Rice Building, 828 Cherry Street   Green Bay, WI 54301 (920) 432-1985
Varsity Center, 566 Red Bird Circle, Suite 1   De Pere, WI 54115 (920) 632-4375
1071 Cormier Road   Green Bay, WI 54304 (920) 497-7816
450 High Street   Wrightstown, WI 54180 (920) 532-5500
Check out our website at tmsmoney.com

Name: ________________________________ Tax Year __________

Checklist: Items to bring to your tax preparer (please note this is not an all inclusive list and not all items may apply to you).

_____ All Forms W-2 (wages)
_____ All Forms 1099 and 1098
_____ Copies of returns (Schedule K-1) for partnerships, joint ventures, S corporations, estates and trusts.
_____ Childcare Provider statement for daycare expenses (or EIN/SSN of provider and amount paid)
_____ Receipts for higher education expenses and tax free dollars used (Form 1098-T)
_____ Student loan interest paid (Form 1098-E)
_____ **If you are a new client, provide copies of last year's tax returns.**

- Returning clients do not need to bring a copy of last year's return.

_____ Rental Property income and expenses
_____ Self employment income and expenses
_____ Educator expenses
_____ Driver's license for taxpayer and spouse (this is required information due to increased identity theft)
_____ Copies of current paystub(s) (for planning purposes only, not required)
_____ Form 1095A (if you had health insurance through the Marketplace)

Y/N Have you traded any Cryptocurrency this year?

Y/N Have you paid private tuition for a dependent in grades 5K-12

- Please bring a statement from the school that includes EIN and amount paid

Y/N Have you had a change in address?

Y/N Have any births, adoptions, marriages, divorces or deaths occur in your household during the year?

- Please bring social Security card and DOB for any **new** members of the household.

Y/N Have you changed financial institutions?

- Please bring your new routing and account number if you wish to have direct deposit.

Y/N Have you sold your main home?

- If yes, have you lived in it 2 of the last 5 years?
- Please bring your closing statement

Y/N Have you received any of the following other income:

Unemployment________________ Jury Duty__________________
State Tax Refund_______________ Alimony___________________
Gambling Winnings____________ Other______________________

Y/N Did you pay Alimony?

Amount paid_______________ To Whom________________ SSN___________________

Federal Estimated Taxes

	Date Paid	Amount Paid
4th Quarter 2018	___________	___________
2018 Overpayment applied to 2019		___________
1st Quarter 2019	___________	___________
2nd Quarter 2019	___________	___________
3rd Quarter 2019	___________	___________
4th Quarter 2019	___________	___________

State Estimated Taxes

	Date Paid	Amount Paid
4th Quarter 2018	___________	___________
2018 Overpayment applied to 2019		___________
1st Quarter 2019	___________	___________
2nd Quarter 2019	___________	___________
3rd Quarter 2019	___________	___________
4th Quarter 2019	___________	___________

Deductions

Taxes:

State taxes withheld (W-2, 1099's) _________

Estimated State taxes (fill in section above)

Last Year's State Tax Balance Due __________

Real Estate Taxes on Home ________________

Other Real Estate Taxes ___________________

Other Taxes ____________________________

Interest Paid:

1st Mortgage ___________________________

2nd Mortgage ___________________________

Home Equity Loan _______________________

Points_________________________________

Other _________________________________

Contributions:

Churches ______________________________

Other Cash/Check _______________________

Other Cash/Check _______________________

Non Cash Contribution ___________________

Non Cash – Other _______________________

Charitable Miles ________________________

Medical Expenses:

Health & Dental Premiums __________________

Medicare Premiums ***(on 1099-SSA)*** _______________

Prescribed Drugs __________________________

Doctors _________________________________

Dentists _________ Glasses/Contacts _________

Medical Miles ____________________________

Long Term Care ___________________________

Other out of pocket expenses ________________

Rent Paid **(heat included)**_________**(heat not included)**____________

IRA Contributions:

Name	Amount	**Type** Roth, SEP, Simple, Traditional
______________	______________	______________
______________	______________	______________

LET US HELP YOU WITH ALL YOUR FINANCIAL NEEDS.
Our experienced tax preparers can help reduce your tax liabilities. There may be tax advantages to investing – not only save for your future but also save in taxes. Talk to your tax preparer to see how we can help you.

Other Information/Comments

____

____

____

____

For Drop Offs Only:

Preferred Contact Method

____ Email ______________________________

____ Phone ______________________________