

RETIREMENT CONTRIBUTIONS

	Date	Traditional IRA	SEP/SIMPLE	Roth IRA	Total Value
Single/Taxpayer					
Spouse					

HIGHER EDUCATION EXPENSES

*note if not a full time student	1st Student	2nd Student	3rd Student	4th Student
Taxpayer/Spouse/Dependent				
First 4 years of education? Y/N				
	Amount	Amount	Amount	Amount
Tuition				
Fees, Books, Supplies				
Scholarships or Grants				
Job Related Education				
	Miles Driven	Room and Board	Books and Supplies	Seminar Fees
Taxpayer				
Spouse				

****Please Provide Form 1098-T****

OTHER LOSSES AND DEDUCTIONS

	TAXPAYER (T)	SPOUSE (S)	NOTES
Alimony paid (Recipients name, Soc. Sec. Number, & Amount Paid)			
(Divorce prior to 12/31/18)			
Health savings account deduction (Form 8889)			
Educator expenses			

AUTOMOTIVE WORKSHEET (DOES NOT APPLY TO W-2 EARNINGS)

Vehicle Information	Date Placed in Service	Make	Year	Model	Cost or Basis	
Vehicle 1- (T)						
Vehicle -2 (S)						
Vehicle 3						
Mileage	Vehicle 1- (T)		Vehicle 2- (S)		Vehicle 3	
Beginning of Year						
End of Year						
Total Miles						
Business Miles						
Personal Miles						

Actual Expenses	Vehicle 1 - (T)	Vehicle 2 - (S)	Vehicle 3
Gas & Oil			
Washing/Lube			
Repairs/Maint.			
Tires/Accessories			
Insurance			
Parking/Tolls			
Licenses			
Lease Payments			
Other			

Tax Payer must maintain log, including beginning and ending odometer readings, when claiming auto expense deductions.

SELF EMPLOYED EXPENSES ONLY

Is another vehicle available for personal use? Yes / No	
T= Taxpayer S=Spouse	

INCOME

WAGES/SALARIES/W2 FORMS

T/S	Name of Employer	Taxable Wages	Fed. W/Held	Soc. Sec.	Medicare	State	Local

(Please provide a copy of ALL W2's claimed in this section)

INTEREST INCOME

DIVIDEND INCOME

T/S/J	Name of Payer	Amount	Name of Payer	Total Ord. Div.	Qualified Div.	Cap. Gains

Do you have an interest in a foreign bank account or trust? YES/NO
Please provide 1099's

PENSIONS/ANNUITIES/IRA'S

T/S/J	Payer	Gross Distribution	Taxable Amount	Fed. W/Held

(Please attach ALL 1099's for the above sections)

CAPITAL GAINS AND LOSSES

T/S/J	Description	Date Acquired	Date Sold	Sales Price	Cost or Basis

(Please include ALL 1099's for the above section, including SALES PRICE & BASIS)

MISCELLANEOUS INCOME

SOCIAL SECURITY INCOME

Source of Income	Amount	SSA-1099	Benefits (box 5)	Medicare
Alimony (Divorce prior to 12/31 /18)				
Jury Duty (Or other public service)		Taxpayer		
Tips/Gratuities (Not reported on W2)				
Contests/Awards (Attach 1099's)		Spouse		
Commissions/Bonuses (Not reported on W2)				

SALE OF RESIDENCE

Pensions/Annuities (Attach 1099-R)		Date Acquired		
IRA/Keogh (Attach 1099's)		Date Sold		
Profit Sharing Distributions (Attach 1099's)		Cost or Basis		
Unemployment Compensation (Attach 1099-G)		Improvements		
Partnerships/Estates/Trusts (Provide K-1's)		Expense of Sale		
Small Business Corps/Sub Chapter S (Provide K-1's)		Selling Price		
Farm Income (Provide Details)		Was any part of home rented or used for business?		Yes/No
Forgiven Debt		Was home used as principal residence for 2 years?		Yes/No
Gambling winnings (Provide W2-G)		(Please provide closing Documents)		
Other (Explain)				

For Rental, Farm, or Small Business activities please contact us and we will provide a detail worksheet.

