

Tax Preparation Worksheet

Please use this worksheet to guide and assist you in compiling the information needed to prepare your income tax return. Please fill in as much information as you can. We will review this information and all other deductions not listed on this form. If we did not prepare your tax return last year, please bring a copy for our review.

Taxpayer Name: _____ SS#: _____ - _____ - _____
 DOB: _____
 Best Phone: _____ Type _____
 Email: _____ Spouse's Name: _____
 SS#: _____ - _____ - _____ DOB: _____
 Best Phone: _____ Type _____
 Email: _____

Dependent Name (*Last if different*)
 Soc Sec # DOB Relationship
 1 _____
 _____ - _____ - _____ / ____ / ____
 2 _____
 _____ - _____ - _____ / ____ / ____
 3 _____
 _____ - _____ - _____ / ____ / ____

Taxes Paid

Property Tax on Home \$ _____
 Other Real Estate Tax \$ _____
 Personal Property Tax \$ _____ (Vehicle/Motor Home/Boats)

Questions (check all that apply)

Did/Will you contribute to an IRA for 2018? _____
 Did you buy or sell a home in 2017? _____
 If yes attach HUD Statement.
 Did you do anything to improve the energy efficiency of your home (insulation, furnace, windows or doors) _____
 Did any dependent have \$950+ of income and \$1900+ of unearned income (dividends/interest/capital gains)? _____
 Did you pay/receive alimony? _____
 If yes, amount \$ _____
 You must provide the social security number of the person who you **paid**.
 Did you fix/replace your personal septic system? _____
 Did you pay rent in Massachusetts? _____
 If yes how much? \$ _____

If you had income from- then provide

_____ Wages W-2
 _____ Gambling W-2G
 _____ Unemployment 1099-G
 _____ Social Security 1099-SSA
 _____ Interest 1099-INT
 _____ Dividends 1099-DIV
 _____ Pensions, IRA or Retirement 1099-R
 _____ Capital Gains 1099-B
 _____ Debt Cancellation 1099-C
 _____ 529 Distribution 1099-Q
 _____ Partnership or S Corp Income K-1

Estimated Payments: Please list the date and amount paid for any 2018 estimates.

Date	Federal	State of _____
____/____/____	\$ _____	\$ _____
____/____/____	\$ _____	\$ _____
____/____/____	\$ _____	\$ _____
____/____/____	\$ _____	\$ _____

Medical Expenses (these must exceed 10% of your income to be deductible, or 7.5% if over age 65)

Medical/Dental Insurance: \$ _____

(Do not include Medicare or pretax medical insurance)

Long Term Care Ins:

Taxpayer \$ _____ Spouse \$ _____

Prescriptions: \$ _____

Dental \$ _____

Copays (Dr./Clinic/Hospital): \$ _____ Therapy \$ _____

Vision \$ _____

Hearing Aids \$ _____

Medical Miles _____

Medical Parking/Tolls \$ _____

Interest Paid:

Provide all form 1098 for mortgages and home equity loans.

Did you pay points on a refinance in 2017 not listed on your form 1098? \$ _____

Interest paid on a margin loan or other investment interest: \$ _____

Charity: You must have either a cancelled check or receipt for all contributions up to \$250 at one time, and a receipt for any contribution over \$250 at one time.

Total in 2018 by cash or check that you have a proper documentation for: \$ _____

Total receipted non-cash contributions \$ _____ If the total is over \$500, please send receipts for all non-cash donations as this needs to be reported to IRS.

Miscellaneous Deductions:

Investment Fees: \$ _____

Tax Prep Fee: \$ _____

Safe Deposit Box \$ _____

Union Dues: \$ _____

Prof. Dues: \$ _____

Work Tools: \$ _____

Safety Shoes \$ _____

Teacher Expense \$ _____

Gambling Losses: \$ _____ (If you had winnings)

Other work or investment related expenses: _____

Other Information:

Moving Expenses _____

College Tuition _____

For each student, please provide Form 1099-T, a copy of the bill from the college for each semester, and receipts for books, supplies and equipment.

Child Care _____

For each child, please provide amount paid and providers name and tax id number.

Rental Income _____

Please provide a list of rental income & expenses by property.

Self-employment _____

Please provide a list of income and expenses for your business as well as a mileage log.

Would you like your refund directly deposited?

Bank Name _____

Routing # (9 digits) _____

Account # _____

Checking or Savings? (circle one)