Langley and Associates LLC

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Phone 251.345.4800 ▪ Fax 888.756.1590

Date: ___________________________

Client Name: ____

<u>Tax Document Checklist</u>

- **General Information Provided**
    - **Full name of Taxpayer: _____**
    - **Full name of Spouse (if applicable): _____**
    - **Full name(s) of dependents: _____**
    - **Social Security/Tax ID of everyone listed on return: _____**
    - **Dates of Birth for everyone listed on return: _____**
    - **Copies of Taxpayer & Spouse Driver's License/State ID: _____**
    - **Up to date contact information: _____**
    - **Current address: _____**
- **Income**
    - **Wages (W2) _____ Number of W2's: _____**
    - **Social Security or Railroad Retirement (SSA1099/ RRB1099) _____**

      Number of SSA1099's or RRB1099's: _____
    - **Retirement Distributions (1099R) _____ Number of 1099R's: _____**
    - **Brokerage Accounts (Brokerage Statements) _____**

      Number of Brokerage Statements: _____
    - **Interest Income (1099INT) _____ Number of 1099INT's: _____**
    - **Dividend Income (1099DIV) _____ Number of 1099DIV's: _____**

- **Income from Partnerships, S-Corporations, & Trusts (K1) _____**

  Number of K1's: _____

- **Tax Refunds or Other Government Payments (1099G): _____**

  Number of 1099G's: _____

- **Self Employment/Independent Contractor Income _____**
  - **Number of 1099NEC's: _____**
  - **Number of associated 1099MISC's: _____**
  - **Profit & Loss Report or comparable summary: _____**
  - **List of business assets: _____**
  - **Home Office: _____**
  - **Business Mileage: _____**
- **Rental Income _____**
  - **Summarized list of income & expenses: _____**
  - **Number of associated 1099MISC's: _____**
  - **List of rental assets: _____**
  - **Closing Statement(s) if new property: _____**
- **Gambling Income (W2G and/or Win/Loss statement) _____**

  Number of W2G's: _____ Number of Win/Loss statements _____

- **Sale of Real Estate (1099S and/or Closing Statement) _____**

  Number of 1099S's: _____

- **Canceled Debt (1099C) _____ Number of 1099C's: _____**
- **I received other income forms or have other income not covered by the listed options _____**

- **Other Forms & Items**
  - **Child & Dependent Care expenses (receipts or statements) _____**

- Higher Education expenses (1098T) _____
- Marketplace/Exchange Health Insurance (1095A) _____
- HSA Contributions (5498-SA) _____
- Retirement Contributions (Form 5498) _____
- Student Loan Interest (1098E) _____
- Educator expenses (receipts, statements, summaries) _____

- **Itemized Deductions**
  - **Summary or worksheet listing deductible expenses _____**

Other Notes:____

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