

# IMPORTANT! Your personal individual return organizer enclosed.

PERSONAL TAX	DATA						
Taxpayer				Spouse			
SS#				SS#			
Birthdate				Birthdate			
Occupation				Occupation			
College Tuition		Yr.	Amount \$	College Tuition	Yr.		Amount \$
Address				<b>Telephone</b> (Primary Taxpayer)			
City				Telephone (Spouse)			
State				Email (Primary Taxpa	yer)		
Zip				Email (Spouse)			
DEPENDENTS *F	Personal E	exemption disa	allowed for any depo	endent unless the social se	ecurity # is p	provided o	on the tax return.
Name	Birthda	te		Relationship	College 1	<b>Fuition</b>	
					Yr.	A	mount

# CHILD CARE DEDUCTIONS (Number Of Dependents Qualifying)

Name & Address (Include individual's name &/or Organization's name)	SS# or Federal ID	Amount



Tax Year: Sta	tus:
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Employer's Name	Wages	Federal W/H	State W/H	IRA/401 K Contribution

#### INTEREST INCOME

# DIVIDEND INCOME (Enclose all 1099-INT/DIV Forms)

Payer	Amount	Payer

Payer	Total Amount	Capital Gain	Nontaxable

### OTHER INCOME (Enclose all 1099, SSA-1099, K-Is & other Misc. Forms)

	Social Security	Unemployment	Alimony	State Refund	Other
Taxpayer					
Spouse					

### PERSONAL ITEMIZED DEDUCTIONS

Medical	Amount	Interest	Amount
Prescription Drugs		Mortgage Interest Paid	
Medical Insurance		Mortgage Interest Paid	
Doctors/Dentists		To Individuals (Name, SS#, Address)	
Hospitals		Student Interest T	
Eyeglasses/Hearing Aids		Student Interest S	
HSA Payment			
Other			
Taxes		Charitable Contributions	
Real Estate		Cash	
Real Estate		Cash	
Personal Property		Non-Cash	
State & Prior Yr Income Tax			



### 401K & IRA DISBURSEMENTS

Employer's Name	Gross Distribution	Taxable	F/W	Owner's Contribution

SCHEDU	LE D				
CAPITAL	<b>ASSETS</b>	SOLD	(Securities,	Real Estat	te, Etc.)

(Attach Forms 1099B & 1099S)

Description of Property	Date Acquired	Date Sold	Sale Price	Depreciation Taken (if applicable)	Cost or Basis

### DEPRECIABLE/DEPLETABLE ASSET ADDITIONS

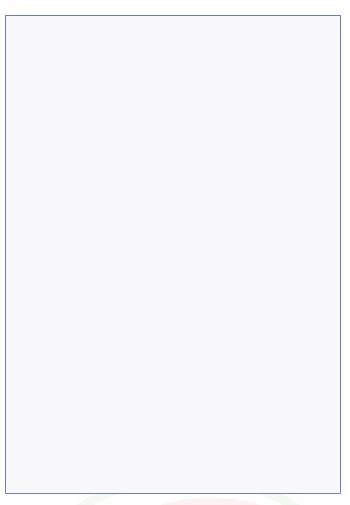
Date Purchased	Description	Cost

NOTES		



# SCHEDULE E NOTES

Rental Income	
Property Description	
Rent Received	
Expenses	
Advertising	
Auto & Travel	
Cleaning & Maintenance	
Commissions	
Insurance	
Professional Fees	
Management Fees	
Mort 'age Interest	
Other Interest	
Repairs	
Supplies	
Taxes	
Utilities	
Wages/Salaries	
% Occupancy by Taxpayer	







# SCHEDULE C, F, RETURNS 1065, 1120, 1120S

Business Income (Attach	1099 Forms)	Advertising.
Business Name		Auto-Truck Expense
Federal ID No.		Bad Debts
Principal Business Activity		Collection Expense
Principal Product		Commissions
Method Used to Value Inventory		Dues & Subscription
Accounting Method:	☐ Cash ☐ Accrual	Employee Benefit Pr
Gross Income Amount		Freight & Express
Less Returns/Allowances		Insurance**
Cost of Sales Amount		Interest - Mortgage**
Beginning Inventory		Interest - Other
Purchases		Janitorial & Cleaning
Cost of Labor		Laundry
Materials & Supplies		Legal & Accounting I
Freight In		Office Expense
Other		Pension & Profit Sha
Ending Inventory		Postage
Deductions Amount		Rent/Lease
		Repairs & Maintenan

#### \*\*BUSINESS USE OF HOME - FORM #8829

Total Area of Home:	sq. ft
Total Area Used for Business:	sq. ft
Non-Exclusive Use by Day Care Providers Only:	
Hours/Day Used for Day Care:	
Days/Year Used for Day Care:	

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Collection Expense	
Commissions	
Dues & Subscriptions	
Employee Benefit Programs	
Freight & Express	
Insurance**	
Interest - Mortgage** (Business)	
Interest - Other	
Janitorial & Cleaning	
Laundry	
Legal & Accounting Fees	
Office Expense	
Pension & Profit Sharing	
Postage	
Rent/Lease	
Repairs & Maintenance	
Salaries	
Supplies	
Taxes & Licenses* *	
Telephone	
Travel	
Total Meal & Entertainment	
Utilities**	

# AUTOMOBILE EXPENSE CAR 1 CAR 2

Total Miles Driven	
Personal Mileage	
Business Miles Driven	
Business Use %	
Average Daily Commuting	
Written Records Available?	
Another Vehicle Available for Personal use.	
Is an employer-provided vehicle available for personal use?	

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Actual Automobile Expenses	
Gas & Oil	
Insurance	
Licenses	
Lubrication	
Re airs	
Tires. Tire Re air	
Other	