

## Client Checklist – Individual

Please mark if applicable & attached

- Prior Year Tax Returns: Past 2-3 Years
- Prior CPA authorization letter
- Basis Info

### Income Documents/Forms

- |                                   |                                       |
|-----------------------------------|---------------------------------------|
| <input type="checkbox"/> W-2's    | <input type="checkbox"/> 1099-R       |
| <input type="checkbox"/> 1099-G   | <input type="checkbox"/> SSA-1099     |
| <input type="checkbox"/> 1099-INT | <input type="checkbox"/> Unemployment |
| <input type="checkbox"/> 1099-DIV | <input type="checkbox"/> Other: _____ |

### Deductions & Credits

- |  |  |
|--|--|
| <input type="checkbox"/> Educator Expenses                       | <input type="checkbox"/> Charity/Donations               |
| <input type="checkbox"/> Student Loan Interest                   | <input type="checkbox"/> Mileage for Medical or Charity  |
| <input type="checkbox"/> Tuition                                 | <input type="checkbox"/> Union Dues                      |
| <input type="checkbox"/> Medical Expenses: Divided by Individual | <input type="checkbox"/> Prior Year Tax Preparation Fees |
| <input type="checkbox"/> Property Taxes                          | <input type="checkbox"/> Child Care Expenses             |
| <input type="checkbox"/> Form 1098: Mortgage Interest            |  |

### Other Documents & Forms

- Health Insurance Coverage: ACA Compliance
- Estimated Tax Payments: Federal & State
- Extension Payments: Federal & State
- Direct Deposit Information: Voided Check

### Notes/Comments

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**Due Date for Info Returned to DPW:** \_\_\_\_\_