

If you need a **TRADE OR BUSINESS** worksheet please call.

Did you operate **rental property**? If you need a **RENTAL** worksheet please call. INCOME MUST BE REPORTED AT GROSS RECEIPTS. EXPENSES ARE THEN ITEMIZED SEPARATELY. DO NOT COMBINE INCOME & EXPENSES.

Did you make contributions to an IRA –SEP – KEOGH account for this tax year?

Taxpayer _____ Spouse _____

Did you make withdrawals from an IRA –SEP – KEOGH account for this tax year? BEFORE age 59 1/2?

Taxpayer _____ Spouse _____ Any IRA/401k ROLLOVERS? _____ Were they made directly? _____

Did you/spouse PAY alimony? \$ _____ RECIPIENTS SS# _____

Recipients Name/Address _____

Did you pay college tuition? \$ _____ Did you pay Student Loan Interest? \$ _____

DEDUCTIONS:

Did you have costs for medical/dental insurance? \$ _____

Was the insurance deducted from your paycheck? Yes NO BEFORE taxes? Yes NO

Are you self employed? Yes NO

Did you have payments (unreimbursed) for:

Doctors, dentists, chiropractors	\$ _____
Orthodontist, dentures, glasses, contacts	\$ _____
Hospitals, lab fees, x rays	\$ _____
Prescriptions	\$ _____
Medical equipment & supplies	\$ _____
Number of miles driven for medical purposes _____ Lodging	\$ _____

Real Estate taxes for you **PERSONAL RESIDENCE** \$ _____

Other real estate taxes paid for property you own (use rental on rental worksheet) \$ _____

Home mortgage interest REPORTED ON FORM 1098 \$ _____

Home mortgage interest NOT reported on Form 1098 MUST HAVE:

Payer Name _____ FEIN# _____

Address C/S/Z _____

Did you refinance your home during the year? Term of Loan _____ Pay Points? \$ _____

Did you borrow money directly or indirectly to make an investment? \$ _____

Did you make contributions to your church or other non-profit organizations? \$ _____

Did you make **NON CASH** donations (clothing, furniture, auto, etc)? \$ _____

Did you contribute more than \$500? **Must have an itemized listing.**

Number of miles driven for charity. _____

Did you suffer a casualty loss for which you were not reimbursed?

Please call for LOSS worksheet

Did you incur moving expenses for a job more than 50 miles from your previous place of employment?

Did your employer reimburse any expenses? Did you have expenses in relation to seeking a new job?

Please call for **MOVING/JOB SEEKING** worksheet.

Do you have **UNREIMBURSED** expenses for:

\$ _____ Union Dues \$ _____ Uniforms \$ _____ Job travel \$ _____ Job tolls/parking

Did you travel between more than one job during any working day? Did you use your own auto for business purposes? Do you run errands for your employer in YOUR car without reimbursement?

TO TAKE ANY AUTO DEDUCTIONS, PLEASE CALL FOR AN AUTO DEDUCTION WORKSHEET. Vehicle info needed: Make & Model, Date purchased, Cost, Total miles driven for year, business miles driven, commuting miles. Is there a written log? Yes NO

If taxpayer and spouse were employed, attended school, or job seeking during this year, did you incur childcare expenses? Did you have reimbursement from your employer? INFO YOU MUST HAVE:

Amount paid/ Childcare Provider/	FEIN#/	Provider Address C/S/Z
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\$ _____

\$ _____

Do you qualify for the Earned Income Credit? An Eligibility Checklist MUST be completed.

Did you make Estimated Tax payments? Over payment carryforward? Please list date paid and amounts.

FEDERAL: _____ STATE: _____

DATE Paid	AMOUNT	DATE Paid	AMOUNT
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_____ \$ _____ \$ _____

_____ \$ _____ \$ _____

_____ \$ _____ \$ _____

_____ \$ _____ \$ _____

Did you receive IRS or State notices for a prior year's return? Be sure to send a copy of the correspondence.