

**LIST OF POSSIBLE INFORMATION REQUIRED TO FILE TAX RETURNS**

NAME TP/SPOUSE \_\_\_\_\_ S MFJ MFS HOH QW Phone \_\_\_\_\_

ADDRESS \_\_\_\_\_ BIRTHDAY and SSN, TP/ SPOUSE \_\_\_\_\_

**Income**

**Original statements required**

W-2's # \_\_\_\_\_  
1099 misc # \_\_\_\_\_  
1099- INT # \_\_\_\_\_ (interest income)  
1099 -DIV # \_\_\_\_\_ (dividend income)  
1099- R # \_\_\_\_\_ (IRA, pension, 401K dist.)  
1099- B (sale of stock)  
W-2G # \_\_\_\_\_ (gambling)  
Social Security # \_\_\_\_\_ \$ \_\_\_\_\_  
Unemployment # \_\_\_\_\_  
K-1's # \_\_\_\_\_ \$ \_\_\_\_\_  
Jury Duty \$ \_\_\_\_\_

**using your own records**

Alimony Received \$ \_\_\_\_\_  
Alimony Paid \$ \_\_\_\_\_ (name & SSN of payee required)  
Rental Income \$ \_\_\_\_\_ (refer to Sched E worksheet )  
Self Employment Income \$ \_\_\_\_\_ (refer to Sched C WS)  
Sale of Home -need closing documents  
Sale of Land \_\_\_\_\_

**Adjustments, Credits and Deductions**

Educator Expense \$ \_\_\_\_\_  
Student Loan Interest \$ \_\_\_\_\_  
Student Tuition & Fees \$ \_\_\_\_\_ (form 1098-T required)  
Business Loss Carryover \$ \_\_\_\_\_  
IRA contribution TP/SPS \_\_\_\_\_ / \_\_\_\_\_  
ROTH IRA contributions TP/SPS \_\_\_\_\_ / \_\_\_\_\_  
Moving Expenses \$ \_\_\_\_\_  
Mortgage interest (form 1098-INT) see sched A

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**Taxes paid**

Federal Estimated Payments \$ \_\_\_\_\_ and dates \_\_\_\_\_  
State Taxes Paid or refunded from previous year return \$ \_\_\_\_\_ Did you itemize in previous year? Y/N

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**Dependent Children (Name/Date of Birth/ SSN)**

#1 \_\_\_\_\_ daycare paid \$ \_\_\_\_\_  
#2 \_\_\_\_\_ daycare paid \$ \_\_\_\_\_  
#3 \_\_\_\_\_ daycare paid \$ \_\_\_\_\_  
#4 \_\_\_\_\_ daycare paid \$ \_\_\_\_\_

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**Child & Dependent Care Information**

Did your employer withhold dependent care benefits from your paycheck? Y/N

#1 Provider's Name: \_\_\_\_\_ EIN or SSN \_\_\_\_\_  
Amount \$ \_\_\_\_\_

Provider's Address: \_\_\_\_\_

#2 Provider's Name: \_\_\_\_\_ EIN or SSN \_\_\_\_\_  
Amount \$ \_\_\_\_\_

Provider's Address: \_\_\_\_\_

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**Itemized Deductions on Schedule A: N / Y - refer to Schedule A Worksheet**

Medical & Dental, State Taxes Paid, Pers Prop Taxes, Real Estate Tax, Sales Tax, Mrtg Int & Points,  
Investment Interest, Cash/Non-Cash Contributions, Casualty Losses, Tax Return Preparation Fee \$ \_\_\_\_\_

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**Miscellaneous & Employee Business Expenses: N / Y - Refer to 2106 Worksheet**

Notes: \_\_\_\_\_

\_\_\_\_\_

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**Self-Employed Business: N / Y - refer to Sch C Worksheet**

Income not on 1099 Misc. \$ \_\_\_\_\_ Y/E Inventory \$ \_\_\_\_\_

In Home Office: N / Y – complete 8829

Notes: \_\_\_\_\_

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**Notes:**

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