



**NEW CLIENT CHECKLIST**

Client Name: \_\_\_\_\_

**Personal Information**

- SSN of taxpayer and spouse
- DOB of taxpayer and spouse
- Driver's License Information
- Copy of last year's return
- Bank Account Number and Routing Number
- Correct Address
- Occupation of Taxpayer and spouse
- Phone Number
- Email Address
- Filing Status

**Dependents**

- DOB of dependents
- SSN of all dependents
- Are dependents attending college? (1098-T)
- Are dependents living with filer all year?

**Income Investments**

- W-2s, 1098, 1099 forms
- Stock Investments (1099B)
- IRA/401K Contributions
- Retirement Inc./Benefits (1099-R, SSA-1099, etc.)
- Unemployment Income (1099-G)
- Dividends (1099-DIV)
- Interest (1099-INT)
- Other Income or Benefits (1099-MISC, etc.)
- Virtual Currency Investments (Cryptocurrency, etc.)

**Home**

- Mortgage Interest Statements (1098)
- Closing Documents
- Energy Efficient Receipts
- Paid Real Estates Taxes
- Mortgage Insurance Premiums
- Sale of Home Documents (1099-S)

**Payments**

- Federal Estimated Tax Payments
- State Estimated Tax Payments

**Rental Property / Schedule E**

- Rental Property Address and Type of Property
- Rental Income/Taxes Paid
- Receipts for Repairs, Inspection, etc.
- Mortgage Interest Statement
- Insurance Premiums
- Depreciation Schedule

**Partnership/S-Corp**

- K-1

**Business (LLC)**

- Tax ID
- Income/Expenses
- Capital Assets/Equipment
- Mileage Log
- Insurance Premiums

**Deductions**

- Qualified Childcare Expenses
- Moving Expenses (Active Military only)
- Amount of prior year Federal & State tax paid
- Charitable Donations
- Educational Expenses (1098-T)
- Alimony Payments
- Gambling Losses (To the extent of winnings)

**Healthcare**

- Form 1095-A, 1095-B, or 1095-C
- HAS Information
- Health Insurance Payments
- Medical/Dental/ Vision Expenses

**Other**

- Debt Cancellation (1099-C)
- Gambling Winnings (W-2G, 1099-MISC, etc.)

**Other Information**

---



---



---



---



---



---