

DAVID C. BRYANT, CPA

2021 TAX PREPARATION CHECKLIST

PLEASE BRING ALL OF THE FOLLOWING WITH YOU:



GENERAL INFORMATION

- _____ 1. 2020 TAX RETURNS (NEW CLIENTS ONLY)
- _____ 2. SOCIAL SECURITY NUMBERS OF ALL DEPENDENTS OVER ONE MONTH OF AGE (IF PREVIOUSLY NOT SUPPLIED)
- _____ 3. DATE OF BIRTH OF TAXPAYERS AND ALL DEPENDENTS
- _____ 4. DATE & AMOUNT OF EACH ESTIMATED PAYMENT
- _____ 5. ANY I.R.S. OR STATE TAX CORRESPONDENCE RECEIVED
- _____ 6. SIX DIGIT PIN# ISSUED BY IRS, IF APPLICABLE
- _____ 7. ANY OTHER DOCUMENTS YOU FEEL MAY BE NEEDED

INCOME

- _____ 1. **SALARY** - ALL COPIES OF W-2 & 1099 FORMS, UNEMPLOYMENT
- _____ 2. **STOCKS, BONDS, MUTUAL FUNDS** - 1099 FORMS REPORTING ALL STOCK SALES FOR 2021 AS WELL AS PURCHASE DATE, COST, & FEES.
-ALSO, ANY 3922 FORMS REPORTING EMPLOYEE STOCK OPTIONS
- _____ 3. **OWNERSHIP INTEREST IN S-CORPORATIONS, PARTNERSHIPS, LLC'S** - K1 FORMS
- _____ 4. **GOV'T** - 1099 FORMS REPORTING UNEMPLOYMENT COMPENSATION, STATE TAX REFUNDS, & SOCIAL SECURITY BENEFITS
- _____ 5. **RETIREMENT** - 1099 FORMS FOR ALL RETIREMENT FUND TRANSFERS
- _____ 6. **BUSINESS & RENTAL** - SUMMARIZED SCHEDULE OF REVENUE & EXPENSES, BEGINNING & ENDING BANK STATEMENTS

DEDUCTIONS

- _____ 1. **HOME & PROPERTY TRANSACTIONS** - SETTLEMENT INFORMATION RELATING TO SALES OR PURCHASES PLUS COST OF ANY IMPROVEMENTS
- _____ 2. **IRA CONTRIBUTIONS** - AMOUNTS PAID OR ANTICIPATED TO BE PAID

- _____ 3. **STUDENT LOAN INTEREST** - 1098 FORMS DETAILING AMOUNT OF INTEREST PAID IN 2021

- _____ 4. **MEDICAL EXPENSES** - ANY EXPENSES NOT COVERED BY INSURANCE INCLUDING HEALTH INSURANCE PREMIUMS, CO-PAYS, DENTAL OR EYE WORK

- _____ 5. **INTEREST EXPENSES** - 1098 FORMS FOR ALL YEAR-END LENDER LOAN STATEMENTS INCLUDING THOSE REFINANCED OR PAID OFF DURING THE YEAR

- _____ 6. **REAL ESTATE TAXES PAID** - 2021 ESCROW BALANCES FOR APPLICABLE LOANS

- _____ 7. **CHARITABLE CONTRIBUTIONS** - SCHEDULE OF DONATIONS DETAILING: AMOUNT, ORGANIZATION'S NAME & ADDRESS, DATE CONTRIBUTED, DESCRIPTION OF PROPERTY DONATED

- _____ 8. **CHILD CARE EXPENSES** - AMOUNT PAID, NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF ALL CHILD CARE PROVIDERS

CREDITS

- _____ 1. **EDUCATION CREDITS** - HIGHER EDUCATION EXPENSES PAID INCLUDING TUITION, BOOKS, AND ROOM & BOARD FOR TAXPAYERS & DEPENDENTS