**2019 CHECKLIST**

**WAGES, INCOME, UNEMPLOYMENT:**

\_\_\_\_\_\_\_\_\_\_ W-2 \_\_\_\_\_\_\_\_\_\_ W-2G (Gambling Income)

\_\_\_\_\_\_\_\_\_\_ 1099R \_\_\_\_\_\_\_\_\_\_ 1099 INT

\_\_\_\_\_\_\_\_\_\_ 1099 DIV \_\_\_\_\_\_\_\_\_\_ 1099 MISC

\_\_\_\_\_\_\_\_\_\_ 1099G (Unemployment) \_\_\_\_\_\_\_\_\_\_ 1099G (State refund)

\_\_\_\_\_\_\_\_\_\_ Rental Income \_\_\_\_\_\_\_\_\_\_ 1099B

\_\_\_\_\_\_\_\_\_\_ 1099S \_\_\_\_\_\_\_\_\_\_ Miscellaneous (prizes, awards, jury duty)

\_\_\_\_\_\_\_\_\_\_ Royalties \_\_\_\_\_\_\_\_\_\_ Alimony received

**MEDICAL/DENTAL EXPENSES: CHARITY CONTRIBUTIONS:**

\_\_\_\_\_\_\_\_\_\_ Prescription Drugs \_\_\_\_\_\_\_\_\_\_ House of Worship (Church)

\_\_\_\_\_\_\_\_\_\_ Health Insurance Premiums \_\_\_\_\_\_\_\_\_\_ Payroll Deductions (United Way)

\_\_\_\_\_\_\_\_\_\_ Medicare Premiums \_\_\_\_\_\_\_\_\_\_ Xmas/Easter Seals

\_\_\_\_\_\_\_\_\_\_ Doctor Fees \_\_\_\_\_\_\_\_\_\_ Heart/Cancer

\_\_\_\_\_\_\_\_\_\_ Dentist Fees \_\_\_\_\_\_\_\_\_\_ Salvation Army/Goodwill

\_\_\_\_\_\_\_\_\_\_ Hospital Fees \_\_\_\_\_\_\_\_\_\_ Charity

\_\_\_\_\_\_\_\_\_\_ Dentures & Braces \_\_\_\_\_\_\_\_\_\_ Charity

\_\_\_\_\_\_\_\_\_\_ Medical Lodging \_\_\_\_\_\_\_\_\_\_ **Volunteer Work Mileage Driven**

\_\_\_\_\_\_\_\_\_\_ Medical Mileage \_\_\_\_\_\_\_\_\_\_ Church, Scouts, School

\_\_\_\_\_\_\_\_\_\_ Lab & X-Ray Fees **CASUALTY AND THEFT LOSSES**

\_\_\_\_\_\_\_\_\_\_ Glasses/Hearing Aids \_\_\_\_\_\_\_\_\_\_ Casualty and Theft Losses

\_\_\_\_\_\_\_\_\_\_ Long-term Care Insurance **INTEREST YOU PAID**

\_\_\_\_\_\_\_\_\_\_ **Form 1095A/B** Medical \_\_\_\_\_\_\_\_\_\_ Home Mortgage 1 (1098)

**TAXES YOU PAID** \_\_\_\_\_\_\_\_\_\_ Home Mortgage 2 (1098)

**\_\_\_\_\_\_\_\_\_\_** Real Estate Taxes \_\_\_\_\_\_\_\_\_\_ Points not reported on 1098

\_\_\_\_\_\_\_\_\_\_ Other Property Taxes **ESTIMATED TAXES PAID**

\_\_\_\_\_\_\_\_\_\_ Vehicle Registration Fees \_\_\_\_\_\_\_\_\_\_ Estimated Federal Payments

\_\_\_\_\_\_\_\_\_\_ Estimated State Payments

**CHILD CARE EXPENSES** **MISCELLANEOUS**

Child Care Costs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alimony Payments

Provider Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ IRA Deposits

Provider EIN/SSN# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ SEP Deposits

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ Gambling Losses (up to income only)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ Schedule K-1 partnership or S corporation