Absolute
TAX & FINANCIAL SERVICES
3723 Benson Dr.
Raleigh, NC 27609
www.taxabsolute.com
O: 919-888-4042 F: 919-888-4047

Individual Tax Preparation Checklist

NOTE: (The majority of the information in the first and second sections should be available on your previous year tax return if you would please provide us with a copy). You can upload a copy to our secure portal on our website or email and ask for a link.

Please fill out this information on the Interview Form attached.

_____ Taxpayer personal information
_____ Spouse's personal information
_____ Dependent(s) personal information
_____ Dates of Birth for everyone on the tax returns including all dependents
_____ Current Mailing Address

Dependents

_____ Daycare/Childcare Credits: we'll need Caretaker(s) Name, mailing address, Federal ID #/ SSN
_____ Other Applicable adults: Please provide amount you paid them.
_____ Any other immediate family members you claim we will need the same information listed above.

Employee Income Information

_____ W-2(s), Wage and Tax Statement

Education Information

_____ Form 1098-T from colleges or credited higher education institutions.
_____ Any Educational expenses (Home School is not deductible, College living expenses not deductible)
_____ Form 1098-E for student loan interest paid.

Retirement & Health Contributions, Distributions/ Withdrawals

_____ Retirement Income
_____ Form 5498-SA HSA contributions
_____ Pension/ IRA (Form 5498)/ Annuity 1099-R
_____ Social Security/ RRB Income Form 1099-SSA/RRB-1099
_____ Did you take a retirement distribution which you used the 3 year exclusion for?
_____ 1099- R for any retirement draws/ distributions, rollovers, etc.

Investments and Savings

_____ Interest and dividend income (Form 1099-INT, 1099-OID, 1099-DIV)
_____ Stock sales and buys (Annual Summary/ 1099-B, 1099-S, 1099-B)

Other Income

_____ 1099-Int, Interest Income (from banks, investments, etc.)
_____ Unemployment, State Refunds (Form 1099-G)
_____ Gambling Income/ Winnings (W2-G)
_____ Alimony received. (Only applies to certain individuals)
_____ HSA and long-term care (Form 1099-SA, 1099-LTC)
_____ Jury Duty document of pay
_____ Other 1099's

Affordable Care Act / Health Insurance

_____ Form 1095-A, Health Insurance Marketplace Statements
_____ 1095-B and 1095-C (If you had insurance through any other source and employment)
_____ Marketplace exemption certificate (ECN)
_____ Life insurance premium is not deductible when paid or taxable when received. *Unless it is a key man policy where your business is the beneficiary.*

Other Credits and Deductions/ Itemizing items

(please categorize & total up your receipt, otherwise we do bill for additional time to reconcile your receipts. You can google "free expense template" for your industry or ask us for a generic template).

_____ Form 1098- Mortgage interest statements
_____ If Refinanced, Sold or Purchased a home provided Closing Statement/ HUD1
_____ State or Local Property Taxes Paid (Vehicle Property Taxes, Real estate Property taxes)
_____ Cash/ Checks donations to Church, Schools, and other credited charitable organizations
_____ Documents of non-cash donations and charity
_____ Healthcare medical expenses, doctors, co-pays, dentist, prescriptions, miles driven (only deductible if it is at least 10% of your gross income)
_____ Estimated tax payments
_____ For other credits & deductions you can look up "tax credits available for 2023" to see if you qualify and notify us if you have not already included the paperwork.

Rental Property Information

_____ Rental Income
_____ Expenses (1098-Mtg int., Maintenance, Repairs, Decors, Utilities, etc.)
_____ Property Assets and/ or Capital Improvements (Hud/ Closing statements)

*For new Clients we will need a Depreciation Schedule, if it's not included on your previous year tax return you will have to contact your previous tax preparer to get a copy.

Single owners LLC's/ Schedule C/ Self-Employed/ Sole Proprietor

_____ Form 1099-MISC, Miscellaneous Income, Rental Income
_____ Form 1099-NEC, Nonemployee Compensation
_____ Form 1099-K, Payment Card & Third-party transactions (your credit card service will provide).
_____ Form 1099-G, Certain Government Payments; like unemployment compensation or state tax refund
_____ Business Assets (Computer, Furniture, Vehicles, anything valued $600 + that is depreciable)
_____ Business Miles Driven for work (annually), Parking, Tolls and applicable vehicle expense.
_____ Any other expenses associated with Home Office
_____ Report of all Expenses (Bank statements, credit card statements, check stubs)

- We prefer all receipts to be added and categorized. Any expenses not reconciled will incur an additional fee depending on time spent to add and categorize expenses.

Client Interview & Update Form

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Taxpayer Full Name ____________________ Spouse Full Name ____________________
Taxpayer SSN/ TIN # ____________________ Spouse SSN/ TIN # ____________________
Taxpayer Date of Birth ____________________ Spouse Date of Birth ____________________
Occupation title ____________________ Occupation title ____________________

Mailing Address ____
Phone Number Taxpayer: ____________________ Spouse: ____________________
Email Address Taxpayer: ____________________ Spouse: ____________________

Filing Status: ◯ **Single** ◯ **HOH:** Head of Household ◯ **MFJ:** Married Filing Joint ◯ **MFS**:Married Filing Separate

Dependent Full Name ____________________ Dependent Full Name ____________________
Dependent SSN/ TIN # ____________________ Dependent SSN/ TIN # ____________________
Dependent Date of Birth ____________________ Dependent Date of Birth ____________________
Relationship to taxpayer ____________________ Relationship to taxpayer ____________________

Dependent Full Name ____________________ Dependent Full Name ____________________
Dependent SSN/ TIN # ____________________ Dependent SSN/ TIN # ____________________
Dependent Date of Birth ____________________ Dependent Date of Birth ____________________
Relationship to taxpayer ____________________ Relationship to taxpayer ____________________

Bank info for Direct Deposit or Tax draft

Bank Name ____________________
Bank Routing No. ____________________
Bank Account No. ____________________
Joint Account? ____________________

Notes:

Refferred By:

Taxpayer Business Name(s)