PERSONAL INCOME TAX RETURN DATA
Tax Year 2019

The information required on this form is pertinent to the preparation of your INCOME TAX RETURN and relates to you and your family personally, and not to your business operations.

Please complete and return to us as soon as possible. WE MUST HAVE THIS SIGNED DATA SHEET AND COMPLETED QUESTIONNAIRE TO PREPARE YOUR INCOME TAX RETURN.

You are cautioned that paid bills and cancelled checks claimed by you as deductions herein, must be preserved for a period of at least three years to comply with federal and state tax regulations and audit procedures. Do not claim as deductions any bills that have not been paid during the tax year unless they were charged to your credit card before the tax year end.

If we may be of assistance to you in preparing this form, kindly contact us.

		Social Security Number	Date of Birth	Date of Death.
NAMES:	Self ____________	____________	________	________
	Spouse ____________	____________	________	________

OCCUPATION: Self ____________ Spouse ____________

ADDRESS: List your current mailing address below: Email address ____________

Street ____________ City ____________ State ________ Zip ____________

____

Work Phone Home Phone Cell Phone Spouse Cell Phone

Your marital status as of 12/31/19 ☐ Single ☐ Married

		Yes	No		Yes	No
Do you want $3 to go to the presidential campaign fund? (This will not affect your tax.)	Self	☐	☐	Spouse	☐	☐
If you have a tax refund, do you want it **directly deposited** into your bank account?		Yes ☐	No ☐			
If yes, attach a voided check or let us know if you want to use the same account as in the prior year.						
Are you legally blind?	Self	☐	☐	Spouse	☐	☐

DEPENDENTS

Full Name	Date of birth	Social Security Number	Relationship	Months lived in home	Months as a student	% of Support By you	By others

A social security number must be provided. If your children do not live with you, please send a copy of the pre-1985 custodial agreement or Form 8332.

SALARIES & COMMISSIONS for SELF AND SPOUSE
Attach your W-2 Forms from your employer or 1099 Forms

Self (T) Spouse (S)	Employer	Federal Wages	Federal tax withheld	State tax withheld	Local tax withheld	State Wages	FICA Wages

ESTIMATED TAX PAYMENTS YOU HAVE MADE:

	APRIL 15, 2019 1st QUARTER Date Amount	June 15, 2019 2nd QUARTER Date Amount	Sept 15, 2019 3rd QUARTER Date Amount	Jan 15, 2020 4th QUARTER Date Amount
Federal	$	$	$	$
State	$	$	$	$

INTEREST YOU EARNED
(Do not include IRA Interest)
Attach INT and Brokerage Statements

Tax Exempt	From Whom Received	Amount
		$

DIVIDENDS YOU EARNED
Attach Form 1099-Div and Brokerage Statements

	Received From	Ordinary Dividends	Qualified Dividends	Capital Gains	Tax Exempt	Foreign Tax Paid

Interest income from seller financed mortgage $___________________
List name and social security number of payer___________________

CAPITAL GAINS AND LOSSES	ITEM SOLD Provide broker statements w/1099B / cost information	TSJ	DATE ACQ'D	DATE SOLD	SELLING PRICE	COST	GAIN (LOSS)
Sale of real estate,							
personal property,							
stocks, bonds, etc.							

FOR REAL ESTATE, ENCLOSE SETTLEMENT SHEETS. FOR STOCK SALES, PROVIDE COST OF STOCK AND BROKERAGE STATEMENTS

RENT AND ROYALTY INCOME Description and address of Property	Address 1	Address 2
GROSS RENTS	$	$
EXPENSES:		
Advertising		
Auto and travel (# of miles)		
Cleaning and maintenance		
Commissions		
Insurance		
Legal and professional		
Mortgage interest		
Other interest		
Repairs Improvements		
Supplies		
Taxes		
Utilities		
Other		
What percent of the property did you occupy during 2019?	%	%
If Vacation home or condo How may days occupied by You during 2019?		
Number of days rented 2019	_______ # days	_______ # days
Were you active in the Management of the rental property in 2019?	☐ Yes ☐ No	☐ Yes ☐ No

SCHEDULE OF IMPROVEMENTS
Did you make improvements to investment or rental property or purchase furnishings for it?

Date	Description of Asset Purchased	Cost

OTHER INCOME

Partnerships or LLC (Attach K-l) $____________
Did you materially participate in the partnership or LLC? Yes ☐ No ☐

S-Corporation (Attach K-l) $____________
Did you materially participate in the S-Corp? Yes ☐ No ☐

Estate or Trust (Attach K-1) State income tax refund $____________

Alimony $____________

Pension/profit sharing (Attach 1099R/RRB-1099R) $____________
How much was rolled over?

IRA distributions (Attach 1099R) How much was rolled over? $____________
If not all, answer Question 2 under Roth IRA, next page.

Farm income (Attach detail) $____________

Unemployment compensation $____________

Social security/railroad retirement (Tier II) (Attach Forms SSA-1099/RRB-1099) $____________

OTHER INCOME (CONTINUED)

Lottery or other winnings .... $ ________________

Tips (not included in W- 2) .... $ ________________

Other ______________________ $ ________________

Gambling winnings

INSTALLMENT SALE INCOME:

Total received this year................................ $ ________________

Interest included above................................ $ ________________

Year of sale ________________

If we did not prepare the return for year of sale, please provide Form 6252 for that year.

ROTH IRA CONVERSION (attach a copy of your 1099R)

1. Did you convert any traditional IRA into any ROTH IRA? Yes □ No □ If yes, go #2. If yes, who converted how much? Self________________________ Spouse________________ ________

2. Did you or your spouse ever make a nondeductible IRA contribution? Yes □ No □ If yes, did we prepare your latest Form 8606? Yes □ No □ If no, please provide a copy of the most recent Form 8606 for you and your spouse.

Also provide the end of year value of all traditional IRAs for yourself $________________ and your spouse $___________________

ADJUSTMENTS TO INCOME

IRA, ROTH IRA, KEOGH, SEP, SIMPLE PAYMENTS

Please Include statements from Plan Administrators and a copy of any 5498.

	SELF	SPOUSE
Are you covered by an employer retirement plan?	Yes□ No□	Yes□ No□

PLAN TYPE

_____________ $ __________________ $______________

_____________ $ __________________ $______________

OTHER ADJUSTMENTS

Penalty for early withdrawal of savings .... $______________ _

Educator expenses.. $______________

Reservist/Artist.. $______________ _

Student loan interest paid (Attach 1098-E)………$______________

Tuition and fees deduction .... $______________

Archer MSA/USA... see Medical expenses below

Alimony paid .... $ __________________ Last name and SSN of recipient:

____

Will nondeductible IRA contributions be withdrawn? Yes ☐ No ☐

BUSINESS USE OF PERSONAL VEHICLE (Use business questionnaire if appropriate) Do not complete this part if you have already supplied your employer with your expenses and your reimbursement is not included in your wages.

The vehicle was used for what business purpose? Employee ☐ Partner ☐ Other____

	Vehicle #1	Vehicle #2
Description		
Date first used for business		
Lower of cost or value at date above		
Odometer reading at year end		
Total miles driven during the year		
• Business miles		
• Commuting miles		
Business parking and lolls		
Interest paid (ignore for employee)		
Tax (PPT and value based registration)		

Do you have evidence to support business miles claimed? Yes ☐ No ☐

Is the evidence in writing? Yes ☐ No ☐

Cost of gas, oil, repairs, lease, etc___________

Vehicle #1 $_____________

Vehicle #2 $_____________

Amount reimbursed by employer $_____________

MEDICAL EXPENSES **(Include Form 1095-A Health Insurance Marketplace Statement if applicable) (Obama Care)**

Med insurance premiums (no pretax employee payments) $_____________

Long term care insurance .... Taxpayer $_____________

.... Spouse $_____________

Prescription medicine and insulin .... $_____________

Miles driven for medical care............................... _____________

Other medical transportation and lodging .... $_____________

Dr. ____ $_____________

Dr.____ $_____________

Dr.____ $_____________

Hearing aids .... $_____________

Eye glasses/contacts $_____________

Nurses...................... $_____________

Lab fees .... $_____________

Ambulance .... $ _____________

Hospitals (list) ____ $_____________

Other (specify) ________________________

Less Insurance reimbursement ($_______________)

Health savings account (Attach 5498-SA) $_________

For HSA —> individual □ or Family □ Coverage?

Did you have health insurance in 2019? ____________

If you had health insurance for only part, but not all, what months were you covered? _________________

Who was your insurance carrier? _____________________________________

TAXES

Real estate tax (personal residence)......... (LIST EVEN IF NOT ITEMIZING EXPENSES). $_____________

State sales tax at general rate from receipts .... $_____________

Special item sales tax i.e. car/boat .... $_____________

Other real estate taxes (investment property)... $_____________

Personal property tax and value added tax on personal vehicles .... $ _____________

Balance paid with prior year state and / or local return (tax only)................................. $_____________

INTEREST PAID (Do not include rental property. Enter student loan interest in ADJUSTMENTS TO INCOME section.)

Home mortgage paid to financial institution $ ___________

Was any mortgage money used to buy a boat? Yes □ No □

Was any of the money used for any purpose other than to buy or build your main home and one other? Yes □ No □

If yes, how much? $ ___________

Home mortgage interest paid to an individual

Provide name, address and SSN of payee:

____

(Attach all Forms 1098)

Closing points on new home purchase * $_____________

Closing points on current year refinance * .... $_____________

Term of refinance note ....__________

How much of the refinance money was used to add improvements to your home? $_____________

Investment interest... $_____________

Interest paid to invest in a partnership or S-Corporation that you manage............................... $_____________

• Provide a copy of settlement papers.

CONTRIBUTIONS	PAID TO	AMOUNT/VALUE	PAID TO	AMOUNT/VALUE
				$_____________
	Church	$_____________	________________	$_____________
	Salvation army	$_____________	________________	$_____________
	Scouts.	$_____________	Miles driven for charity	_____________

Do you have support for all cash contributions and receipts over $250? Yes □No □ For non-cash contributions, provide cost, value and indicate how you determined the value of your donation. For each non-cash donation valued at $5,000 or more, do you have an appraiser's verification? Yes □ No □

MISCELLANEOUS (Paid personally)

Gambling losses (up to winnings only) $_____________

Adoption expenses (enclosed details) ___________
- Check if foreign ___________
- Date adoption final ___________

CHILD AND DEPENDENT CARE

IF YOU AND YOUR SPOUSE WORKED, OR ONE WAS A FULL TIME STUDENT, DID YOU HAVE CHILD CARE EXPENSES? YES □ NO □

Number of qualifying persons cared for in 2019 _________ Expenses paid in 2019_____________________

Amount of employer provided childcare $ _____________ For whom were the expenses paid? _______________

Name and Relationship of Qualifying Person(s):

____

Amount paid for each: ___________________________ Were services performed in your home? YES □ NO □

If yes, have you filed wage tax returns? YES □ NO □

If yes, attach a copy of the W-2(s) you issued.

Name of each childcare provider ___________

EIN/SSN of each provider ______________

Address of each childcare provider____

OTHER-

Are there any loans to you or from you, that are in the amount of $10,000 or more, that are interest free?

Yes□ No □ If yes, what is the date of the loan? ____________and the amount $ ___________________

Did you buy a new principal residence in 2019 and pay for mortgage insurance?

If yes, what amount? _______________________

DECLARATION

I HAVE REVIEWED THE INFORMATION GIVEN YOU ON THIS FORM AND, TO THE BEST OF MY KNOWLEDGE, IT IS TRUE, CORRECT AND COMPLETE. I HAVE MAINTAINED THE UNDERLYING RECORDS REQUIRED BY LAW TO SUPPORT THIS INFORMATION AND IT IS READY FOR PREPARATION OF MY INCOME TAX RETURN. I AUTHORIZE YOU/YOUR COMPANY TO PREPARE MY INCOME TAX RETURN AND RETAIN COPIES OF APPROPRIATE DOCUMENTS.

NOTE: PLEASE DO NOT FORGET YOUR SIGNATURE ->

Signature ______________________________

Date ______________________________

Miscellaneous continued

	YES	NO
Did you or your dependents incur any post secondary education expenses, such as tuition?............................		
If you or your spouse are self-employed, are you or your spouse eligible to be covered under an employer's health plan at another job? If yes, how many months were you covered?		
Did you move to a different home because of a change in the location of your job?......................................		
Did you receive unreported tip income of $20 or more in any month of this year?		
Did you or your spouse receive distributions from long-term care insurance contracts? If yes, please include Form 1099-LTC...		
Did you make gifts of more than $ 15,000 to any individual?..................		
Did you have any foreign income or pay any foreign taxes during this year?.		
Were you or your spouse a grantor or transferor for a foreign trust, have an interest in or a signature or other authority over a bank account, securities account, or other financial account in a foreign country?		
Did you create or transfer money or property to a foreign trust?...		
Did you purchase a new "clean fuel" vehicle, electric vehicle or hybrid vehicle in this year? If yes, what kind?		
Did you use gasoline or special fuels for business or farm purposes (other than for a highway vehicle) during the year? If undyed diesel fuel, provide the name and address of the supplier and the dates of purchase................		
Have you received a punitive damage award or an award for damages other than for physical injuries or illness?		
Did you engage in any bartering transactions?...		
Were you notified by the IRS or other taxing authority of any changes in prior year returns?...........................		
Do you owe your state any use tax for out of state purchases? If yes, provide the information required by your state...		
Are you or your spouse a teacher (K-12 grade) who worked at least 900 hours in a school year and spent up to $250 on classroom related expenses?...		
Did you or your spouse incur job related legal fees?................		
Did you make any energy savings improvement to your house ?.		

Sale of Your Home

	YES	NO
Did you sell your home in this year?		
If yes, did you (or your spouse if MFJ) own the home as your principal residence for at least two years of the five-year period prior to the sale?......................................		
If yes, did you (and your spouse if MFJ) occupy the home as your principal residence for at least two years of the five-year period prior to the sale?......................................		
Was the home acquired through a tax free (1031) exchange?. If YES, what was the date of the exchange?____________		
Did you ever use any portion of the home for business purposes?................		
Have you or your spouse sold a principal residence within the last two years? .		
At the time of sale, was the residence owned by the taxpayer, spouse or both?		

Severance/Retirement

	YES	NO
Did you retire or change jobs in this year?...		
Did you receive retirement/severance compensation? If yes, date received.___		

Tax Year 2019

	YES	NO
Personal information		
Did your marital status change during the year?...		
If married, do you and your spouse want to file separate returns?...		
Did your address change during the year?...		
Can you or your spouse be claimed as a dependent by another taxpayer?..		
Dependents		
Did you receive any Advanced Earned Income Credit?..		
If yes how much?_____________		
Did you pay for childcare while you worked or looked for work?...		
Do you have any children under the age of 18 with unearned income more than $1,050?...................................		
Do you have any children under the age of 21 who are students with unearned income more than $1,050?.......		
Did you adopt a child or begin adoption proceedings during this year?..		
Purchases, Sales and Debt		
Did you have any debts canceled, forgiven, or refinanced during the year?...		
Did you start a new business, purchase a new rental property or farm, or acquire any new interest in any partnership or S Corporation during this year?..		
Did you sell an existing business, rental property, farm, or any existing interest in a partnership or S Corporation during this year?...		
Did you sell, exchange, or purchase any real estate in this year? If so, please attach closing statements..............		
Did you withdraw any amounts from your IRA or Roth IRA to acquire a principal residence?.........................		
Did you receive grants of stock options from your employer, exercise any stock options granted to you or dispose of any stock acquired under a qualified employee stock purchase plan?........!...		
Did you take out a home equity loan during the year? If yes, provide closing statement. What were the funds used for?____...		
Are you claiming a deduction for mortgage interest paid to a financial Institution for which someone else received the Form 1098? If yes, provide name, address and ID# of recipient__________________________________		
Did you pay any student loan interest? If yes, how much?_____________________		
Itemized Deductions		
Did you contribute property (other than cash) with a fair market value of more than $5,000 to a charitable organization?...		
Miscellaneous		
Did you or your spouse contribute to or establish a medical savings account (MSA) or a Health Savings Account (USA) in this year?		
Did you withdraw any amounts from your IRA to pay for higher education expenses incurred by you, your spouse, your children or grandchildren?...		
Did you or your spouse contribute to or establish a Roth IRA or convert an existing IRA into a Roth IRA?		
Did you withdraw any amounts from a Coverdell Education Savings Account (formerly educational IRA)?		