

Individual Tax Checklist

Check (✓) the appropriate box for each question in each section.

Section I: Prior Year Tax Return

Yes	No	Unsure	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Did you complete our tax questionnaire?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Do you have your prior three years of tax returns?

Section II: Income

Yes	No	Unsure	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Do you have any W-2s? If so, how many?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Did you have any debt canceled/forgiven by the lender or have a home foreclosure? (Forms 1099-C, 1099-A)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Did you have any income (or loss) from the sale of stocks, bonds, digital assets, or real estate? (Forms 1099-S, 1099-B)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Did you receive interest/dividends from checking/savings accounts, bonds, CDs, or brokerage? (Forms 1099-INT, 1099-DIV)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Did you receive a refund of state/local income taxes? (1099-G)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Did you receive any self-employment income? (Forms 1099-MISC, 1099-NEC, 1099-K)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Did you receive any income processed through a third-party network? (1099-K)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. Did you receive any benefits from a long-term care policy? (1099-LTC)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. Did you have any unemployment compensation? (1099-G)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. Did you receive any scholarships? (Forms W-2, 1098-T)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11. Did you have any original issue discount bonds? (Form 1099-OID)

- | | | | |
|--|--|--|---|
| | | | <p>12. Did you receive any patronage dividends? (Form 1099-PATR)</p> <p>13. Did you receive any distributions from an education savings plan or ABLE account? (Forms 1099-Q, 1099-QA)</p> <p>14. Did you receive any Social Security or railroad retirement benefits? (Forms 1099-SSA, 1099-RRB)</p> <p>15. Did you receive any distributions from an individual retirement account? (Form 1099-R)</p> <p>16. Did you receive income from partnerships, S-Corp., estates, or trusts? (Schedule K-1)</p> <p>17. Did you receive income (or loss) from rental property?</p> <p>18. Did you receive any disability income (payments from worker's compensation or insurance)? (Forms 1099-R, W-2)</p> <p>19. Did you have any other income? (Gambling, tips, alimony, prizes, jury duty, foreign income, Sch K-1, royalties, etc.)</p> |
|--|--|--|---|

Section III: Deductions & Credits

- | | | | |
|--|--|--|---|
| | | | <p>1. Did you receive a tax credit bond? (Form 1097-BTC)</p> <p>2. Did you pay Mortgage interest? (Form 1098)</p> <p>3. Did you give a charitable contribution of a vehicle? (Form 1098-C)</p> <p>4. Did you make interest payments on student loans? (Form 1098-E)</p> <p>5. Did you make mortgage payments or receive assistance with mortgage payments? (Form 1098-MA)</p> <p>6. Did you make any reportable payments to student loans? If so, what year? (Form 1098-T)</p> <p>7. Do you have any business expenses? (Further detail required)</p> <p>8. Do you have any childcare expenses?</p> <p>9. Do you have any gambling losses?</p> <p>10. Do you have any medical expenses?</p> |
|--|--|--|---|

			11. Did you pay a real estate tax bill? 12. Do you have any receipts or acknowledgment letters for gifts to charity? 13. Do you have any rental expenses (summarized by property, type, and amount) 14. Did you make any IRA Contributions?
Section IV: Health Care			
			1. Did you receive healthcare through the marketplace? (Form 1095-A) 2. Did you receive healthcare outside the marketplace? (Form 1095-B) 3. Did you receive healthcare through your employer? (Form 1095-C) 4. Do you have a health savings account or a medical savings account?