ___________________________

Email ____

Filing Status (check one)

______ Single

______ Married Filing Jointly

______ Married Filing Separately (not advisable in most cases)

______ Head of Household (single and not married with a dependent)

______ Qualifying Widow (Spouse died in the last three tax years, you were not remarried and have at least one dependent child. If spouse died this year, claim Married Filing Jointly.)

Dependents to Claim (may not be claimed on a different return)

Full Name	DOB	Social Security #	Relationship to Taxpayer	Current Age

Checklist

______ Employee Documents W-2’s

______ Self-Employment / Business Info 1099’s or K1

______ Child Care Expenses (Include Name, Address and Providers Tax ID#) I will need the breakdown for each child if there is more than one.

______ Education Credits Form 1098T or 1098E / Student Loan Interest Deduction and other documents (tuition, room & board, books, other expenses, scholarship, financial aid documents)

______ Out of Pocket School Expenses (Items required by the school, ex. books / Items not required, ex. computer, backpack) Amount required $______________________ Not required but needed $_______________

______ Rental Income (Date Placed in Service, Cost, Rental Income, Expenses, Prior Depreciation) Total Rent received _______________________

______ Retirement Income (1099R, RRB-1099, 401k Withdraw)

______ 1095-A Health Insurance Form (Healthcare.gov)

______ Disability or Social Security Income

______ Savings and Investments (1099-INT, 1099-OID, 1099-DIV, 1099-B, 1099-S, cryptocurrency)

______ Unemployment Compensation (1099-G, TN.GOV)

______ IRA Contributions last year and this far within the tax year

______ Gambling Winnings (W-2G include expenses related)

______ Alimony Received or Paid (Need from Name and tax ID)

______ Health Care Reimbursements (1099-SA, 1099-LTC)

______ Jury Duty Records

______ Other 1099’s (Include all expenses related)

______ Rental Relief Received (If Any)

______ Charitable Contributions (Everyone can deduct up to $300 to qualified organizations)
______ Sale of Home Documents (will need seller disclosure statement)

_____ Adoption Credits

Direct Deposit (can be divided in up to three accounts)

Routing # ______________________________ Account #______________________________

Routing # ______________________________ Account # ______________________________

Routing # ______________________________ Account # ______________________________

Itemized Deductions (most do not qualify to beat standard deduction)

______ Forms 1098 or other Mortgage Documents & Property Tax Paid

______ Amount of Sales Tax Paid on large items, local tax, and state income taxes paid

______ Amounts of cash contributions (church, schools, or other charitable organizations)

______ Amounts of non-cash contributions (should be limited to under $500)

______ Amount paid for health insurance (not payroll deducted)

______ Amounts paid to doctors, dentists, and hospitals including co-pays

______ Amounts paid for prescriptions including co-pays

______ Miles driven for health services, to pick up prescriptions, to specialists, and any paid parking.

______ Expenses for any investments

______ Amount paid for last year's taxes (only applies if you have a business)

______ Copy of last year's tax return (if you are a new client or need amendment)

______ Declared Disaster Area (City, County, Record of Property Loss, Records for Rebuilding, Insurance Reimbursements, any FEMA Assistance, Katrina, Irma, etc.)

______ Did you receive a Homebuyers Credit in 2008?

______ Energy Credits (windows, insulation, roofing, and exterior doors. cost of all repairs and labor.)

______ Did you purchase plug in vehicle or hybrid?
______ Did you buy Build America bonds after 2009?

Business Checklist Only if you have a business, if not disregard

Total Income Received ______________________________________

______ Number of 1099 Forms

______ Total Business Miles Driven ______________________________

______ Personal / Medical Miles ______________________________

______ Parking Fees and Tolls ______________________________

______ Car Registration / Taxes and Fees ______________________________

______ Inventory in $’s   Beginning _________________ Ending __________________
Most do not use inventory methond

______Business use of your home

- Market value of home ______________________________
- Total square feet of home ______________________________
- Area used for business or office size ______________________________
- Total electric bills and water bills ______________________________
- Total other expenses (trash pickup, security, repairs to office area, internet) ______________
- Mortgage Interest Statement Including:
    - Interest ______________________________
    - Mortgage Insurance ______________________________
    - Property Taxes ______________________________
    - Home Owners Insurance ______________________________

____ Business Use Assets for Depreciation (new clients MUST provide prior depreciation) use separate sheet if necessary.

Date in Service	Description/Name of Asset	Market Value

______ Business Expenses (check bank statements, credit card statements, receipts)

- Advertising ______________________________
- Contract Labor ______________________________
- Commission and Fees ______________________________
- Insurance (not health) ______________________________
- Interest paid on loans or CC ______________________________
- Legal and Professional Fees ______________________________
- Office supplies ______________________
- Rent ______________________________
- Rental Equipment ______________________________
- Repairs and Maintenance ______________________________
- Supplies / Materials ______________________________
- Travel ______________________________
- Meals ______________________________
- Cell / Work Phone ______________________________
- Taxi / Uber / Lyft / Bus / etc ______________________________
- Uniforms ______________________________
- Dues and Subscriptions ______________________________
- Postage ______________________________
- Bank Fees ______________________________
- Internet ______________________________
- Security ______________________________
- Wellness ______________________________
- Parking Fees and Tolls ______________________________
- Continued Education ______________________________
- License, Taxes, and Fees ______________________________
- Website and Hosting Fees ______________________________
- Other Expenses ______________________________

Notes: