WOODLAND SENIOR CENTER TAX APPOINTMENT SHEET

Please **complete** the first three pages of intake booklet **before you arrive.** Then bring the intake booklet and **all the documents listed below** (if they *apply*) to your appointment. We will prepare your return in-person.

Identification (required for everyone): **WE MUST SEE SOCIAL SECURITY CARDS** for taxpayer, spouse, and dependents (<u>or</u> the return **we** filed for you last year, or your SSA-1099, or a letter from Social Security)

- Drivers License or Picture ID for taxpayer and spouse
- Check book if you plan to use direct deposit (no deposit slips, please)

Tax Documents you *may* need:

Remove documents from envelopes

- Tax return for last year 2023
- All W-2s if you work
- All 1099s (e.g. 1099-R, 1099-Div, 1099-Int, 1099-B, 1099-Misc, 1099-LTC, etc.)
- Social Security Year-end Earnings Statements (Form SSA-1099)
- Year-end interest statements from banks
- Brokers' statements if you sold stocks, and records of the stocks' purchase price if the broker's statement does not contain that information (1099-B)
- Record of state tax refund from your 2023 tax return (1099-G)
- Unemployment Form (1099-G)
- Records of other income, like Gambling Winnings a K-1, or Jury Duty pay
- Self-employment earnings and expenses, including cash payments and mileage organized for easier scanning
- Student loan interest payments, education expenses, educator expenses
- Amount of any contributions to IRA accounts
- Itemizing Records (e.g. medical expenses, charitable gifts, real estate tax bills, mort-gage interest statement (1098), gambling losses etc.) if you want to itemize deductions.
- Child Care provider name, address, phone #, and tax ID (EIN or SSN) if you paid for child care in order to work
- Information on a First-time Home Buyer credit from 2008 for repayment
- Form 1095-A if you purchased health insurance from Covered California and/or Form FTB 3853

IF YOU HAVE QUESTIONS OR TO CANCEL YOUR APPOINTMENT, PLEASE CALL (530) 661-2001 RIGHT AWAY TO RESCHEDULE AND FREE UP SPACE FOR OTHERS

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Name:	YOUR APPOINTMENT
	Date:
	Time:
	

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