

Tax Record Worksheet for _____

Year: _____

Please provide us with all your tax documents including Forms W-2, 1099, 1098, K-1, 1095, etc.
 This worksheet contains deductions and other information that might provide a tax benefit on your return.

Federal Estimated Tax Paid			State Estimated Tax Paid			Education Expenses	
	Amount	Date Paid		Amount	Date Paid	Tuition & Fees	Form 1098-T
Due 4/15	_____	_____	Due 4/15	_____	_____	Books	_____
Due 6/15	_____	_____	Due 6/15	_____	_____	Other (list): _____	_____
Due 9/15	_____	_____	Due 9/15	_____	_____	_____	_____
Due 1/15	_____	_____	Due 1/15	_____	_____	_____	_____

ITEMIZED DEDUCTIONS

The main itemized deductions are home mortgage interest, state/local taxes (including property taxes), charitable donations, and medical expenses (if more than 7.5% of income). Itemized Deductions will benefit you on your federal or state tax return, if they are more than the standard deduction.

* The federal standard deduction is \$12,950 if you file Single, \$25,900 if you file married, and \$19,400 if you file Head of Household.

* In California, the standard deduction is \$4,803 if you file Single and \$9,606 if you file Married or Head of Household.

HEALTH CARE	TAXES PAID	MISCELLANEOUS
<i>Deductible if more than 7.5% of your income.</i>		<i>Deductible if more than 2% of your income.</i>
Health/Dental Insurance _____	Property Taxes _____	Gambling Losses _____
Doctor/Dental Bills _____	Vehicle Registration _____ <i>A portion of vehicle registration is deductible. In CA, the <u>vehicle license fee</u> is deductible. You can lookup your VLF at dmv.ca.gov/wasapp/FeeCalculatorWeb/vlfform.do</i>	<i>Deductible only if offsetting gambling winnings.</i>
Prescriptions _____	Sales Tax on Major Purchase(s) _____	<u>Deductible on State return only</u>
Medical Mileage _____	<i>Sales Tax on major purchases, such as a car or boat</i>	Income Tax Prep _____
Other (list): _____		Safe Deposit Box _____
		Job Expenses (not reimbursed):

CHARITABLE DONATIONS			
Cash/Check Donations _____	Charitable Mileage _____		
Non-Cash/Item Donations (Please List)			
<u>Date</u>	<u>Description</u>	<u>Donee Organization</u>	<u>FMV (Value)</u>
_____	_____	_____	_____
_____	_____	_____	_____
Notes for Preparer:			

Travel _____

Meals (away from home) _____

Education (Improve Job) _____

**For more information about deducting your personal auto or a home office as job expenses, visit www.prospecttax.com/taxdocs*

Claiming Child related Tax credits? For taxpayers who claim child related tax credits, we are required to 'verify' that the dependents on your return are actually your dependents and reside in your home. Please provide one of the following documents that includes the name and address of your dependents (their 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 School or Daycare Provider
- * Social Security Administration document
- * Other document showing name and address of your dependent(s)

If you have questions, please contact our office. (909) 797-3140

Child Care Expense				
Provider's Name	Provider's Address	Provider's Phone Number	EIN/SSN	Amount Paid
_____	_____	_____	_____	_____

Have a small business or received a 1099?
 Visit www.prospecttax.com and click "Sole Proprietors" under the 'Client Resources' menu.

Do you have rental real estate?
 Visit www.prospecttax.com and click "Rental Properties" under the 'Client Resources' menu.