

## \*\*\* Tax Preparation Checklist\*\*\*

## Checklist of Information Needed to Complete Your Tax Return If any item listed applies to you, check the box and attach the information

<u>Inc</u>	ome Information		
	Wages (Form W-2)		Stock Sale Information/Capital Gains (Form 1099-B)
	Interest Income (Form 1099-INT)		Pension Distributions (Form 1099-R)
	Foreign bank accounts, income +/or paid taxes		State / Local Refunds
	Dividend Income (Form 1099-DIV)		Gambling Income (Form W-2G)
	Stock Sale Information/Capital Gains (Form 1099-B)		
	Each stock sale: Date purchased, number of sh	ares	s bought, amount paid
	Other Income		
	Alimony Received		Tip Income
	Unemployment Compensation (Form 1099-G)		Scholarships (Form 1098-T)
	Social Security Benefits (Form 1099-SSA)	$\square$	Education Savings Account Withdrawal (Form 1099-Q)
	Disability Income		Bartering Income (Form 1099-B)
	Jury Duty		<b>3 1 1 ( 1 1 1 ( 1 1 1 ( 1 1 1 1 1 ( 1 1 1 1 1 ( 1 1 1 1 1 1 1 ( 1 1 1 1 1 1 1 1 1 1</b>
	Small Business (self-employed or independent contr	acto	or business owner)
	Business Income (Form 1099-MISC plus items n		
	Business Expenses (Provide list or use the <b>Busi</b>		
	Vehicle Information		<b>o</b> ,
	Rental Property		
	Rental Income (Form 1099-MISC)		
	Related Expenses (Provide list or use the <i>Rental</i>	Pro	opertv Organizer)
	Schedules K-1 from Partnerships, S Corps, Trusts		
	Sale of Real Estate not qualifying for Personal Resid	lenc	e Exemption
	Closing Statement – Sale of Property		
	Closing Statement – Purchase of Property		
	List of additions/improvements while you owned	the	property
	Forgiveness of Debt income (Form 1099-C or 10		
	_ <b>.</b>		
De	duction Information:		
	IRA Contributions		Medical Expenses
	SEP, Simple, Keogh Plans		Health Insurance
	Student Loan Interest (Form 1098-E)		Out of Pocket Medical Expenses
	Alimony Paid		Sorm 1095-A
	Recipient Name and SS #		Healthcare Market Place Exemption
	Moving Expense		Real Estate Taxes
	Mortgage Interest (Form 1098		Other Taxes (including sales tax paid on the purchase
	Investment Interest		of autos, boats and RVs for personal use)
	Cash and Noncash Charitable Contributions		Employee Business Expense (Provide list or use
	Casualty/Theft Loss		the <b>Business Organizer</b> )
_			
	edit and Payment Information:		
$\Box$	Child Care Expenses	_	Tuition Statements (Form 1098-T) & Education Expenses
	Provide name, address, SS# or EIN, and		Copy of voided check (for direct deposit of refund
_	amount paid for each child		information)
Ц	Estimated tax payments (dates and amounts paid)	_	Energy or vehicle tax credit information
$\Box$	Legal papers for adoption, divorce or separation		Closing statement for first-time or long-time homebuyers'
	involving custody of your dependant children		credit

Individual	Income	Tax Or	ganizer
Special Dec	ductions	& Tax	Credits

ecial Deductions (complete items only if applicable)					
Retirement Contributions			Husband		Wife
IRA Deduction (\$5,500 maximum, or \$6,500 if age 50 o					
Self-employed SEP, SIMPLE or qualified plans					
Or, calculate maximum amount					
Health Savings Account (Form 5498-SA)					
Student Loan Interest (Form 1098-E)		\$		\$	
Teacher/Educator Classroom Expenses (\$250 maximur	n)	\$		\$	
Qualified Higher Education Tuition & Fees		\$		\$	
Dependents Qualified Tuition & Fees (name & amount)	:			D	ependent
		<u> </u>		\$ <mark></mark>	
		<u></u>		\$	
				\$ <mark></mark>	
				\$	
Alimony Paid (recipients' name, social security number &	amount):				
		SSN:		\$	
Penalty on Early Withdrawal of Savings				\$	
Moving Expenses Related to a Job Change					
Distance from old home to old job		From o	ld home to new job		
Amount paid to ship & store goods					
Child name & amount paid (total for all children must en 1:				Fotal \$ \$ \$ fotal \$	
Adaption Cradit					
Adoption Credit			Special Needs	Foreign	Disabled
Child's name, social security number & date of birth:			Special Needs	Foreign	Disableu
List amounts:	Prior Year	Current Year			
Qualified expenses \$			_		
Benefits received \$_		\$	_		
Prior year credit \$_					
Residential Energy Credits (include copies of receipts &	certificates)				
Address of property					
List amounts:					
Qualified insulation or material system \$		Qualified circulation fan		\$	
Qualified exterior windows \$		Qualified solar electric p	roperty	\$	
Qualified exterior doors \$		Qualified solar water hea			
Qualified metal roof \$		Qualified small wind ene		\$	
Qualified metal roof   \$   Qualified energy efficient building property  \$		Qualified small wind ene Qualified geothermal pu	ergy property		

Qualified boiler or furnace ... ... ... ... ... \$

Certified Public Accountant

## Individual Income Tax Organizer

Itemized Deductions (Complete this page only if greater than standard deduction)

The standard deduction for the various filing statuses are as indicated:

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	2015	2014	2013					
Married filing joint	\$12,600	\$12,400	\$ 12,200					
Head of Household	9,250	9,100	8,950					
Single or married filing separate	6,300	6,200	6,100					
dical Expense Deductions			Charit	table Contributions				
Medical, dental & vision insurance premi	ums \$		Ca	ish or check donations \$				
Long-term care insurance premiums	\$			(you must have receipt for all individual contributions over \$250)				
Medical expenses not reimbursed by ins	urance		Mil	Miles driven for volunteer work				
(out of pocket) including prescriptions,				Non-monetary donations of \$500 or less \$				
physicians, clinics/hospitals, vision &				(Goodwill, Salvation Army, Amvets, etc.)				
hearing aids, etc	\$ <u></u>		Fo	r non-monetary donations of \$500 or more, provide name of				
Miles driven for medical purposes			org	ganization, description of items donated, the original value of the				
(Note: nondeductible items include lif	e or disability insu	irance,	iter	ms at purchase and the value at the time you donated them				
nonprescription drugs, health supplements and health programs)				(attach Form 1098-C for donations of vehicles/boat)				
kes Paid			Misce	Miscellaneous Expense Deductions				
Real estate property taxes				t tax return preparation fees, union/professional dues, continuing				
(ad valorem on personal residence or			_	education, job search, uniforms, safety deposit box, investment				
State income or intangible ta:				penses, gambling losses, etc. List each description & amount.				
Personal property taxes				·\$				
(if on vehicle, must be based on vehic								
Sales tax paid on autos, boats or RVs pu	,			\$				
for personal use or on materials used				\$				
home improvement				\$				
Local sales tax rate % (if your			Un	reimbursed employee business expenses -				
pay 7% locally, your local rate is 1%)				attach list or complete the Business Organizer.				
erest Expense Deduction								
Personal residence 1st mortgage interes	+ &		Dri	vate mortgage insurance (PMI, for a primary				
points (on Form 1098)				or 2nd home bought in 2007 or later) \$				
Principal balance of 2nd mortgage on pri			In	restment interest (interest paid on loans				
personal residence \$			IIIV					
Personal residence 2nd mortgage interes			Po	used to acquire investment property) \$ rsonal, consumer interest (credit cards, vehicle, etc.) is not				
	\$			ductible. If you purchased or refinance your home, provide a copy of				
Second home 1st mortgage interest &	Ψ			e closing statement. Rental property mortgage interest & taxes				
points reported on Form 1098 \$				should be entered on the <b>Rental Property Tax Organizer</b> . Business				
· · · ·				erest & taxes should be entered on the Business Expense Organiz				
If you pay mortgage interest to an individual for a seller financed mortgage please provide:			110	erear a taxes anound be entered on the Duamess Expense Organiz				
· ·								
Name & social security number								
Auuiess								
Interest paid this year	<b>^</b>							

Electronic organizers with prior year numbers are available upon request.