

1040 CLIENT CHECKLIST

GENERAL INFORMATION

	Taxpayer	Spouse	
Name			
Address			
City, State, Zip			
Phone #			
Email address			
County of Residence			
County of Employment			
Social Security #			
Date of Birth			
Occupation			
Dependents			
Date of Birth			
Social Security #			

DEDUCTIONS & CREDITS

College expenses (*provide Form 1098-T and detail of tuition & fees, housing, books*)

Indiana College Choice contributions (*provide account #, owner, and beneficiary*)

Designated for higher education	
Designated for K-12 tuition	

Rent paid for Indiana residence		Provide months rented	
Provide landlord name and address			

Solar/wind/fuel cell/geothermal energy costs (<i>provide item purchased, amount, & date</i>)	
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Donations to an Indiana college (<i>provide date, amount, college name</i>)	
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Charitable contributions - noncash (<i>used items in good or better condition</i>)	
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Charitable contributions-cash		Charitable mileage	
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Health insurance premiums (<i>excluding Medicare and pre-tax employer deductions</i>)	
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Medical expenses		Nursing home costs	
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Prescription costs		Medical mileage	
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Long-term care premiums for taxpayer		Indiana Partnership LTC premiums?	
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Long-term care premiums for spouse		Indiana Partnership LTC premiums?	
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HSA contributions (*provide Form 5498-SA and year end check stub if through employer*)

HSA distributions (*provide Form 1099-SA*)

HDHP date coverage began		HDHP Self or Family Coverage	
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Real estate taxes		Mortgage interest/points	
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Auto excise taxes		(<i>provide Form 1098</i>)	
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Sales tax on major purchase		Home equity interest	
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Educator expenses		(<i>provide Form 1098, amount borrowed,</i>	
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Gambling losses		<i>what proceeds were used for</i>)	
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Roth IRA contributions - Taxpayer		Student loan interest (<i>provide Form 1098-E</i>)	
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Traditional IRA contributions - Taxpayer		Investment interest expense	
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Roth IRA contributions - Spouse		Private/home school expense	
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Traditional IRA contributions - Spouse		Child care expense	
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1040 CLIENT CHECKLIST (cont'd)

INCOME

Wages (*provide W-2*)

Investment income (*provide 1099-INT/DIV/B*)

Social security income (*provide 1099-SSA*)

Disability income (*provide 1099-SSA or W-2*)

Retirement income (*provide 1099-Rs*)

Gambling income (*provide W-2G*)

Unemployment compensation (*provide 1099-G*)

S Corp / Partnership income (*provide K-1*)

Forclosure/Cancelled Debt (*provide Forms 1099-C and 1099-A if applicable*)

Provide amounts or checklist/summary:

Self-employed income

Rental income

Farm income

Other miscellaneous income

Did you make all Federal Estimated Income Tax Payments? Please include verification

Date due	April 15, 2019	June 17, 2019	September 16, 2019	January 15, 2020
Date paid				
Amount				

Did you make all State Estimated Income Tax Payments? Please include verification

Date due	April 15, 2019	June 17, 2019	September 16, 2019	January 15, 2020
Date paid				
Amount				

Please answer the following questions marking yes or no. ***For all yes answers please provide us with all pertinent information regarding that transaction.*** All questions pertain to the current tax year.

YES

NO

Give gifts to any individual of more than \$15,000?		
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Noncustodial parent claiming your child (include signed Form 8332)?		
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Did any dependents under 24 have <i>unearned</i> income over \$2,200?		
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Buy or sell a home or investment property?		
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Buy, sell, or exercise stock options?		
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Sell or exchange investments, stocks, bonds, etc?		
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Sell or trade-in a vehicle that has been used for business?		
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Received any correspondence from the IRS or state government?		
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(If yes we will need copies of this correspondence)

Would you like to direct deposit any refund? (no additional charge)		
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**IRS will deposit a maximum of 3 refunds into 1 account, and your name must be on the account.*

Bank Routing Number	
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Bank Account Number	
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Bank Name	
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Bank Account Type (Checking or Savings)	
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