CLIENT CHECKLIST

1) **FOR NEW CLIENTS:** Provide a copy of last 2 years' tax returns, both federal and state.

2) Verify your name, address and phone #'s. (home, work, & cell) and job descriptions.

3) List the social security numbers & dates of birth for each member of your family. Be sure to include children born recently.

4) Include original copies of all W-2's.

5) Include all 1099-INT (bank interest), 1099-DIV (dividends), & 1099-R (retirement, pensions, IRA, etc.) received.

6) Include all 1099-MISC for work done as an independent contractor.
   A). Tell what kind of work was done to earn this money.
   B). List all work related expenses.

7) Sale or purchase of home: Include closing documents (settlement statement).

8) 1098 – MORTGAGE INTEREST.
   A). This should be on your primary residence.
   B). Also include mortgage interest on a second home or home equity loans (motor home, trailer, or boat may qualify).
   C). List all points paid for the purchased of your home. Refinance points are also deductible.

9) Property taxes if you own your own home.
   A). Property taxes on a second home if applicable.
   B). Rent if it applies; include landlord name and address.
   C). Automobile license and trailer tabs.

10) Total sales tax may be used in place of state and local income taxes on itemized deductions. List any big ticket purchased (car, boat, etc.).

11) Receipts from charitable contributions: List cash & donated items separately. Include original cost of items donated if possible. **NOTE:** Additional recordkeeping is required for individual donations exceeding $250. Please refer to Publication 1771 and related IRS documents for details.

12) Unemployment compensation.

13) Contributions made to your Traditional IRA, SEP, or ROTH IRA.

14) Stock sales.
   A). Include purchase price & date.
   B). Include sale price & sale date.

15) Schedule K-1 showing income or loss from partnerships, S-CORPs, Estates, or Trusts (If applicable).

16) Medical Expenses: Itemize the total for each category
   A). Long term health care premium
   B). Medical mileage
   C). Optical/Prescription expenses
   D). Medical expenses
   E). Dental expenses
   F). Premiums for health insurance
   G). Any other out of pocket medical expenses

17) If you started a business during the year:
   A).What type of business?
   B). List all income & expenses.
   C). Did you incorporate or form a partnership? (Include EIN if applicable).

18) Rental property.
   A). Purchase price of property. List the value of the land separately.
   B). Date placed in service.
   C). Income.
   D). List all expenses.
   E). Purchase or sale in current year includes closing document (settlement statement).

19) College tuition payments for you, your spouse, or your dependent(s).
   A). Indicate for each person attending college what year they are working on
   B). Include separate fees such as tuition (1098-T), books, and etc.

20) W-2G's: Gambling or lottery winnings.
   A). Total of verifiable losses that can offset the winnings.

21) State & local tax refunds from the previous year (1099-G).

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22) Alimony paid or received
NOTE: Applies only for divorce/separation instruments before December 31, 2018.

23) Jury duty pay.

24) Any social security benefits received including dependants (SSA-1099).

25) Childcare paid during the year.
   A). List the name, address, social security number or federal tax ID number, and amount paid to provider.

26) **VERY IMPORTANT:** Were there any estimated tax payments made?
   A). Federal – State – Local.
   B). List date & amount of each payment.

27) Moving expenses for a job change.
NOTE: Only applicable for Military Personnel.
   A). Must to be over 50 miles
   B). Non-reimbursed expenses

28) Student loan interest

29) Teacher/Educator expense: Any out of pocket expenses paid by an educator in the performance of their duties.

30) **FOR DIRECT DEPOSIT (OPTIONAL):** We will need your bank's name, routing number and account number. You may include a voided check for this purpose. Direct deposit speeds your refund by 2 to 4 weeks.

31) **E-FILING** is available for all clients.
NOTE: All Michigan tax returns are required by the State of Michigan to be E-filed with exception of final returns for decedents.

32) Include additional 1099's or any documents that you are not sure of.

33) Michigan Sales Tax Due: Resulting from Out-Of-State purchases or from online transactions.

34) **INTEREST INCOME, DIVIDEND INCOME, and CAPITAL GAINS & LOSSES**: Please be sure to bring ***complete*** information regarding transactions, including 1099-Bs.

SELF-EMPLOYED EXPENSES

1) PHONE: Cell Phone, Dedicated Fax line Internet service, additional calls made

2) BUSINESS TRAVEL: Plane fare, Hotels, meals, rental cars, cab fare, tips

3) SEMINARS & EDUCATIONAL EXPENSES: Related to business

4) COMPUTER: Repairs, software, laptops, connect charges at work

5) POSTAGE: Christmas card, birthday cards, advertising

6) SUBSCRIPTIONS & PUBLICATIONS: Money Magazines, Wall Street Journal, etc.

7) BUSINESS CARDS

8) ADVERTISING: Calendars, pens, other promotional items.

9) CLIENT GIFTS: Christmas, birthdays, etc.

10) OFFICE EXPENSES: Paper, pencils, copying expenses, secretarial fees, equipment (computers, fax machines, cell phones), office furniture, misc. items.

11) PROFESSIONAL SOCIETIES DUES & LICENSING FEES: Do not include country club membership fees.

12) BANK CHARGES: Only those related to business.

13) LOG BOOK: Appointments & Mileage

14) MEALS: Breakfast, lunches & dinners.

15) OTHER: All other expenses related to the operation of your business. If questionable bring it to us for clarification of deductibility.

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