

S & D TAX SERVICES

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CHECK LIST OF COPIES

- ☐ Social Security Card ☐ Dependant S.S. Card
☐ Drivers License ☐ State I.D.

asdf

APPLICANT'S INFORMATION

TAXPAYER

SPOUSE

SOCIAL SECURITY #	SOCIAL SECURITY #
FIRST NAME	FIRST NAME
LAST NAME	LAST NAME
ADDRESS	ADDRESS
ZIP	ZIP
RESIDENT STATE	RESIDENT STATE
HOME TEL. #	HOME TEL. #
WORK TEL. #	WORK TEL. #
DATE OF BIRTH	DATE OF BIRTH
OCCUPATION	OCCUPATION
Email	Email

1) SINGLE 2) MARRIED FILING JOINTLY 3) MARRIED FILING SEPARATE 4) HEAD OF HOUSEHOLD 5) QUALIFYING WIDOW

DRIVER'S LICENSE NO.	EXP.	DRIVER'S LICENSE NO.	EXP.
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DEPENDENT'S INFORMATION

1) FIRST NAME	LAST NAME	STUDENT?
SOCIAL SECURITY #	DATE OF BIRTH	RELATION
2) FIRST NAME	LAST NAME	STUDENT?
SOCIAL SECURITY #	DATE OF BIRTH	RELATION
3) FIRST NAME	LAST NAME	STUDENT?
SOCIAL SECURITY #	DATE OF BIRTH	RELATION
4) FIRST NAME	LAST NAME	STUDENT?
SOCIAL SECURITY #	DATE OF BIRTH	RELATION

NO. OF W2 SUBMITTED: _____

OTHER DOCUMENTS: _____

WHAT TO BRING

Personal Data

Social Security Numbers
(including spouse and children) (must)
Child Care Provider: Name, Address and Tax I.D.
of Social Security Number
Alimony paid: Social Security Number
I.D. (Drivers license, passport, State I.D.
Military I.D.) (must)

Employment & Income Data

W-2 forms for this year (must)
Unemployment compensation:
Forms 1099-G (must)
Miscellaneous income including rent:
Form 1099-MISC
Pensions and annuities: Form 1099-R
Alimony received
Jury Duty Pay
Gambling and lottery winnings
Scholarship and fellowship
State and local income tax refunds: Form 1099-G

Acceptable Dependent Residency Documents

School records or statements
Landlord or property management statement
Healthcare provider statement
Medical records
Child care provider records
Placement agency statements
Social service records or statement
Place of worship statement
Indian tribal official statement
Employer statement

Homeowner/Renter Data

Residential Address for this year
Mortgage interest: Form 1098
Sale of your home or real estate: Form 1099-S
Second mortgage interest paid
Real estate taxes paid
Rent paid during tax year
Moving expenses

Interest income statements:

Forms 1099-INT & 1099-OID

Dividend income statements: Form 1099-DIV

Automobile

Personal property tax information

Expenses

Gift & charity
Child care expenses
Records to document medical expenses
Records to document casualty or theft losses
Records for any other expenditures that may
be deductible

Insurance

Full year minimum health coverage
Health Insurance through market place

TAXPAYER DECLARATION

All Returns:

Do the names on the return match your Social Security records, children included?
Are you legally married based on your state's legal definition of marriage?
*If yes, did your spouse live in your home at any time during July through December?
Can someone else claim you/spouse as a dependent?
Did you/spouse receive any kind of military pay earnings not reported in the return?
Did you/spouse receive any kind of housing allowance not reported in the return?
Did you/spouse receive any kind of government assistance?
Did you/spouse live with anyone with higher adjusted gross income?
*If yes, but renting a room, do you have a rental agreement?
Have all sources of nontaxable earned income been identified?
Have you verified you dependent birthday information as entered in the return?
Do your EIC qualifying children meet any one of these requirments?
* Under age 19 and lived in taxpayer's home more thant one half or year?
* Under age 19 and foster child of taxpayer and lived in taxpayer's home full year.
* Full time student under age 24.
* Totally disabled and can provide proof.
Did your EIC qualifying children live with you in the same main home in the U.S.?
Is your qualifying child also a qualifying child of another person with a higher modified AGI,
including another household member?
If your qualifying child is married, are you claiming them as a dependent?

NA	Yes	No
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
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_____	_____	_____

I declare that I understand the above questions and have answered them truthfully to the best of my ability.

Signature _____ Date _____