



## **Tax Appointment Preparation Work Sheet**

In order to make your appointment more productive, and to insure you have all of your deductions and substantiating documents in order, please take a minute to go through this form and complete. You can either bring it with you to your appointment, or e-mail it to my office ahead of time.

Please provide the following as well when you arrive:

- Last year's tax return (new clients only)
- All wage and income statements (W-2s and 1099s)

If you would like to have your refunds direct deposited into your account, please provide the following information:

<b>Direct Deposit Information</b>			
	Institution #1	Institution #2	Institution #3
Bank Name			
Bank Routing Number			
Account Number			
Checking/Savings/IRA			

Finally, if there are any specific questions you would like me to start working on before your appointment, or would like to remind me of, please document them here:

<b>Questions</b>



## Taxpayer Information

Taxpayer Information			
Name		Soc. Sec. #	Birth Date
You			
Spouse			
Occupation		Home Phone	Work Phone
You			
Spouse			

Address and Status				
St. Addr.				
City		State		Zip
Email				
Status Changes This Year – Enter Dates				
Married		Spouse Dec'd		Sold Home
Separate		Dep. Dec'd		Sold Prop
Divorced		Moved		
Legally Blind?	<input type="checkbox"/> You <input type="checkbox"/> Spouse			

Estimated Taxes Paid <small>Please provide canceled checks if available</small>				
	Date Due	Date Paid	Federal	State
Applied from prior year's refund				
First Quarter	April			
Second Quarter	June			
Third Quarter	Sept			
Fourth Quarter	THIS Jan			

Special Information		
** Must report even if not taxable	You	Spouse
Employer Pension Plan		
Contributions		
Withdrawals		
Rollovers**		
State Tax Refund		
Social Security or Railroad Retirement		
Alimony Received – <i>matched with payer</i>		
Tips Received		
Unemployment Received		
Other:		
Alimony Paid ( <i>provide info below</i> )		
Paid To:	SS#:	
Salaries, Pensions, and Misc Income	Provide W-2s and 1099s	
Partnership & Trust Income	Provide K-1s	
Gambling Winnings		Student Loan Int.
Coverdell Contrib.		Foreign Bank Acct.?
If you have been denied income credit by the IRS If so, have you been re-certified? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No		
If you bought, sold, or gifted real estate last year. If so, please call in advance to discuss what documents are required.		
If you incurred any adoption expenses this year. If so, enter amount .....		



## Dependent Information and Credits

Dependents (SSNs are Mandatory)				
Name		Rel.		New <input type="checkbox"/>
SSN		Mos. In Home		
Birthdate		If over 18	Income:	Student Disabled
Name		Rel.		<input type="checkbox"/> New
SSN		Mos. In Home		
Birthdate		If over 18	Income:	Student Disabled
Name		Rel.		<input type="checkbox"/> New
SSN		Mos. In Home		
Birthdate		If over 18	Income:	Student Disabled
Name		Rel.		<input type="checkbox"/> New
SSN		Mos. In Home		
Birthdate		If over 18	Income:	Student Disabled
Name		Rel.		<input type="checkbox"/> New
SSN		Mos. In Home		
Birthdate		If over 18	Income:	Student Disabled
Name		Rel.		<input type="checkbox"/> New
SSN		Mos. In Home		
Birthdate		If over 18	Income:	Student Disabled

Rel. : S = Son; D = Daughter; R = Relative; O = Other

Phone				
SS# / EID#				
Name				
Address				
Phone				
SS# / EID#				

Child or Dependent Care Expenses				
Care must enable you to work (or look for work) or attend school Full Time. Care must be for a child under 13 or individual who is physically or mentally incapable of self care. IRS matches employer benefits SS# and EID#.				
<input type="checkbox"/> <input checked="" type="checkbox"/> If employer provides dependent care benefits				
Provider Information			Payments allocated by child.	
Payee SS# or EID# Mandatory unless exempt organizations.				
Name				
Address				

Education Expenses				
CAUTION: These expenses qualify for tax credits, deductions, and are used to justify certain exclusions and tax or penalty free distributions. Expenses must be segregated by student. Use a different column for each student in the family.				
Student:	This column designated for:			
Taxpayer				
Spouse				
Dependent:				
Dependent:				
For Tuition Credit Only – Qualified Educational Instruction				
Check if at least half-time student				
Post Secondary – First 2 Years				
After First 2 Years				
Fees – Enrollment / Attendance Only				
Other Expenses – Do not complete unless qualifying for tax or penalty-free IRA distributions, savings bond interest exclusion, or student loan deductions. Similar expenses for continuing education should be entered in different section below.				
Books / Supplies				
Room / Board				
Continuing Education Expenses – Education for the taxpayer & spouse only and only if job related.				
Tuition and Fees				
Seminar Fees, etc.				
Books / Supplies, etc.				
Travel				



## Income

<b>Interest Income</b> <small>IRS computer matches payer with amount, so use same names on 1099.</small>				
Name of Payer <small>(Please provide all forms 1099INT and 1099OID)</small>	Banks, Credit Unions, Bond, etc.	Home State Municipal Bonds <small>(Generally Tax Free)</small>	Other State Municipal Bonds <small>(Federal Tax Free)</small>	Direct U.S. Obligations Savings Bonds, T-Bills, etc. <small>(State Tax Free)</small>
Seller Financed Mortgage <small>(Payer name, address, and SS# required)</small>		Name, Address, & SSN		
Forfeited Interest (Early withdrawals)		Federal withholding on Int. and Div.		

<b>Dividend Income</b> <small>IRS computer matches payer with amount, so use same names on 1099.</small>								
Name of Payer <small>(Please provide all forms 1099DIV)</small>	Foreign Taxes Paid	Total Ordinary Dividends	Qualified Dividends	Total Capital Gains Div.	Direct U.S. Obligations	Taxable to State Only	Nontaxable State and Federal	Return of Capital

<b>Securities and Property Sold</b>					
<small>IRS matches gross proceeds from sale using the 1099B. Many brokerage houses use substitute forms. All transactions must be reported even if there is no profit. IRS computer matches sales price but not cost.</small>					
Description	✓ if Inheritance	Date Acquired	Date Sold	Selling Price	Original Cost



## Itemized Deductions

<b>Medical Expenses Paid</b>			
To be deducted, medical expenses must exceed 7.5% of your adjusted gross income. Will calculate when preparing taxes.			
Hospital, Medical, Dental, Medicare* and Insurance Premiums			
Doctors, Dentists, Psychotherapy & Psychological Counseling			
Hospitals, Nursing Home, Nursing Care, Lodging, etc.			
Prescription Drugs ( <i>no over the counter drugs</i> )			
Glasses, Hearing Aids, etc.		Auto Travel	mi.
Lab and X-Ray		Parking Fees	
Supplies, Rentals, etc.		Phone	
Other:			
Insurance Reimbursement ( <i>only for amounts listed above</i> )			
* Amounts withheld from Social Security benefits only			

<b>Taxes Paid</b>			
Real Estate – Home and 2 <sup>nd</sup> Home Only ( <i>not rental</i> )			
Real Estate – Investment Property ( <i>land, etc., not rental</i> )			
Vehicle Lic. Fees	1	2	3
Personal Property Tax ( <i>boat, plane, etc.</i> )			
State Income Tax Paid ( provide cancelled checks )			
Balance Due or Last Year's Return		Prior Year's Tax or Adjustment	
Extension Payment Last Year's Return		Last Year's 4 <sup>th</sup> Qtr. Pd Jan of this Year	

<b>Home Mortgage Interest Paid</b>			
Not for a Rental.		Primary Home	Second Home
Enter Rental Interest in Rental section			
1 <sup>st</sup> TD	Paid to a Bank, S&L, etc.*		
	Paid to an Individual (list name, SSN)		
2 <sup>nd</sup> TD	Paid to a Bank, S&L, etc.*		
	Paid to an Individual (list name, SSN)		
Home Equity Loan			
Individual's Name		SSN	
Address			
* Amounts must agree with Form 1098 issued by the financial institution. If not, check here <input type="checkbox"/> . If Form 1098 was issued in another's social security number, enter that person's name and social security number here.			
Name		SSN	
If the second home is a qualified motor home, boat, etc., list name of payee here:			
		Yes	No
Did you refinance during the year? Provide escrow statement.			
Does your home equity loan exceed \$100,000?			
Does the sum of all home mortgages exceed \$1,100,000?			

<b>Investment Interest Paid</b>			
Interest paid for investments, such as land, stocks, etc.			
Vacant Land		Brokerage Margin Accts.	
Other:			

<b>Charitable Contributions</b>			
Written verification is required for contributions of \$250 or more to any one organization.			
Church		Temple	
Payroll Deduction		Red Cross	
Cancer		Other:	
Heart		Other:	
Scouts		Other:	
Expenses in connection with a charitable organization:			
Explain:			
Travel for charitable purposes:			mi.
Fair market value of clothing, furniture, etc., contributed**			
**Provide a detailed list of items if total amount is more than \$500. Have receipts available. Please call ahead if contribution exceeds \$5,000.			

<b>Miscellaneous Deductions</b>		
List all travel expenses including auto, out of town meals, hotel, airfare, etc., in sections for business mileage and away-from-home expenses.		
Do not enter expenses you have listed elsewhere	You	Spouse
Attorney Fees		
Business Gifts		
Dues: Union and Professional		
Employment and Resume Fees		
Entertainment and Meals		
Gambling Losses		
Insurance - Business		
Investment Expenses	Publications and Journals	
	Other:	
IRA or Keogh (HR-10) Fees Paid by You		
Licenses, Fees, Credentials, etc.		
Publications, Books, etc., used in Business		
Safe Deposit Box		
Tax Preparation and Consulting Fees		
Telephone (business only)		
Tools, Supplies, Equipment		
Uniforms – Purchase		
Uniforms – Cleaning		
Other:		



## Small Business Information

### Business Expense Instructions

Business expense deductions must be based on a log and/or other receipts and records. The combination of records should document: the business purpose, date and time, place and amount. For business meals and entertainment, you must also document that (1) you discussed business during the meal, or (2) you had a substantial bona fide business discussion or activity before or after the meal/entertainment, or (3) you ate alone while out-of-town. You must also record the name and business relationship of each person entertained. Gifts are limited to \$25 per person per year. You may not deduct these expenses unless documented.

### Self Employed Business Income & Expense

List business vehicle expenses and travel expenses in other table, this page.

		You		Spouse	
Gross Income					
Returns and Refunds					
Cost of Inventory at Beginning of Year					
Cost of Merchandise Purchased					
Cost of Items for Personal Use					
Cost of Inventory at End of Year					
Expense	You	Spouse	Expense	You	Spouse
Advertising			Rent (other)		
Bank Charges			Repairs		
Commissions			Seminars		
Dues & Pubs.			Supplies		
Entertainment			Tax-Payroll		
Freight			Tax-Sales		
Gifts			Tax-Prop.		
Insurance			Telephone		
Interest (mort.)			Utilities		
Interest (other)			Wages		
Legal/Profess.			Other		
Office Expense			Other		
Rent (equip.)			Equipment:	Provide list including description, purch date, cost	

### Away-From-Home-Expenses

	You	Spouse
Airfare		
Auto Rental, Taxi, Etc.		
Meals and Tips ( enter 100% of expense )		
Lodging and Tips		
Laundry		
Other:		

### Office-In-Home Expenses

To qualify, an "office in the home" must be used exclusively and on a regular basis (a) as your principal place of business, (b) by patients, clients, or customers in meeting and dealing with you in a normal and course of business. Beginning in 1999, a home office will qualify as your principal place of business if (1) you use it exclusively and regularly for the administrative or management activities of your trade or business, and (2) you have no other fixed location where you conduct substantial administrative or management activities of your trade or business. If you are an employee, the home office must also be for the convenience of the employer.

Total Sq. Ft. of:	Home	Office	Storage
Expenses	Rent*	Utilities	Insurance
Condo or Mgmt Fees		Other	
Maint/Repairs, Office		Home in General**	

\*If you own your home, provide purchase settlement statement and list of improvements to office.

\*\*Roof, outside painting OK; not lawn care

### Business Vehicle Instructions

Business mileage section must be completed for every vehicle that is used for business. Actual expenses are not required if you are using the government's standard mileage rate. However, they are generally required if you are using the actual expense method, or if you used the actual method the first year the vehicle is placed in service. If this is the first year of business use for the vehicle, provide a copy of the purchase or lease contract.

Do not complete this section or the business vehicle expense section if your vehicle is used only for commuting to and from work and for personal travel.		Vehicle 1 You Spouse	Vehicle 2 You Spouse
Check if vehicle provided by employer		<input type="checkbox"/>	<input type="checkbox"/>
Enter reimbursement provided by employer			
Check if reimbursement included in W-2		<input type="checkbox"/>	<input type="checkbox"/>
Description of Vehicle (make/model)			
Date originally acquired			
Total Miles Driven, Personal & Business			
Parking – Business Only			
Business Miles Driven	For Employer	mi	mi
	To Professional Meetings	mi	mi
	Between 1 <sup>st</sup> and 2 <sup>nd</sup> Job	mi	mi
	Jobseeking / Temp Job Sites	mi	mi
	Investment / Tax Preparation	mi	mi
	Rental	mi	mi
	Self-Employed Business	mi	mi
	Other:	mi	mi
Average Round Trip Distance to Work	mi	mi	
Total Commuting for the Year	mi	mi	



## Small Business Info Continued

<b>Business Vehicle Expenses</b>			
Complete only if vehicle used for business.			
	Vehicle 1 You Spouse	Vehicle 2 You Spouse	
Gasoline, Oil, Lubrication			
Repairs and Maintenance			
Tires, Batteries, etc.			
Insurance (do not duplicate elsewhere)			
Lic. & Taxes (do not duplicate elsewhere)			
Interest (do not duplicate elsewhere)			
Wash and Wax			
Lease Payments			
Other:			

## Rental Property Information

<b>Rental Income &amp; Expenses</b>				
If the property was purchased or converted to rental use this year, provide purchase settlement with statement and county tax bill. List business vehicle expenses and travel expenses in Business Mileage, Rental.				
Property	Address			
1				
2				
3				
Property		1	2	3
Income				
Advertising				
Cleaning & Maintenance				
Commissions				
Insurance				
Legal & Professional Fees				
Mortgage Interest Paid to Banks				
Other Interest				
Repairs: Carpentry, Hardware				
Electrical, Plumbing				
Paint, Decorating				
Supplies				
Taxes				
Utilities				
Wages & Salaries				
Condo or Management Fees				
Telephone (toll calls only)				
Improvements & Replacements	See Instructions Below			
Other:				
Number of Days Used Personally				
Improvements and Replacements include furniture, appliances, carpet, drapes, major repairs, or improvements. Provide a list with description, date of purchase or completion, and cost for each item.				