

2020 Tax Record Worksheet for _____

Please provide us with all of your 2020 income documents including all W-2s, 1099s, 1098s, K-1s, 1095s, etc. If you would like, you may use this chart below to summarize some of your 2020 tax records.

Estimated Tax Paid		
Federal	Amount	Date Paid
Due 4/15	_____	_____
Due 6/15	_____	_____
Due 9/15	_____	_____
Due 1/15	_____	_____
State	Amount	Date Paid
Payment 1	_____	_____
Payment 2	_____	_____
Payment 3	_____	_____
Payment 4	_____	_____

Health Care	
Health/Dental Insurance	_____
Prescriptions	_____
Medical Mileage	_____
Other Medical Expenses	_____
_____	_____
_____	_____

Miscellaneous	
Job & Investment	
Dues	_____
Subscriptions	_____
Income Tax Prep	_____
Safe Deposit Box	_____
Safety Equipment	_____
Tools (Work Related)	_____
Uniforms (cost)	_____
Uniforms (cleaning)	_____
Supplies (work)	_____
Tuition (improve Job)	_____
Entertain Clients	_____
Lodging	_____
Meals (away from home)	_____
Mileage	_____
Job Hunt	_____
Education (job)	_____
Business	_____
_____	_____
_____	_____
_____	_____
_____	_____
*DO NOT include Personal legal fees, fines, penalties, mileage to & from work, meals during regular work hours or travel as a form of education.	

Charitable Gifts	
Cash/Check	_____
Non-Cash	_____
Charitable Mileage	_____
_____	_____
_____	_____

Child Care Expense	
Provider	Amount
_____	_____
_____	_____
_____	_____

*include name, address, ID# & phone number

Education Expenses	
Tuition & Fees	_____
* include 1098 T & Receipts	_____
Books	_____
Other	_____
_____	_____
_____	_____

Taxes Paid	
Real Estate	_____
DMV	_____
Other	_____

*DO NOT include: Excise, sales, federal, or inheritance taxes.

Claiming Child related Tax credits? For taxpayers who are eligible, we are required to 'verify' that the dependents are actually your dependents and reside in your home. Please have one of these documents which should show the name and address of the dependent (address must match your address): Form 1095 (Health Insurance Tax Form), Statement from Medical Provider (for example, name of dependent on a prescription order), Statement from Daycare Provider, Social Security Administration document, Statement from Landlord, Statement from Church or School, Other document showing name and address of your dependent. **If you have questions, please contact our office. (909) 797-3140**

Have a small business or received a 1099?
 Visit www.prospecttax.com and click "[Schedule C Worksheet](#)" under the 'Client Resources' menu.

Do you have rental real estate?
 Visit www.prospecttax.com and click "[Schedule E Worksheet](#)" under the 'Client Resources' menu.

Notes for Preparer:
