



## 2018 TAX RETURN QUESTIONNAIRE & CHECKLIST

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Best Time to Call: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Preferred format for your client copy of tax return (you may choose more than one option) :**

- Secure Online Client Portal     Printed Booklet

Please review the following questions. If you answer yes to any of the questions, please provide details .

**PERSONAL INFORMATION**

Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	Your DOB _____ Your spouse's DOB _____
<input type="checkbox"/>	<input type="checkbox"/>	Did you move during the year? If so, list date of change: _____
<input type="checkbox"/>	<input type="checkbox"/>	Did your marital status change during the year?
<input type="checkbox"/>	<input type="checkbox"/>	Please list your current occupation _____ and your spouse's _____
<input type="checkbox"/>	<input type="checkbox"/>	If you have an overpayment and want it to be direct deposited, you <b>MUST*</b> provide: Bank Name _____ Account Number _____ Routing transit number _____ <input type="radio"/> Checking <input type="radio"/> Savings Authorized signature _____ <small>*You may provide a canceled check in lieu of entering this information.</small>
<input type="checkbox"/>	<input type="checkbox"/>	If filing a joint return, please circle the owner of this account: Taxpayer Spouse Joint
<input type="checkbox"/>	<input type="checkbox"/>	Did you attach a copy of your (and your spouse's) driver's license?

**DEPENDENTS**

Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	Could you be claimed as a dependent on another person's tax return for 2018?
<input type="checkbox"/>	<input type="checkbox"/>	Were there any changes in your dependents? If so, please provide dependent name(s) and months lived at home. If new, provide name, SSN & DOB.
<input type="checkbox"/>	<input type="checkbox"/>	Did any of your dependents have any income? If so, please provide amounts.
<input type="checkbox"/>	<input type="checkbox"/>	Do you have any disabled children or dependents?

**PURCHASES, SALES AND DEBT**

Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	Did you buy a new or used car/truck/motorcycle in 2018? If yes, provide copy of invoice.
<input type="checkbox"/>	<input type="checkbox"/>	Did you buy or sell any stocks, bonds or other investment property in 2018? If sold, please provide original cost, date of purchase, amount of taxed reinvested dividends and non-taxed distributions.
<input type="checkbox"/>	<input type="checkbox"/>	Did any stocks become worthless? If so, please provide a listing.
<input type="checkbox"/>	<input type="checkbox"/>	Do you have any foreign accounts with assets valued at over \$10,000.00?
<input type="checkbox"/>	<input type="checkbox"/>	Did you purchase, sell or refinance your principal home, second home or rental property? If so, please include settlement statements.
<input type="checkbox"/>	<input type="checkbox"/>	Did you have a home equity loan? If so, what were the proceeds used for?
<input type="checkbox"/>	<input type="checkbox"/>	Did you have any debts cancelled or forgiven?
<input type="checkbox"/>	<input type="checkbox"/>	Did you purchase a home after 04/08/08 and before 01/01/09 and you were a first-time home-buyer taking the \$7,500.00 tax credit? If we did not prepare your 2008 return, provide a copy.
<input type="checkbox"/>	<input type="checkbox"/>	Did you add any solar improvements to your home in 2018? If so, please provide receipts reflecting cost and labor.

**RETIREMENT PLANS**

Y	N	
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive a distribution from a retirement plan (401(k), IRA, SEP, SIMPLE, Qualified Plan, etc.)?
<input type="checkbox"/>	<input type="checkbox"/>	Did you make a contribution to a Traditional IRA or Roth IRA or SEP? (Please circle the type) If yes, Taxpayer's amount _____ Spouse's amount _____
<input type="checkbox"/>	<input type="checkbox"/>	Did you convert part or all of your traditional, SEP, or SIMPLE IRA to a Roth IRA?
<input type="checkbox"/>	<input type="checkbox"/>	Were you a public safety officer (law enforcement officer, firefighter, chaplain, or member of a rescue squad or ambulance crew)? If so, are you receiving a pension?

**Forms Checklist**

W-2(s)	
Final Paystub(s)	
1099-INT Interest Income	
1099-DIV Dividends	
1099-B Sale of Stocks	
1099-G State or Local Refunds/ Unemployment Compensation	
1099-K Payment Card and Third Party Network Transactions	
1099-R Retirement Distributions	
1099-C Cancellation of Debt	
1099-MISC Miscellaneous Income	
1099-Q Qualified Education Programs	
1099-S Sale of Real Estate	
1099-SA Distributions from an HSA, Archer MSA, or Medicare Advantage MSA	
1099-SSA Social Security Statement	
1098-E Student Loan Interest	
1098-T Tuition Statement	
1098 Mortgage Interest State- ment Banks or Individuals	
W-2G Gambling Winnings	
1095-A, B or C Health Insurance Statement	
8965 Health Coverage Exemptions	

Y	N	EDUCATION
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive a distribution from an Education Savings Account or a Qualified Tuition Program?
<input type="checkbox"/>	<input type="checkbox"/>	Did you make a contribution to a 529 plan(s)? If so, how much did you contribute for each child? If so, please list amounts, names, and social security numbers. _____
<input type="checkbox"/>	<input type="checkbox"/>	Did you, your spouse or a dependent incur any tuition expenses that are required to attend a college, university or vocational school? If you purchased any required text books or paid any required fees, provide Form 1098-T.
<input type="checkbox"/>	<input type="checkbox"/>	Do you have a student loan? Please include your 1098-E indicating your student loan interest paid.
<input type="checkbox"/>	<input type="checkbox"/>	Did you incur any expenses working as a teacher, counselor, or principal for classes K-12? If so, please list.

Y	N	DEDUCTIONS
<input type="checkbox"/>	<input type="checkbox"/>	Did you pay for childcare or daycare? Provide names of dependents, name, address and identification number of provider (EIN or SSN), and amount paid for each dependent.
<input type="checkbox"/>	<input type="checkbox"/>	Did you pay or receive alimony? If so, please list amount and date of execution. \$ _____
<input type="checkbox"/>	<input type="checkbox"/>	Did you have any unreimbursed employee expenses (job travel, education, etc.), union dues, uniforms, etc.? Can you substantiate these expenses? Did the employer require them?
<input type="checkbox"/>	<input type="checkbox"/>	Did you make any charitable contributions? Please list amounts and to whom paid (you <u>must</u> have written acknowledgement from a qualified organization for any single contribution over \$250.00). Can you substantiate these contributions?
<input type="checkbox"/>	<input type="checkbox"/>	If you are over 70 <sup>1</sup> / <sub>2</sub> , did you make a qualified charitable distribution from your IRA? If so, please list.

Y	N	ESTIMATED TAXES
<input type="checkbox"/>	<input type="checkbox"/>	Did you make any estimated tax payments for the tax year 2018? Please list all amounts and dates paid for federal, state, and local estimated tax payments made.
<input type="checkbox"/>	<input type="checkbox"/>	If you have an overpayment of 2018 taxes, do you want the excess applied to your 2019 estimated tax instead of being refunded?
<input type="checkbox"/>	<input type="checkbox"/>	Do you expect any changes to your 2019 taxable income? If so, please explain.

Y	N	MISCELLANEOUS
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any Schedule K-1(s) reporting income from Partnership(s), S-Corporation(s), Estates(s), Trust(s), etc.?
<input type="checkbox"/>	<input type="checkbox"/>	Do you own a rental property, business or farm? Please provide the following, if applicable: <ul style="list-style-type: none"> <li>All Forms 1099-K indicating credit card sales</li> <li>Detailed income and expenses</li> <li>Number of days rental property(-ies) rented and number of days used personally</li> <li>NAICS code and business activity (applies to businesses and farms only)</li> <li>Copies of forms W-3 and W-2, if not prepared by Ocker &amp; Associates</li> </ul>
<input type="checkbox"/>	<input type="checkbox"/>	Did you transfer or was a home transferred from parent to child?
<input type="checkbox"/>	<input type="checkbox"/>	Were any gifts to individuals made greater than \$15,000.00 in 2018?
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any notices from the IRS, state or local governments?
<input type="checkbox"/>	<input type="checkbox"/>	Did you and/or your dependent(s) have health insurance coverage for less than 12 months in 2018? If yes, please provide an explanation and/or your exemption form. If no, did your insurance meet minimum essential coverage requirements? <i>Circle one:</i> Yes      No

**REMEMBER, YOU CAN SAVE \$65.00 IF YOU DROP OFF YOUR TAX INFORMATION\***

\*This discount applies to those that do not have or those that cancel their scheduled tax appointment at our office. Should you have any questions concerning the checklist, drop-off information, or any other item related to your return between now and your appointment, please contact us and we will gladly assist you.

**What is included with your tax preparation fee?**

- Electronic filing of your federal and state returns
- Return phone calls within 24 hours
- Access via our website to a bi-monthly client newsletter, *In The Loop*
- We will be responsible for penalties related to our preparation errors
- Free phone calls, as long as the question requires no additional research or analysis
- Retention of your tax returns for 7 years
- Free review of your previous years tax returns
- Tax Representation Service Plan

**DID YOU KNOW? FILING DEADLINE FOR FORMS 1099**

The deadline for filing Forms 1099 with the IRS and providing the forms to contractors is **January 31, 2019**. It is important to prepare and file them early, if possible.