

FOULK HUBER PA

2019 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. **Business mileage for 2019 was \$.58 per mile.**
- _____ Alimony received, if agreement finalized prior to 1/1/19

ADJUSTMENTS TO INCOME

- _____ Contributions to IRA, traditional or Roth
- _____ Form 1098-E - Student loan interest paid (**access on-line**)
- _____ Alimony paid, if agreement finalized prior to 1/1/19
- _____ Teacher classroom expenses
- _____ Form 1099SA & 5498SA - Health Savings Account info

ITEMIZED DEDUCTIONS/CREDITS

- _____ Medical expenses (summary of expenses only) **Medical mileage for 2019 was \$.20 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 2019 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

- _____ For NJ residents only, proof of health insurance coverage, if not provided by employer or Social Security, **Include Forms 1095-A, B or C.**