



2221 E 7th Ave
Flagstaff, AZ 86004
SynergyFlagstaff.com

2020 Tax Checklist for Tax Prep

Please take a glance at the tax items you'll be bringing in- as well as information we will need to process your tax return! Thank you for choosing Synergy for your taxes!

Primary (this name will be listed 1st)	Spouse	<input type="checkbox"/>	(check off as complete)
<hr/>		<input type="checkbox"/>	Name, First & Last
() -- () --		<input type="checkbox"/>	Phone Number (call and / or text?)
<hr/>		<input type="checkbox"/>	Email Address (which is the best contact)
<hr/>		<input type="checkbox"/>	How did you hear about us?
<input type="checkbox"/> Resident of other state _____ Months _____		<input type="checkbox"/>	Do you have Last year's tax return (unless we filed)
<hr/>		<input type="checkbox"/>	Birthdate
____ - ____ - _____ ____ - ____ - _____		<input type="checkbox"/>	Social Security Number
street: _____ City _____ ZIP _____		<input type="checkbox"/>	Address
Single Married Head of Household		<input type="checkbox"/>	Filing Status (circle one) -
1		2	<input type="checkbox"/> Dependents - Name, Social and DOB
<hr/>		<input type="checkbox"/>	Driver's License # (DL#, State, issue date, exp date)
NOTES:		<input type="checkbox"/>	1095A (the healthcare form)
c:		<input type="checkbox"/>	W2 (unless we prepared your W2's)
a:		<input type="checkbox"/>	K1 (unless we prepared your business returns)
<hr/>		<input type="checkbox"/>	Do you have rental properties? Please bring your rental income and expenses
<hr/>		<input type="checkbox"/>	Are you self employed? Fill out Deduction Spreadsheet
<hr/>		<input type="checkbox"/>	1099 - MISC B INT DIV
<hr/>		<input type="checkbox"/>	EIC- Qualified - Note Qualifications
<hr/>		<input type="checkbox"/>	Other Investment Information
Have you been denied from the AOC credit? Do you have your 4 yr degree?		<input type="checkbox"/>	Education-Interest or Expense-include forms 1098
<hr/>		<input type="checkbox"/>	Employee Expenses
Total:		<input type="checkbox"/>	Medical Dental Expenses / HSA?
<hr/>		<input type="checkbox"/>	Personal income, sales and property taxes
Total / Date:		<input type="checkbox"/>	estimated tax payments?
<hr/>		<input type="checkbox"/>	Mortgage Statement / Property Tax
Total Cash:	Total Non-Cash:	<input type="checkbox"/>	Gifts to Charity / State Tax Credits?
Tax Return Estimate on Engagement Letter \$ _____		<input type="checkbox"/>	Signed Engagement Letter
<hr/>		<input type="checkbox"/>	Paper Return Copy
Do you want direct pay or direct deposit? Y / N		<input type="checkbox"/>	Choose your refund or payment

Upon receipt of these items, we will have more questions and want to review the tax return with you. If you have any questions at all, please don't hesitate to call our office or email us at office@synergyflagstaff.com

