## TMI Group, LLC Income Tax Checklist

Taxpayer's name		SSN	
Spouse's name		SSN	
Taxpayer's occupation		Birthdate	Blind?
Spouse's occupation		Birthdate	Blind?
Taxpayer's Driver's License – State	Number	Issue Date	Exp Date
Spouse's Driver's License – State	Number	Issue Date	Exp Date
Address			
Home Phone	Cell Phone	Email	
Filing Status Single () Married	J/S () Head of Hous	sehold () Qualifying Widow(	(er) ( )
Did you receive, sell, send, exchange o	r acquire any financial int	terest in virtual currency? Y or N	N N

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Name		SSN*	Birthdate	Relationship
1)				
2)				
3)				
4)				
Furthering H. S. Education	Education Credits Used	Health Insurance	Coverage	Months in your home
1) Yes/No	Yes/No	Yes/No		
2) Yes/No	Yes/No	Yes/No		
3) Yes/No	Yes/No	Yes/No		
4) Yes/No	Yes/No	Yes/No		

\* You must provide a Social Security number for all dependents.

PAPERWORK TO BRING				
W-2s	1099s	Self Emp Income	Social Security Benefits	
K-1s	Property tax bill	Last year's tax return	Health insurance coverage information	

OTHER INCOME				
SALE OF STOCK OR OTHER PROPERTY	Cost	Salesprice		

Please bring supporting documents (Form 1099-Bs and statements)

- If you have a business or rental property, please attach an income/loss statement and supporting documents.
- If you borrow money and the debt is canceled or forgiven, please include Form 1099-A and/or 1099-C.

If you have other income, please bring all figures and supporting data.

Examples:	Taxpayer	Spouse
Tips		
Pensions/annuities		
Jury duty		
Unemployment (1099-G)		
Alimony received*		
Prizes (1099-MISC)		
Self-employment		
Partnerships and S corporations		
Estates & trusts		
Social Security benefits		
Scholarships & fellowships		
Tax refunds		
Royalties		
Nontaxable income		
Gambling		
Hobby income		
Other		

\* Not taxable for divorces commencing after Dec. 31, 2018

PAYMENTS
Did you have any of the following tax payments?
Estimated tax payments?
Amount paid with request for extensions to file?
Credit from previous year?

REFUND
How would you like to handle your refund?
() Check
() Credit to next year
() Direct Deposit (Checking / Savings)
Routing Number
Account Number
Name of Financial Institute

## MISCELLANEOUS CREDITS

Residential Energy Credits

Adoption Expenses

## **Deductions and Credit Items**

RETIREMENT	INTERE	ST EXPENSE	
Contributions to a traditional IRA Taxpayer Date Spouse Date Contributions to a Roth IRA	Home mortgage (1098) Home mortgage – pd. to in (Include name and SSN o		
Taxpayer       Date	Investment interest** Interest pd. on student loan CONT	as (1098-E) TRIBUTIONS	_
MEDICAL EXPENSES	Other cash contributions		
Medical savings account (MSA) contributions	Charitable auto mileage Property donated for which receipts (fair market value For 2020, taxpayers using the	e)	
Medical auto mileage Other medical travel expenses	<ul> <li>above-the-line charitable cont</li> </ul>		
Hearing aids & batteries	CASUALTY	& THEFT LOSSES	
Other medical expenses	The following expenses may presidentially declared disa		3
TAXES     Real estate tax     Personal property tax*     City/county tax*     Sales tax     Other*		eceived MOVING EXPENSE	
Estimated Taxes State Federal	<ul> <li>Only active military personn</li> <li>deductions.</li> </ul>	el may claim the follo	owing
Date pd. Date pd. Date pd. Date pd. Date pd. Date pd.	Travel & lodging Moving household goods Total moving miles		
CHILD CARE EXPENSE	S – Bring list of monthly totals		
	Address	ID# of provider(s)	Amount pd.

## EDUCATION CREDITS (1098-T)

Name of institution	Tuition pd.	Who attended	When classes began

LOANS: If you borrowed money during the year, bring a list showing the amounts, dates and use of proceeds.

- \* Taxpayers who itemize can deduct their state individual income, sales and property taxes up to a limit of \$10,000 in total.
- \*\* For taxpayers who itemize, your investment interest expense deduction is limited to your net investment income.