

PERSONAL US TAX INFORMATION CHECKLIST

| Name: | Birthdate (mm/dd/yyyy): |
|--|--|
| S.S.N. or ITIN: | Marital Status: |
| Green Card/US Visa Status: | Date Began Living in US (If Applicable): |
| Total time Spent in US in 2023, 2022, & 2021 (Number of Days): | |
| List of Dates Entered and left US in 2023: | |
| | |
| | |
| ADDRESS: | CONTACT INFORMATION: |
| Street: | Tel (Home): |
| City: | Tel (Cell): |
| State: | Fax: |
| Postal Code: | Email: |
| SPOUSAL INFORMATION: | |
| | Dinth data (mandad) and A |
| | Birthdate (mm/dd/yyyy): |
| S.S.N. or ITIN: | Marital Status: |
| Green Card/US Visa Status: | Date Began living in the US (If Applicable): |
| Total time Spent in US in 2023, 2022, & 2021 (Number of Days): | |
| List of Dates Entered and left US in 2023: | |
| | |
| | |
| | |
| | |
| CHILDREN INFORMATION: | |
| Name: | Birthdate (mm/dd/yyyy): |
| S.S.N. or ITIN: | Green Card/US Visa Status: |
| | |
| Did you incur child care expenses on behalf of this child? | Yes No |

| DEPENDENT INFORMATION: | | | | |
|--|------------------------|--------------------|-------------|---------|
| In the year did you have any dependents that you looked after (This can include a spouse, child, parent, grandparent, grandchildren, | | | Yes | □No |
| It you answered yes, please fill out the following: | | | | |
| Name: | Birthdate (mm/dd/yyyy) | : | | |
| S.S.N. or ITIN: | Marital Status: | | | |
| Net Income: | | | | |
| ADDITIONAL INFORMATION: | | | | |
| Were you employed or self-employed during the year? | | \square employed | self e | mployed |
| Have you previously filed a US Federal or State Tax Return? | | | ☐ Yes | □ No |
| *If yes, please indicate which state and list forms filed: | | | | |
| Has your spouse previously filed a US Federal or State Tax Return? | | | ☐ Yes | ☐ No |
| *If yes, please indicate which state and list forms filed: | | | | |
| Income Slip Checklist Employment Income | | | Attach | ied |
| Employment Income (W2) | | | Yes | ☐ No |
| Unemployment Income (1099-G) | | | Yes | ☐ No |
| Self-Employed Income and Ex | penses | | | |
| Forms 1099-NEC and 1099-K | | | Yes | ☐ No |
| Income Records to verify amounts not reported on 1099s | | | Yes | ☐ No |
| Records of all expenses (ex. Credit card statements and recei | pts) | | Yes | ☐ No |
| Business-use asset info (cost date placed in service) for depreciation | | | Yes | ☐ No |
| Retirement Income | | | | |
| Pension/IRA/Annuity Income (1099-R) | | | Yes | ☐ No |
| Traditional IRA Basis (prior year form 8606) | | | Yes | No |
| Social Security/RRB Income (SSA-1099, RRB-1099) | | | Yes | ☐ No |
| Investment Income | | | | |
| Interest, Dividend Income (1099-INT, 1099-OID, 1099-DIV) | | | Yes | No |
| Income from sales of stock/other property (1099-B, 1099-S) | | | Yes | No |
| Expenses related to your investments | | | Yes | ☐ No |
| 1099-B and/or 1099-DIV from cryptocurrencies, NFTs and all other | similar income or loss | | Yes | No |
| Cost of all cryptocurrencies NFTs and all other similar income sales | | | Yes | ☐ No |

Have you received Rental or Business Income?

Yes

☐ No

| Other Income Sources | Atta | ched |
|---|------|------|
| State Refunds (Form 1099-G) | Yes | ☐ No |
| Royalties (1099-MISC) | Yes | ☐ No |
| Hobby Income and Expenses | Yes | ☐ No |
| Income from K-Is either as investment or as an active owner | Yes | ☐ No |
| Any other 1099s received | Yes | ☐ No |
| Health savings account and long-term care reimbursements (1099-SA or 1099-LTC) deductions | Yes | ☐ No |
| Accounting Fees | Yes | ☐ No |

ADDITIONAL PERSONAL INFORMATION:

| Deduction | Chacklist | |
|-----------|-----------|--|
| Deduction | Cnecklist | |

Attached

| Home Ownership | Yes | No |
|--|-----|----|
| Form 1098 or other mortgage interest statements | | |
| Real estate and personal property tax records | | |
| Charitable Donations | | |
| Cash amounts donated to charitable organizations | | |
| Number of miles driven for charitable purposes | | |
| Political contributions | | |
| Records of non-cash donations | | |
| Medical Expenses | | |
| Amounts paid for healthcare insurance and to doctors, dentists, hospitals etc. | | |
| Miles driven for medical purposes | | |
| Travel expenses for medical purposes | | |
| Form 1095-A | | |
| Childcare Expenses | | |
| Day care paid for child under age 13 so the taxpayer can work | | |
| Wages paid to a babysitter | | |
| Educational Expenses | | |
| Forms 1098-T from Educational institutions | | |
| Form 1098-E for Student loan interest | | |
| Receipts for qualified educational expenses | | |
| Records of scholarships or fellowships | | |
| Retirement and other Savings | | |
| Form 5498-SA showing HSA contributions | | |
| Form 5498 showing IRA contributions | | |
| 1099-Q for education savings accounts (e.g., 529 plans). | | |
| All other 5498 series forms (5498-QA, 5498-ESA) | | |

| State and Local Taxes or Sales Tax | |
|--|--|
| Amount of state/local income tax paid (other than wage withholding), or amount of state and local sales tax paid | |
| Invoice for large item purchases such as cars, boats, motorcycles etc. | |
| Amount of real estate taxes paid | |
| Amount of personal property taxes paid | |
| Credits | |
| Child Tax Credit and information about qualifying children. | |
| Earned Income Tax Credit (EITC) eligibility information. | |
| Education credits information (American Opportunity Credit, Lifetime Learning Credit). | |
| Adoption-related expenses (if applicable). | |
| Clean Energy Vehicle Purchase in 2023? | |
| Energy-efficient home improvements. | |
| Other | |
| Management Fees | |
| Invoice for large item purchases such as cars, boats, motorcycles etc. | |
| Investment Counsel Fees | |
| Work from home due to Covid-19 | |
| Disability Credit | |

US Principle Residence

| | Yes | No |
|------------------------------|-----|----|
| Did you sell during the year | | |
| If yes provide: | | |
| Address: | | |
| Date of Sale:Sale Proceeds: | | |

OTHER RELEVANT INFORMATION

- 1. Please provide any notices or letters from the IRS, any estimated tax Payments made during the year, and any prioryear tax returns.
- 2. Please provide Bank Account Routing and Transit number for direct deposit of refunds
- 3. Please provide records of estimated tax payments made during the year.