

Year 2011 Tax Return **TAX INFORMATION CHECKLIST**

Appointment Date: _____ Time: _____

Be sure to bring, mail, or drop off the following information (*if you're unsure of any documents, include them*):

- ___ 1. **New for 2011: Please review the most current newsletters and information on our website at: www.kleinhenzcpa.com •Many of the credits and deductions remain the same from 2010 •**
- ___ 2. **When calling for an appointment or dropping off your information please make our staff aware of any name, address (including new school district), telephone changes or corrections, marital status changes, dependent additions or deletions and dates of death (if taxpayer or spouse deceased during 2011).**
- ___ 3. **All year 2011 local tax return forms received.**
- ___ 4. Your record of federal, state, and local **estimated tax payments you made for year 2011.**
- ___ 5. **All copies (federal, state, local and taxpayer) of W-2, 1099 and K-1 forms for year 2011. (We will return your copies.)**
- ___ 6. All year-end **mortgage loan statements** (form 1098) including those refinanced or paid off during the year 2011.
- ___ 7. **Settlement statements** for all real estate purchased, sold or refinanced during year 2011.
- ___ 8. **Real estate tax bills paid** in 2011 (if not reflected on mortgage statements).
- ___ 9. **1099B forms** and transaction confirmations reporting all stock, mutual fund & other investment sales for year 2011 as well as **purchase and sales dates and cost information!!**
- ___ 10. **1099 forms** reporting interest & dividend payments, retirement account payments and transfers, unemployment compensation, state tax refunds and **social security benefits** for year 2011.
- ___ 11. Any statements received from educational institutions showing **tuition and/or student loan interest** paid by you for yourself or your dependents.
- ___ 12. **Social security numbers and birthdates of all dependents born before January 1, 2012 (if not previously supplied).**
- ___ 13. **Name, address, and social security or identification numbers of all child care providers (if applicable).**
- ___ 14. **Total health and long-term care** insurance premiums, prescriptions and cash contributions **paid by you** in year 2011. **Please summarize these costs!** (Including those deducted from your paychecks)
- ___ 15. **Schedules summarizing business and/or rental income and expenses (if applicable).**
- ___ 16. Voided personal check if you wish to have your refund (*if applicable*) directly deposited into your bank account.
- ___ 17. New Clients: Copies of your 2010, 2009 & 2008 tax returns, if available.

List any questions or comments you have on the back of this page and return with your information.