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Year-End Tax Checklist All Yes/No questions must be answered to the best of your ability Your First & Last Name _____

| Last 4 of SS# | | | | |
|---|--|------------------|------------------------------|---|
| Did you change your mailing address in 2023 If yes new address is: | Yes | No | | |
| Was there a change in your Family or filing status? If Yes please indicate Any additional children born in 2023 | Yes Marriage Yes | No Divo | orce 🗆 | |
| If Yes, please indicate: First Last Names, SS# and DOB, below. | | | | |
| New clients ONLY: provide copy front/back of your Drivers License (spous Did you and your dependents have health insurance entire year? | se as well if Yes □ | | | |
| Do you or your spouse have crypto account? | Yes | No No | | |
| Do you have signatory authority or ownership in a <u>Foreign</u> bank, investment, trust or business accounts? | Yes 🔲 | No | | |
| Are you and/or your spouse beneficiary of foreign trust(s) | Yes | No | | |
| Are you and/or your spouse have ownership in any foreign company(ies) | Yes 🔲 | No | | |
| Has your bank account changed from last year? | Yes U | No | | . 2000 2000 2000 2000 2000 2000 2000 20 |
| If Yes, provide new routing/account numbers | 2001 1000 2001 CHR SER 1001 1001 2004 1001 N | | NOTE THAT DOES NOT THE REST. | |
| To avoid missing forms, we recommend to have all t | he pages | numb | ered | |
| Forms for 2023 (both spouses if applicable) | | ECK AL T APPL | _ | # OF FORMS SUBMITTED |
| Wage Reporting: Form W-2 | | | | |
| Miscellaneous income including rent: Forms 1099-MISC | | | | |
| Partnership, S Corporation, & Estate Trust: Schedules K-1 | | | | |
| State and local income tax refunds: Form 1099-G | | | | |
| State Unemployment Payments: Form 1099-G | | | | |
| Interest income statements: Form 1099-INT & 1099-OID | | | | |
| Dividend income statements: Form 1099-DIV | | | | |
| Proceeds from Stock/Bonds/Securities: Form 1099-B | | | | |
| Retirement plan distribution and rollovers: Form 1099-R | | | | |
| Social Security Income: Form 1099-SSA, 1099-RRB | | | | |
| Payments for qualified education program: Form 1099-Q | | | | |
| Sale of your home or other real estate: Form 1099-S | | | | |
| Health Insurance Forms 1095-A, 1095-B, 1095-C | | | _ | |
| Health Saving Accounts and MSA: Form 1099-SA | | | _ | |
| Mortgage interest: Form 1098 | | | | |

| Student Loan Interest paid Form 1098-E | | |
|--|-----------------|--|
| Tuition Payments Statement Form 1098-T | | |
| Forgiveness of Debt Form 1099-C | | |
| Other forms not listed above list it here: | | |
| Other Income | INDICATE AMOUNT | |
| Alimony received | | |
| Jury duty pay | | |
| Scholarships and fellowships EXPENSES CHECK LIST | | |
| All expenses/deduction MUST have supporting documentatio | n | |
| (receipts, check, bill, letter, etc.) to support the deductions | | |
| Expense Data | INDICATE AMOUNT | |
| Adoption expenses | | |
| Alimony paid to former spouse | | |
| Casualty or Loss (suspended for now) Child care expenses (FSA) e.g. non-sleep summer camp, babysitter, nursery (provide Name, SS or Tax ID and address of the provider.) Note both parents must work or seek employment. Educational Exp. paid by cash/check not included in the Form 1098-T (supplies, books, other school expenses) Home improvements for Energy Efficiency (provide details of what was | | |
| improved and each item's cost) Donation to charity (Note that any single donations of \$250 or more needs to have an official receipt) Itemized deduction only Gifts to charity, non-cash (clothing, other property) Include a detailed receipt of what was donated. Itemized deduction only | | |
| Job-hunting expenses (suspended) Itemized deduction only | | |
| Medical Expenses (paid out of pocket) Itemized deduction only | | |
| Moving expenses (over 50 miles, work related) | | |
| Expenses related to prizes and awards (lottery ticket, etc.) | | |
| Real estate taxes paid (if not included in mortgage payment Form 1098) | | |
| Rent paid in 2023 (For NJ residents only) | | |
| H.S.A. (Health Savings Account) contribution by you during the year | | |
| Unreimbursed expenses related to your job (suspended) Itemized deduction only Estimated Tax Payments made to IRS (list dates and amounts) 1, 2 | | |
| 3, 4 | | |
| 3, 4 | | |
| Contributions to: IRA (individual retirement accounts) | | |
| Please sign X | | |
| Date X | | |

 Confidential
 2/1/2024
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