

Checklist – For Tax Year 2020

STIMULUS Amount in 2020 \$ _____ **January 2021** \$ _____
(each person) \$ _____ \$ _____

Did you Receive UNEMPLOYMENT in 2020?

Did you RENEW a Driver’s License in 2020?

Total of CHECK & CASH Donations for 2020 \$ _____

Name _____ **Date** _____

E-mail address (optional): _____

Please list any changes from last year:

Address

Phone #

Dependents

Bank account info

Check items below that may apply to 2020:

- | | |
|--|---|
| <input type="checkbox"/> Tuition and/or books? We need 1098T | <input type="checkbox"/> Child care |
| <input type="checkbox"/> Grad student? | <input type="checkbox"/> HSA Health Savings Account |
| <input type="checkbox"/> Student loan interest | <input type="checkbox"/> Long Term Care Insurance |
| <input type="checkbox"/> NYS 529 College Savings Plan | <input type="checkbox"/> IRA contribution for 2020 |

Comments: _____