MethodCPA
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UPLOADED PORTAL DOCUMENTS CHECKLIST

Please use this checklist with each upload. Verify all items on the checklist are included with the upload and keep a copy of the checklist with your records. By keeping a copy with your records, you can track what has been provided and what may still need to be provided. Upon receipt by our office, we will verify each item reflected on the Checklist has been successfully uploaded and received. Should any item not be received successfully, we will notify you to obtain the item.

For the following, please insert the number of such Forms that you uploaded. If none, leave blank.

___ Form W-2 (Wages)
___ Form 1099-INT (Interest Income)
___ Form 1099-DIV (Dividend Income)
___ Form 1099-B (Sale of Stock & Securities – Capital Gains/Losses)
___ Form 1099-S (Sale of Real Estate)
___ Form 1099 Consolidated (for Brokerage Accounts)
___ Form 1099-G (from State for Tax Refund or Unemployment)
___ Form 1099-NEC (Nonemployee Compensation / Business Income)
___ Form 1099-PATR (Patronage Dividends)
___ Form 1099-C / 1099-A (Cancellation of Debt / Abandonment)
___ Form W-2G (Gambling Winnings)
___ Form 1099-R (Retirement Income such as Pensions / IRAs / 401(k))
___ Form 1099-SSA (Social Security Income)
___ Form 1099-MISC (Rental Income)
___ Form 1099-K (Payments from Third Parties such as Credit Card, PayPal, Airbnb)
___ Schedule K-1 (Income from Partnerships/S Corporations/Trusts/Estates)
___ Form 1098-E (Student Loan Interest Paid)
___ Form 1098-T (Higher Education Tuition)
___ Form 1099Q (Distributions from Qualified Education Programs-529s)
___ Form 1098 (Home Mortgage Interest)
___ Form 1095-A (Health Insurance Marketplace statement)
___ Form 5498-SA (Health Savings Account - Contributions)
___ Form 1099-SA (Health Savings Account – Distributions)
___ Form 1099-LTC (Long Term Care Benefits Paid)

For the following, please write a checkmark if you included information for the listed item.

___ New Child/Dependent (Full Name, Social Security Number, Date of Birth)
___ Voided Check for Direct Deposit
___ Identity Protection PIN Letter from IRS if Applicable
___ State Estimated Tax Payments (Completed in Organizer or Verification of Payment
___ Federal Estimated Tax Payments (Completed in Organizer or Verification of Payment
___ Retirement Plan Contributions Paid Directly (IRA/SEP/Simple/401(k)/Etc.)
___ Schedule C – Business Income & Expenses
___ Schedule E – Rental/Royalty Income & Expense
___ Schedule F – Farm Income & Expenses
___ Closing Statements (Purchases/Sales/Refinancing of Real Estate-only pages with numbers)
___ Medical Expenses Paid (Provide Summary Totals – Not Individual Receipts)

___ Medical Insurance Paid Directly
___ Long Term Care Premiums
___ Real Estate Taxes Paid
___ Personal Property Taxes Paid
___ Sales Tax on Major Purchases (such as a vehicle)
___ Cash Charitable Contributions (Provide Summary Totals)
___ Noncash Charitable Contributions (Provide Receipts if Total > $500)
___ Home Office Deductions if Self-Employed
___ Mileage (if self-employed)
___ Child and Dependent Care Paid (Dependent Care Credit)
___ Residential Energy Credit Information
___ Adoption Credit Information

Please write below or scan in separately any comments regarding your scanned documents.