Checklist		
Name:		SSN:
Checklist		
	list is provided to help you gather necessary information for us to prepare your 2019 incoming with the supporting documentation, to our office and let us know of any significant characteristics.	
Other Inco	ome (provide supporting documentation for income received for the following items	s)
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ίi	Cancellation of debt	
Ĺĵ	Other income	
Payments	(provide supporting documentation for payments made for the following items)	
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[]	Employee business expenses	
[]	Contributions to a Health Savings Account	
[]	Expenses related to work relocation	
[]	Alimony	
[]	Student loan interest	
[]	Tuition and fees for higher education	
[]	Expenses related to child or dependent care	
[]	Contributions to a Retirement Savings Account	
[]	Medical and dental expenses	
[]	Real estate taxes	
[]	Other state and local taxes	
[]	Mortgage interest	
[]	Investment interest	
[]	Cash Contributions	
[]	Noncash Contributions	
[]	Unreimbursed employee expenses	
[]	Investment expenses	
[]	Gambling losses	
[]	Other payments	