

Tax MD and Services

Text/Call: 909-938-1445

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Personal Income Tax Return Checklist Documents Required

Please provide the following documentation when delivering your tax information to us for preparing your individual income tax return. You should receive this information prior to the 31st of January.

Also, please provide any additional documentation so that we may accurately include all taxable events you have incurred throughout the year. If you are uncertain, please provide the information and we will determine the tax impact.

Personal:

- Dependent's Legal Names
- Dependent's Dates of Birth
- Dependent's Social Security Numbers

Income:

- | | |
|--|-----------------------------|
| <input type="checkbox"/> Wages | W-2's |
| <input type="checkbox"/> Miscellaneous | 1099 Misc |
| <input type="checkbox"/> Partnership | K-1 and or 1041 |
| <input type="checkbox"/> Bank Interest | 1099INT and /or B |
| <input type="checkbox"/> Stock Dividends | 1099 DIV - Dividends |
| <input type="checkbox"/> Stock Proceeds | 1099B – Brokerage Statement |
| <input type="checkbox"/> Pension/IRA Distribution(s) | 1099 R |
| <input type="checkbox"/> Gambling Winning(s) | 1099G |
| <input type="checkbox"/> Social Security Benefits | 1099SSA |
| <input type="checkbox"/> Health Savings Account | 1099SA |
| <input type="checkbox"/> 529 Withdrawal(s) | 1099 Q |
| <input type="checkbox"/> Cancellation of Debt | 1099 C |
| <input type="checkbox"/> Real Estate Proceeds | 1099 S |
| <input type="checkbox"/> Unemployment income | 1099 G |

Expenses:

- Tuition 1098T

Contributions:

- IRA Contribution
- Roth Contribution

Deductions:

Medical Expenses:

- Medical (doctor, dentist, eye care)
- Prescription Medication
- Miscellaneous Medical Expenses

Taxes Paid:

- | | |
|--|-----------------|
| <input type="checkbox"/> Personal property taxes | Car taxes |
| <input type="checkbox"/> Real Estate taxes | Municipal taxes |
| <input type="checkbox"/> Investment property taxes | Municipal taxes |
| <input type="checkbox"/> State Sales Tax Paid | |

Interest Expense:

- | | |
|--|------------------------|
| <input type="checkbox"/> Primary Mortgage Interest | 1098 Mortgage Interest |
| <input type="checkbox"/> Home Equity Interest | 1098 Mortgage Interest |
| <input type="checkbox"/> Points paid | HUD Closing statement |

Cash Contributions:

- Summary of all cash, check and credit card donations
- Written acknowledgment of donations
- Mileage summary of all volunteering miles

Non-Cash-Contributions:

- Summary of all non cash donations
- Receipt and summary of non cash contribution

Unreimbursed Business Expenses:

- Union dues
- Professional organizations
- Itemized list of unreimbursed professional expenses
- Mileage Log – professional expenses

Credits:

- Dependent Care Provider Details

Taxes Paid:

- Estimated Payments (Federal and state)
- Household Employee Taxes

Other:

- Stock basis against stock sold

Electronic File:

- Voided blank check for direct deposit

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