

E.E. Tax Financial Services

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Dear Tax Client:

- Enclosed is our checklist which will assist you in remembering and listing deductions. PLEASE USE this list as it will assist us in saving tax dollars for you.
- Please call for an appointment as early as possible to avoid the rush. Early filing cuts two (2) weeks off the time necessary to get your refund.
- Major tax law changes require answers to all questions below and on reverse.
- If you have any questions concerning your taxes, please give us a call.

Name: Taxpayer _____ SS No. _____ Birthdate _____

Spouse _____ SS No. _____ Birthdate _____

Address: _____ Telephone (Home) _____ () _____

_____ Telephone (Work) _____ () _____

Occupation: Taxpayer _____ Spouse _____

Dependents

Name	Birthdate	Social Security Number	Relationship	No. of months lived in home

Check Off List (If Answer(s) are Yes - Supply Detail)

	Yes	No
Did you receive W-2's/1099's/K-1's? - Attach copies	☐	☐
Interest Income (bring statements)	☐	☐
Non-Taxable Interest Income (bring statements)	☐	☐
Dividend Income? (bring statements)	☐	☐
Tip and Gratuities?	☐	☐
Alimony Received?	☐	☐
Annuity and Pension Received? (bring statements)	☐	☐
Did you receive an advance child tax credit? Amount: \$	☐	☐
Bonuses/Commissions? (not reported on W-2)	☐	☐
Jury Duty or Election Board Fees?	☐	☐
Lottery, Contest & Gambling Winnings?	☐	☐
Prizes/Awards?	☐	☐
Royalty Income?	☐	☐
Scholarships/Fellowships?	☐	☐
Unemployment Compensation? (bring statements)	☐	☐
Veterans Benefits? (Sch R)	☐	☐
Social Security? (bring statements)	☐	☐
Hobby Income?	☐	☐
Disability Income?	☐	☐
Did you withdrawal IRA or KEOGH funds during the year?	☐	☐
Sales of Stocks or property? (bring statements)	☐	☐
Need: Description, Date Purchase, Date Sold, Purchase Price, Sale Price Expenses of Purchase/Sale		
Child Care Deduction?	☐	☐
Need: Number of Dependents (provide information: name & address, SS, or EIN # and amount paid)		
Move During Year?	☐	☐
Need: Mileage/Expenses of Move		
Rental Income? (bring statements)	☐	☐
Business Income? (bring statements)	☐	☐
Farm Income? (bring statements)	☐	☐
Interest on Student Loans? (bring statements)	☐	☐
Teacher Out-Of-Pocket Expenses? Amount: \$	☐	☐

DEDUCTION SCHEDULE

MEDICAL EXPENSES PAID

Total Prescription Medicines & Drugs\$ _____
Total Doctors & Dentists\$ _____
Total Miscellaneous Medical\$ _____
Total Health & Dental Insurance\$ _____
Travel for Medical Treatment\$ _____ Miles
Total Insurance Reimbursements.....\$ _____

TAXES PAID

Real Estate Taxes (personal residential only)\$ _____
Real Estate Taxes (vacation/2nd residence only)\$ _____
Real Estate Taxes (Investments only)\$ _____
Vehicle License Fee\$ _____
No. of Vehicles\$ _____
Personal Property Tax (boat, plane, etc.)\$ _____
State Taxes Paid\$ _____
Sales Tax Paid on Large Purchases
(bring statements)\$ _____

MORTGAGE INTEREST ON PERSONAL RESIDENCE(S)

Personal Residence Mortgage Interest (1st).....\$ _____
Personal Residence Mortgage Interest (2nd)....\$ _____
Vacation/2nd Residence
Mortgage Interest (1st)\$ _____
Vacation/2nd Residence
Mortgage Interest (2nd).....\$ _____
Are any above mortgages paid to an individual?
(circle one - if yes, supply) Yes / No
Name _____
Address _____
Soc Sec _____

SPECIAL NOTE:

If you purchased a personal residence we will need:

1. Escrow Papers of Purchase

If you purchased or sold a rental/business property:

1. Escrow Papers of Purchase
2. Escrow Papers of Sale
3. Expense of Sale

DEDUCTIBLE HOME EQUITY LOANS

1. Bring Loan Papers

INVESTMENT INTEREST PAID

.....\$1 _____
.....\$1 _____
.....\$1 _____

BUSINESS RELATED DEDUCTIONS

Rental Expenses (bring sch. of all expenses)\$ _____
Business Expense (bring sch. of all expenses)\$ _____
Farm Expense (bring sch. of all expenses)\$ _____
Depreciable Business Property\$ _____
Purchase/Sale Information\$ _____

CONTRIBUTIONS

Church (Provide Proof of Contribution)\$ _____
March of Dimes\$ _____
United Fund.....\$ _____
Heart Fund/Cancer Fund\$ _____
Payroll Deductions.....\$ _____
All Other Charities.....\$ _____
Goodwill/Salvation Army-Mdse\$ _____
(Provide Proof of Contribution over \$500)\$ _____

MISCELLANEOUS DEDUCTIONS

Union Dues/Professional Dues.....\$ _____
Trade and Professional Publications\$ _____
Uniforms Purchased and Upkeep\$ _____
Income Tax Preparation Fee\$ _____
Safe Deposit Box Fee\$ _____
Safety Equipment/Safety Shoes.....\$ _____
Small Tools/Job Supplies.....\$ _____
Alimony (to whom paid)\$ _____
SSN\$ _____
Employment Agency Fees.....\$ _____
Employment Seeking Expenses.....\$ _____
Educational Expenses\$ _____
IRA/SEP Contributions\$ _____
Military Reserve Training.....\$ _____
Casualty or Theft Loss\$ _____
Uncollectible Non-Business Bad Debts\$ _____
Gambling Losses (limited to winnings)\$ _____
(Employee Business Expenses - Detail List)\$ _____
(Auto, Cell Phone, Etc.)\$ _____
Hope Scholarship.....\$ _____
Lifetime Learning Credit\$ _____
Health Savings Account Contributions (HSA)....\$ _____
Student Tuition & Fees Paid (Form 1098-T)\$ _____

ESTIMATED TAXES PAID

Date	Federal	State
April 15	\$ _____	\$ _____
June 15	\$ _____	\$ _____
Sept 15	\$ _____	\$ _____
Jan 15	\$ _____	\$ _____
Extension	\$ _____	\$ _____