Lang Accounting Services PLLC Stacy Herman Lang, CPA

101 S. Rural Rd. Ste 103, Tempe AZ 85283

602-574-2167

stacy@langaccountingservices.cor

This worksheet provides a way for you to organize your income, credit and deduction information only. Whether or not an item is listed on this worksheet is not necessarily an indicator of whether or not an item is taxable or deductible. Tax regulations change often and specific circumstances may determine whether or not any item is relevant to your situation. This worksheet cannot substitute for tax knowledge or professional tax advice.

CLIENT:	

Please bring all 1099, W-2, K-1, 1098, and other tax forms to your appointment.

Life Changes	Yes	No
Address change?		
Purchase or sale of property? Short-sale or foreclosure?		
Change in spouse or dependents?		
Change in employer or job situation?		
Other life changes?		

Income Sources

Interest Income (Reported on 1099-INT)

,	
Interest Income - Savings & Checking	\$
Interest Income - Investments	\$
Interest Income - Federal Bonds, T-Bills	\$
Interest Income - State & Municipal Bonds	\$
Other:	\$

Dividend Income (Reported on 1099-DIV)

Name of Payer		Ordinary	Qualified
		\$	\$
		\$	\$
	;	\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$

Previous Year's State Tax Refund

State Tax Refund may	y be Federal Taxable Income	\$

Social Security, Pension, & Annuity Income

	Taxable	Non-Taxable
Social Security Income	\$	\$
Railroad Retirement	\$	\$
Federal Civil Service/Military Retirement	\$	\$
Other:	\$	\$

Other Income Alimony Received \$ Tips Received (not reported on W-2) \$ Unemployment Income \$ Gambling Winnings \$

\$

Is an employer-sponsored retirement plan available to you?	Yes	No
Do you participate in your employer's retirement plan?	Yes	No
Traditional IRA		
Contributions	\$	
Withdrawals	\$	
Rollovers	\$	
Roth IRA		
Roth IRA Contributions	\$	
	\$ \$	
Contributions		_
Contributions Withdrawals	\$	
Contributions Withdrawals Rollovers	\$	
Withdrawals	\$	

Health Savings Account (HSA) Activity

ls yc	our health savings account a family or individual plan?	Family	Individual
	Contributions	\$	\$
	Withdrawals	\$	\$

Itemized Deduction & Tax Credit Information

Medical Expenses Paid

Other:

Your medical expenses must exceed 10% (7.5% if you are age 65 or over) of your adjusted gross income in order to be deductible on your Federal return. However, your state may permit you to deduct your medical expenses in a more beneficial way. The state of Arizona allows you to deduct 100% of your medical expenses. DO NOT INCLUDE medical expenses you paid through a Health Savings Account or Flexible Spending Account.

Medical Insurance Premiums (includes dental)	\$
Medical Copays (includes dental, psychological, lab, etc.)	\$
Nursing Home Payments	\$
Vision Expenses (appointments, glasses, contacts, cleaning solution, etc.)	\$
Hearing Aids & Batteries	\$
Diabetic Supplies	\$
Other medical supplies & rentals	\$
Parking Fees	\$
# of miles driven for medical appointments, etc.	mi.
Expenses for travel to seek medical treatment	
Lodging	\$
Airfare/public transportation	\$
Meals	\$
Other	\$

	Real estate taxes - investment property		<u> </u>	
	Home mortgage interest - 1st and 2nd home	9]
	Home equity loan interest - 1st and 2nd home	Ç		
	Interest paid on loan for vacant land as investment property	9	•]
	Vehicle License Tax (VLT) paid as part of vehicle registration	9		
	Personal Property Taxes Paid	9		
	Total sales tax paid during year	9		
	Sales tax paid on purchase of automobile, boat, or plane.	9		
	Other	9	\$	
Chi	d or Dependent Care Expenses			_
	e of care provider:			
	ress of care provider:			
SSN	or EID# of care provider (mandatory):			
	Total Expenses for (name of child):			\$
	Total Expenses for (name of child):			\$
				-
	e of care provider:			
	ress of care provider:			
SSN	or EID# of care provider (mandatory):			
	Total Expenses for (name of child):			\$
	Total Expenses for (name of child):			\$
Cha	ritable Contributions: Cash/Check/Credit Card Contributions			
	Religious Organization	9	\$	
	Payroll Deduction (United Way, etc.)	9	\$	
	Scouts	(]
	Purchases of new items for direct contribution (Example: Food and toy drives.)		<u> </u>	
	· · · · · · · · · · · · · · · · · · ·			2
Cha	ritable Contributions: Used clothing, household goods, other proper	ty		
	<u> </u>			

\$

Home and Property Related Deductions (Do not include rental property.)

Real estate taxes - 1st and 2nd home

Please see our "Links" page for the link to the Goodwill Industries International Website where you will find a worksheet guide that might assist you in determining the fair market value (FMV) of property items donated to charitable organizations. If your property contributions have a FMV greater than \$500, please see our "Property Donations" worksheet for more information.

Fair Market Value of Clothing, Furniture, etc. \$

You must retain the following information for any property item that you donate:

Name of Organization:

Date of Contribution:

Date property was originally acquired:

Cost of property when originally acquired:

Receipt from Charitable Organization for Item(s)

--We also suggest that you retain photographs of donated items as well as receipts from your original purchase of those items.--

Unreimbursed Expenses Related to Employment

Union or association dues	\$
Licenses/Certifications	\$
Unreimbursed mileage on personal vehicle (must have log of mileage)	mi.
Mileage from 1st to 2nd job	mi.
Seminars/continuing education	\$
Publications/subscriptions/books	\$
Fingerprinting, physicals, background checks	\$
Tools & safety equipment	\$
Materials & supplies	\$
Meals & entertainment (must be work-related)	\$
Cell phone & pager (if required)	\$
Uniforms (if not convertible to street wear) & Uniform Cleaning/Repair	\$
Insurance - Errors & Ommissions, Liability	\$
Business Gifts	\$
Other:	\$

Educational Expenses

Many different kinds of opportunities exist for educational expenses to benefit a taxpayer's overall tax situation. However, several different criteria must be applied to ensure that the expenses are utilized in the correct way. Please summarize educational expenses by student and be prepared to answer several questions at your tax appointment related to the purpose of the education, type of educational instutition, etc.

Educational Expenses for (name of student):

Tuition ar	d Fees	\$
Books &	Supplies (if required and if purchased from the educational institution)	\$
Mileage f	rom work to school	mi.

Educational Expenses for (name of student):

Tuition and Fees	\$
Books & Supplies (if required and if purchased from the educational institution)	\$
Mileage from work to school	mi.

Miscellaneous Deductions

Attorney Fees (to protect or obtain taxable income)

Employment & Resume Fees

Gambling Losses (limited to gambling winnings)

Investment Expenses (Broker Fees, Publications, Transaction Fees)

Safe Deposit Box

Tax Preparation and Consulting Fees

Please see the worksheets for self employment and rental property for deductions specific to those situations.