Client Name: ____________________

Appletree & Kern, PC

2016 Tax Organizer Checklist

PERSONAL INFORMATION

- ☐ Did your marital status change during the year? Yes No
  If yes, explain: ____________________

- ☐ Did your address, phone number or e-mail address change from last year? Yes No

  If yes, provide new address and date of move:
  Street Address____________________
  City, State, Zip Code____________________
  Date of Relocation____________________
  E-mail Address____________________

- ☐ Could you be claimed as a dependent on another person's tax return for 2016? Yes No

- ☐ Did you celebrate marriage to a same-sex spouse in a state that legally recognizes same-sex marriage? Yes No

DEPENDENTS

- ☐ Were there any changes in dependents for 2016? If so, please provide Social Security numbers and dates of birth for **NEW** dependents.

- ☐ Do you have any children under the age of 19 or a full-time student under age 24 with unearned income (e.g., interest, dividends, unemployment compensation) in excess of $2,100. **If so, please provide Form 1099s**.

- ☐ Did you pay any expenses related to the adoption of a child during the year? Yes No

HEALTH CARE INFORMATION

- ☐ Did you have qualifying health care coverage, such as employer-sponsored coverage or government-sponsored coverage (i.e. Medicare/Medicaid) for every month of 2016 for you or your family? "Your family" for health care coverage refers to you, your spouse if filing jointly, and anyone you can claim as a dependent. **Please provide Forms 1095-B or 1095-C**.Yes No

- ☐ Did anyone in your family qualify for an exemption from the health care coverage mandate? Yes No

- ☐ Did you enroll for lower cost Marketplace Coverage through healthcare.gov under the Affordable Care Act? **If yes, please provide any Form(s) 1095-A you received**.

INCOME

- ☐ **Provide all 2016 W-2's**.

- ☐ **Provide all Form 1099-INT/Form 1099-DIV** that show interest and dividends earned in 2016.

- ☐ Provide business income and expenses if you are self-employed. Was your home used for the business? If you have employees, did you pay health insurance premiums for your employees this year?

- ☐ **Provide 2016 Forms 1099-R** relating to pension, IRA, Keogh, SIMPLE, regular IRA to Roth IRA conversions, life insurance or annuity distributions.

- ☐ **Provide 2016 Form K-1** for any interest in Partnerships, S Corporations, LLCs, and Trusts.

- ☐ Provide rental property income and expenses.

- ☐ **Provide 2016 Form 1099-SSA** if you receive social security benefits.

- ☐ **Provide 2016 Form 1099-G** if you received unemployment compensation.
- ☐ **Provide 2016 Form W-2G** if you received gambling winnings. **Please also include copies of any Casino "Win/Loss" statements or other form of proof of gambling losses**.
- ☐ Did you have any debts cancelled or forgiven? If yes, please provide **2016 Form 1099-C.**
- ☐ Did you have any foreign income or pay any foreign taxes during the year? Yes No

INVESTMENT PURCHASES & SALES, AND NON-BUSINESS DEBT

- ☐ Provide sales price, cost basis, date of purchase and date of sale for any stock or other investments sold during the year. **Provide 2016 Forms 1099-A and/or 1099-B**.
- ☐ Provide a copy of any settlement statements for real estate sold, bought or refinanced during 2016. This includes your personal residence. **Provide 2016 Form 1099-S, if applicable**.
- ☐ Did you incur any non-business bad debts this year? Yes No

RETIREMENT PLANS

- ☐ Did you make – or do you want to make – any contributions to self-employed SEP, SIMPLE, or other Qualified Plan for 2016? Yes No
- ☐ Did you make – or do you want to make – an IRA, Roth IRA or myRA contributions for the 2016 tax year? **Provide all 2016 Forms 5498**. Yes No
- ☐ Did you convert a "traditional" IRA to a Roth IRA in 2016? Yes No
- ☐ Did you rollover any monies from an account in a Qualified Plan to a Roth account in a Qualified Plan in 2016? Yes No

DEDUCTIONS/CREDITS

- ☐ The "Residential Energy Credit" is still in effect for the 2016 calendar year. To that end, did you have any expenditures for your main home in 2016 that may qualify for the credit? Expenditures include: insulation materials; exterior windows and doors; qualified metal roof costs; qualified natural gas, propane or oil furnace or hot water boiler costs; advanced main circulating fan used in a natural gas, propane or oil furnace costs; and solar fuel cell devices. **Please include copies of invoices for qualified purchase(s). <u>If you used this credit in prior years, this credit may not be applicable for 2016</u>**. Please feel free to ask us any questions related to it.
- ☐ Did you purchase a vehicle or other "major asset" in 2016? If yes, the sales tax paid on the items may be deductible in 2016. Please provide a copy of the invoices detailing sales tax paid.
- ☐ Did you purchase a new vehicle that qualifies for the electric or hybrid motor vehicle credit?

EDUCATION DEDUCTIONS/CREDITS

- ☐ Educator Expenses (Kindergarten through Grade 12 Instructors).
- ☐ Student loan interest paid. **Provide 2016 Form 1098-E**.
- ☐ Post-secondary (college or other) education expenses for yourself or dependent(s) for tuition, qualified fees, books, supplies, and equipment less any scholarships received. **Please provide 2016 Form 1098-T**.
- ☐ Did you make any withdrawals from an education savings or 529 Plan account in the year? **If yes, please provide 2016 Form 1099-Q** and cost of room, board, and books/equipment for the year.
- ☐ Did you make any contribution to a Section 529 Plan in 2016? **If yes, please provide an investment statement detailing the amount that you contributed**.

OTHER DEDUCTIONS/CREDITS

- ☐ Moving expenses due to change in location of job.

- ☐ Expenses related to seeking a new job during the year ("job hunting" expenses).

- ☐ Did you pay any individual as a household employee during the year?

- ☐ Health Insurance for self-employed individuals. **Were you and/or your spouse eligible to be covered by another employer's subsidized or partially subsidized health plan during the year?**

- ☐ Contributions to, or distributions from, a health savings account (HSA), medical savings account (MSA), or achieving a better life experience account (ABLE). **Provide 2016 Forms 1099-SA, 1099-Q, 5498-QA or 1099-QA**.

- ☐ Alimony paid or received. **Please provide the amount with a copy of divorce agreement if it was a 2016 divorce**.

- ☐ Medical and Dental Expenses, including long-term health care premiums for yourself or your family. Did you have any medical miles driven in 2016?

- ☐ Real Estate Taxes Paid in 2016. **<u>If you believe that you are eligible for the Pennsylvania Property Tax Rebate Program you will need to provide copies of the real estate tax bills marked paid by your locality or a receipt from your locality detailing the real estate tax bills were paid</u>**.

- ☐ Personal Property Tax(es).

- ☐ **Copies of 2016 Form 1098** showing mortgage or home equity loan interest paid during 2016.

- ☐ Interest on money borrowed for investment.

- ☐ Charitable Contributions
    - For cash contributions under $250: You must have a bank record (e.g., canceled check) or a written receipt from the charitable organization.
    - For a single cash contribution of $250 or more: You must have a written receipt from the charitable organization.
    - For non-cash contributions: You must provide to us a signed receipt from the charitable organization. The receipt should include a listing of the items donated and value assigned to the items.
    - Did you have any miles driven on behalf of a charity in 2016? If yes, how many?
    - If you donated a vehicle to a charitable organization, **please provide us with the 2016 Form 1098-C you received**.
    - Did you make a charitable contribution directly from your IRA to a qualified charitable organization? If yes, this is non-deductible.

- ☐ Employee business expenses - not reimbursed by your employer - such as job related travel, union dues, job related education or training, entertainment, supplies, etc.

- ☐ Business use of vehicle in 2016. Please provide the date that the vehicle was first used for business purposes. Provide total personal miles, total business miles, and total commuting miles from 1/1/16 to 12/31/16. Also provide actual vehicle expenses.

- ☐ Investment expenses (e.g., brokerage account fees, IRA fees paid personally, bank safe deposit box fees, etc.).

- ☐ Losses during the year for casualty or theft.

- ☐ Provide name, address, and Federal I.D. number of anyone or any company to whom you paid child care during 2016 here:

ESTIMATED TAXES

- ☐ Did you apply an overpayment of 2015 taxes to your 2016 estimated tax (instead of being refunded)? Yes No

- ☐ Estimated Federal Income Tax paid for 2016. Enter dates and amounts on attached organizer input sheets.

- ☐ Estimated State and Local taxes paid in 2016 (even if for prior year). Enter dates and amounts on attached organizer input sheets.

- ☐ If you have an overpayment of 2016 taxes, do you want the excess applied to your 2017 estimated tax (instead of being refunded)?

- ☐ Do you expect your 2017 taxable income and withholdings to be different from 2016? Yes No

MISCELLANEOUS

- ☐ **E-filing is mandatory for both the Federal and State. You may, however, "opt out" of this e-filing requirement by signing an authorization. Do you want to opt out? Yes No**

- ☐ Would you like your Federal and/or State refund directly deposited into your account? Yes No

  If yes, is your deposit account information the same as in the prior year? Yes No
  If no, please provide the following deposit account information:

  List the owner(s) of the account

  ____

  Type of Account:

- ☐ Checking
- ☐ Savings
- ☐ IRA

  Enclose a Voided Check to insure an accurate deposit

- ☐ Do you, or your spouse, want to contribute $3 to the Presidential Election Campaign Fund? Yes No
- ☐ May the IRS discuss your return with your preparer? Yes No

- ☐ Were you notified or audited by either the Internal Revenue Service or your State taxing agency? Yes No
- ☐ Did you receive an Identity Protection PIN from the Internal Revenue Service or have you been a victim of identity theft? If yes, attach the IRS letter. Yes No

- ☐ Do you have a financial interest or account in a foreign country in 2016? <u>**If yes, we will need various information regarding the account**</u>.

- ☐ Did you, or your spouse, make any gifts to an individual that total more than $14,000, or any gifts to a trust in 2016? Yes No

- ☐ **Did you purchase any product or service, except clothing, with an out of state vendor or through the internet, mail, or in person where you were not charged any sales tax. If yes, please provide copies of these invoices. If you cannot locate any of these invoices, please discuss this with us.**

- ☐ **New Clients** - Provide a copy of your 2015 Federal, State and City Individual Income Tax Returns.

  - Did you buy a personal residence in 2008; did you receive a homebuyer credit in 2008? **If yes, please provide a copy of your 2008 Federal tax return as well**.

Signature(s):

________________________________ ________________________________