

Tax Organizer Checklist

INSTRUCTIONS

*Below you will find a helpful checklist of items required to complete your tax return. Please **ONLY** provide new / changed information and relevant documents. A secured online folder has been shared only with you. You may place the requested items in the designated folder or provide them in person. Please contact us with any questions / concerns you may have. **Thank you for choosing Appropriate Accounting Services, Your Trusted Personal Accountant.***

General & Client Information

- Tax Payer and Spouse's Social Security Number and Date of Birth
- Dependents' SSN and DOB
- Address at the end of the tax year
- Phone number and email address
- _____

Payments and Penalties

- Estimated Tax Payments made during tax year (if any)
- _____

Income

- W-2's
- 1099's (e.g., -INT, -DIV, -R, -MISC, -G, -B, -S)
- Business Income [and related Expenses & Mileage] (provide Schedule C template)
- Rental & Royalty Income [and related Expenses & Mileage] (provide Schedule E template)
- _____

Deductions

- Mortgage Tax & Interest Statements (1098)
- Vehicle Registration Renewal Notice
- Student Loan Interest Statement (1098-E)
- Tuition and Fees Statement (1098-T)
- Charitable Contribution Statements (e.g., Church, Goodwill, March of Dimes)
- Medical and Dental Expenses (e.g., Insurance premiums paid by you, Doctor & Hospital visits, Prescriptions, Mileage)

- Health Savings Account Statement
- Individual Retirement Account (IRA) Contributions Statement (e.g., Traditional, Roth)
- Business Home Office Deductions (e.g., Utilities, Insurance, Repairs & Maintenance)
- Alimony Paid (SSN of Payee)
- Self-employed Health Insurance Payments
- Job Related Moving Expenses
- Unreimbursed Employee Expenses (e.g., Union dues, Job Travel, Training)
- Tax Preparation Fees paid to perform last year's tax return (if new client)
- Casualty / Theft Loss Information (i.e., Property Description, Amount of Damage, Insurance Reimbursement, Repair Costs)
- _____

Credits

- Child & Other Dependent Care Expenses (include Daycare's name, address & SSN/EIN)
- Residential Energy Credits (i.e., energy-efficient appliances)
- Foreign Taxes paid (if any)
- _____

Additional tax related statements / documents

1. _____
2. _____
3. _____
4. _____
5. _____

Comments / Notes

1. _____
2. _____
3. _____
4. _____
5. _____