

# FOULK HUBER PA

## 2018 TAX RETURN CHECKLIST

### INCOME

- \_\_\_\_\_ Form W-2 – Income from employment
- \_\_\_\_\_ Form 1099 - Interest and Dividends
- \_\_\_\_\_ Form SSA-1099 - Social Security benefits
- \_\_\_\_\_ Form 1099R - Pensions, IRAs and Annuities
- \_\_\_\_\_ Form 1099B - Sale of stocks and bonds
- \_\_\_\_\_ Form 1099-MISC - Rent, royalties and self-employment income
- \_\_\_\_\_ Form W-2G – Gambling Winnings
- \_\_\_\_\_ Form 1099-G – Unemployment Benefits (**access on-line**)
- \_\_\_\_\_ Schedule K-1- Partnerships, LLCs, S-corporations and Trust
- \_\_\_\_\_ Rental properties - Rent received and detailed expenses paid by property. **For vacation homes, provide number of days rented and used personally.**
- \_\_\_\_\_ Schedule C - Business income – Total income received and detail of expenses paid
- \_\_\_\_\_ Alimony received

### ADJUSTMENTS TO INCOME

- \_\_\_\_\_ Contributions to IRA, traditional or Roth
- \_\_\_\_\_ Form 1098-E - Student loan interest paid (**access on-line**)
- \_\_\_\_\_ Alimony paid
- \_\_\_\_\_ Teacher classroom expenses
- \_\_\_\_\_ Form 1099SA & 5498SA - Health Savings Account info

### ITEMIZED DEDUCTIONS/CREDITS

- \_\_\_\_\_ Medical expenses (summary of expenses only) **Medical mileage for 2018 was \$.18 per mile.**
- \_\_\_\_\_ Real estate Taxes
- \_\_\_\_\_ Quarterly estimated state income taxes paid including dates paid
- \_\_\_\_\_ Mortgage Interest paid; **interest paid on home equity loans/lines are only deductible if the loan was originally used to buy, build or improve your home**
- \_\_\_\_\_ Charitable Contributions (summary only of both cash and non-cash donations) **Mileage for charitable work in 2018 remained unchanged at \$.14 per mile.**
- \_\_\_\_\_ Child care expenses, including the name, address and tax ID# for the provider.
- \_\_\_\_\_ Education Credits - tuition, and other expenses paid for you and your dependents. **Include Form 1098-T Tuition Statement from the college or university. (access student's portal)**

### MISCELLANEOUS

- \_\_\_\_\_ Proof of health insurance coverage, if not provided by employer or Social Security, **Include Forms 1095-A, B or C**