

Your Name _____
 Home phone number _____ Cell Phone number _____
 Main email address _____
 Taxpayer occupation _____ Spouse occupation _____
 Current Address _____

Please take a few minutes to fill this planner out before you drop off your taxes. EVERYONE MUST fill out this tax planner! If you answer "YES" then please tell us more on page 3!

Please circle either yes or no for each question listed below!

- Yes No Did you and all of your dependents have health insurance for all 12 months of 2018? (attach 1095-B or C)
- Yes No Did you buy health insurance through the exchange (if yes, attach your 1095-A)?
- Yes No Did your marital status change in 2018?
- Yes No Did your address change in 2018?
- Yes No Were there any changes in your dependents or anyone listed on your tax return?
- Yes No Are you a noncustodial parent claiming your child this year? (attach form 8332 from custodial parent)
- Yes No Did any of your children under age 19 (or 24 and a full time college student) on January 1, 2018 have more than \$950 in interest or dividend income or more than \$1,900 in total investment income in 2018?
- Yes No Did you receive any disability income in 2018?
- Yes No Did you receive unreported tip income of \$20 or more in any month?
- Yes No At any time during 2018 did you have ownership or signature authority over a **foreign** bank account, investment, or business interest?
- Yes No Did you have any foreign income or pay foreign taxes not through stocks or mutual funds?
- Yes No Did you start a business, farm, purchase rental property or acquire an interest in a partnership, S corporation, or trust in 2018?
- Yes No Did your **business, farm or rental property** purchase or dispose of any furniture, equipment, vehicles, etc. in 2018 (**please provide us a list**)?
- Yes No Did you sell any stock, bonds, or property in 2018?
- Yes No Did you purchase or sell a home in 2018?
- Yes No Did you add any energy efficient improvements (insulation, exterior windows or doors) to your home?
- Yes No Did you receive a distribution from or make a contribution to a retirement plan **not on your W-2**?
- Yes No Did you, your spouse, or a dependent incur any tuition expenses to attend a college, university, or vocational school (if yes, attach a 1098-T)?
- Yes No Did you receive a distribution from an Education Savings Account or a 529 plan?
- Yes No Did you file bankruptcy that was finalized in 2018?
- Yes No Did you have any debts cancelled or forgiven in 2018?
- Yes No Did you or your spouse make a gift to any individual over \$15,000?
- Yes No Did you pay into an **Indiana** Partnership Long Term Health Care Insurance Plan (the policy must say it qualifies under the Indiana Long Term Care Program)?
- Yes No Did you make a charitable contribution to an **Indiana** University or College?
- Yes No Did you engage the services of any household employees?
- Yes No Was your home rented out or used for business?
- Yes No Did you use your car on the job (other than to and from work)? (if yes, fill in mileage on page 3)
- Yes No Did you receive any notices from the IRS or the Indiana Department of Revenue? (please attach)
- Yes No **Did you have any dependents who were enrolled in a private school or home-schooled in 2018?**
 Name of school _____ # Dependents attending _____
 Name of school _____ # Dependents attending _____
- Yes No Did you make any purchases online or through a catalog and were not charged sales tax on the purchase? If yes, please list the total of all such purchases \$ _____
 (In Indiana if you were not charged sales tax, then you are responsible for paying Use Tax. This is a hot topic with the Indiana Department of Revenue).
- Yes No Do you want an electronic copy of your tax return instead of a paper copy?

If you are due a refund, we will request that you are sent a check unless you list your bank account information below for direct deposit of the refund to your bank account:

Name of Bank _____ Routing Number _____
 Account Number _____ Checking or Savings _____

If you made estimated tax payments list them below:

Federal			State		
QTR	Date	Amount	QTR	Date	Amount
1st	_____	_____	1st	_____	_____
2nd	_____	_____	2nd	_____	_____
3rd	_____	_____	3rd	_____	_____
4th	_____	_____	4th	_____	_____

Please let us know the following if you have a Health Savings Account (HSA)

Is your HSA a family plan or individual plan? _____
 What were your total medical expenses **paid out of your HSA** account during the year? _____
 What did you contribute personally to your HSA (**that is not listed on your W-2**) _____
 Please provide us your 1099-SA forms you received from a Health Savings Account distribution and form 5498-SA showing 2018 contributions to your HSA.

Please let us know the following:

_____ Amount paid in college tuition in 2018 (**you must attach 1098-T & account transcript/cancelled checks**)
 _____ Amount paid for college text books in 2018
 _____ Contributions made to an individual retirement account in 2018 (**NOT through your work**)
 Please circle what kind of IRA it is and whose: Roth/Traditional Taxpayer/Spouse
 _____ Contributions made to an **Indiana** 529 college savings plan in 2018 include plan # _____
 _____ Educator expenses you paid out of pocket (if you are a teacher k-12)
 _____ Fees to a day care provider so you could work or attend school
 Name, address and ID number of provider: _____

 _____ Sales tax paid on the purchase of a brand new car, boat or RV
 _____ Property taxes paid on your primary residence
 _____ Property taxes paid on your 2nd home
 _____ Student loan interest paid in 2018, provide copy of 1098E

The Standard Deduction has almost doubled under the new tax law. You are either allowed to take the total amount of your itemized deductions or the standard deduction. If you have itemized your deductions in the past or if you believe you will have more than \$12,000 (single) or \$24,000 (married) in deductions then please give us:

All of the medical expenses paid (**not through HSA or FSA**):
 Prescription medicines and drugs _____
 Doctor, dentist, specialists, nurses, etc. _____
 Hospitals & nursing homes _____
 Health insurance premiums (**not paid by through your employer**) _____
 Long term care premiums _____
 # of medical miles driven _____
 Other, please explain _____
 From your vehicle registration statement please provide the following:
 EX Tax _____ EX Credit _____ DAV Credit _____

Cash contributions to charities or send receipts, donation letters, or cancelled checks (**you must have a receipt from the charity that states no goods or services were received for all donations over \$250**)

Name	_____	Date	_____	Dollar Amount	_____
Name	_____	Date	_____	Dollar Amount	_____
Name	_____	Date	_____	Dollar Amount	_____
Name	_____	Date	_____	Dollar Amount	_____
Name	_____	Date	_____	Dollar Amount	_____

Non-cash contributions to charities, (or send receipts **with description of items donated and thrift shop values**)

Name _____	Date _____	Dollar Amount _____
Name _____	Date _____	Dollar Amount _____
Name _____	Date _____	Dollar Amount _____

Number of Charitable miles driven _____

If you have a business, rental property, or farm on your personal tax return, please give us your income and expenses listed separately, or ask us for a copy of our business tax outline to help you gather this information.

If you answered Yes to any questions on page 1, please provide more information below. Additionally, is there anything you would like to bring to our attention? _____

Please give us a copy of the following forms you, your spouse or your dependents received:

- 1095-A, 1095-B, or 1095-C regarding your health insurance coverage for 2018
- Exemption form received for not having health insurance for the year
- W-2's received from employers
- 1099's for income earned as an independent contractor
- 1099-INT statements received from a bank for interest paid to you
- 1099-DIV statements received for dividends
- 1099-B forms received for the sale of stock or mutual funds.
- 1099-R forms received from your retirement accounts
- 1099-G forms for State tax refunds
- 1099-S forms from the sale of real estate
- 1099-MISC forms for miscellaneous income
- SSA-1099 forms for Social Security benefits
- 1099-G forms for Unemployment compensation
- W-2G forms from gambling income
- 1098 forms you received for your primary and secondary home showing interest paid
- Schedule K-1's you received for business income
- All closing statements from the purchase or sale of real estate
- Any tax notices you received in 2018
- 1098-T showing tuition paid during 2018 and proof of your payments made for tuition
- 1098-E showing student loan interest you paid in 2018

Please send us an email at Mike@sbscpagroup.com, Brent@sbscpagroup.com or Karena@sbscpagroup.com if you have any questions. We look forward to seeing you and we appreciate your business and the time it takes you to fill out this planner! We are striving to keep you in compliance with all tax laws while minimizing your tax liability.