EAST COUNTY TAX PROFESSIONALS, INC
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Please provide any changes to filing status, dependents, address, email or phone numbers!!

PLEASE FILL OUT QUESTIONAIRE ENCLOSED! and SIGN PERMISSION SLIP!!
(IF MARRIED, BOTH SPOUSES MUST SIGN, mandatory, no exceptions!)

C H E C K L I S T

Bring in, e-mail or mail verification of INCOME ALL COPIES, PLEASE!!!

- ____Wages *********** BRING/MAIL **W-2's**---ALL COPIES!!!!
- ____Social Security Income *********** BRING/MAIL **Form 1099-SSA**
- ____Pensions *********** BRING/MAIL **Form 1099-R**
- ____Unemployment Income *********** BRING/MAIL **1099-G**
- ____IRA'S-any ROTH IRA conversions? (Yes or No) ***** BRING/MAIL **1099-R**
- ____**State Refunds** ********* BRING/MAIL **1099-G**

INTEREST OR DIVIDEND INCOME & STOCKS/BONDS

- ____Banks *********** BRING/MAIL IN Dec. Statement –**1099-Int**
- ____Investment company ***********BRING/MAIL IN Year end Stmt & **1099-Div**
- ____Private Sale contracts ***********BRING/MAIL in **Form 1098**
  Or provide NAME, ADDRESS, SSN of buyer if no Form 1098 is issued
- ____ Stocks/Bonds: BRING/MAIL FORM **1099-B'S**! Bring in **Cost of Stocks/Bonds** !

We NEED Entire Detail Of Stocks / Bonds Activities-purchases and reinvested div.

PROPERTY INCOME and SALES OF PROPERTY

- ____ **Sale of Property**.... Was this INVESTMENT PROPERTY or YOUR HOME??

Was Business Use of home ever taken on home? Yes/No

***Bring/Mail in Purchase papers of property sold as well as Sales papers*!**

If these pertain to you:

- ______**Rental?** BRING / MAIL IN **RENTAL WORKSHEET FOR RENTALS -SCH.E**
- ______ **Business?** BRING / MAIL IN **BUSINESS WORKSHEET FOR - SCH. C**
- ______ **ANY K-1'S** FROM PARTNERSHIP, S-CORP, TRUST, ESTATE INCOME? BRING/MAIL IN

ANY OTHER INCOME

- ______**Alimony Income** ********* BRING/MAIL in proof of payments
- ______Federal or PERS Pension Refunds ******** BRING/MAIL in 1099's received!
- ______Gambling Winnings ********* BRING/MAIL in All 1099's
- **(If you have gambling winnings, please Bring in Gambling expenses)**
- ______Other Income ____
- ***BRING/MAIL in the proof of any other income!!!***
- **DID YOU FILE BANKRUPTCY? ______ DID YOU RECEIVE ANY 1099-C's? Yes / No**
- **DID YOU RECEIVE ANY 1099-A's? Yes/ No BRING in Bankruptcy papers or 1099-C or A**

NON TAXABLE INCOME -

- ***THIS effects Taxable Soc.Security ONLY!***
- ______Bring/Mail 1099 or statements (from municipal bonds-tax exempt interest)
- ______Military or Parsonage Housing Allowance$________________ should be on W-2
- ______ Disability Payments (Vets, Worker's comp, etc.) Non-taxable (does not incl. SSI)

TAX ESTIMATES PAID: FEDERAL STATE Record dates here or bring checks

- 1ST QTR: 4/15/17 ______________ ______________
- 2nd QTR: 6/15/17 ______________ ______________
- 3rd QTR: 9/15/17 ______________ ______________
- 4th QTR: 1/15/2018 ______________ ______________
- ***Did you pay your state -12/31/17? Yes / No***

ITEMIZED DEDUCTIONS:

MEDICAL DEDUCTIONS

- Prescriptions: ____________
- Medical Insurance: _____________
- Hospitals/Clinics/Drs & Dental _____________
- Nursing hm/ home hlth cost _____________
- X-Rays/Labs _____________
- Glasses/Hearing Aids _____________
- Other Medical deductions: ______________
- Total Medical Miles: ______________# of Miles
- * Lodging for medical reasons _____________

Did Any HSA distributions pay for these medical expenses? Yes / No $___________

DEPENDENT CARE:

DAY CARE PROVIDER:

(Bring in Receipt from provider(s))
Must have name,address, SSN/EIN
and Phone number
Name of child(ren) cared for and

AMOUNT PAID:$__________
****

TAXES

- State Income Taxes _________________ Back Year state taxes pd:____________
- Property Taxes _________________ Back Year prop. Taxes pd:___________
- Other State Taxes _________________ Back Yr. Other st.tax pd:_____________
- Investment Property Taxes _________________ Back Yrs. Invstmt prp tx pd:__________
- **Car License Fees (REG)** ____________________

INTEREST PAID:

- Mortgage Interest: __________________ **was this refinance loan? Y/N

(Bring in Form 1098 from Banks or include copy when mailing) Reason:________________

- Mortgage Int. paid to individual _________________ bring in refinance hud papers!

Name: __________________________________

Address:_________________________________

SSN: _____________________________ **VERY IMPORTANT TO GET SSN**!

- Points Paid to acquire Loan: _________________

Length of contract: _________________ years

CONTRIBUTIONS

LIST TO WHOM AND AMOUNT PAID ON SEPARATE PAPER!!

- CASH/CHECKS: TOTAL PAID= $___________________
- NONCASH : ____

(BRING/MAIL IN WORKSHEET OF DONATED ITEMS WITH $ VALUE!)

- VOLUNTEER MILES______________ VOLUNTEER EXPENSES______________

Must have Receipts for all Cash donations regardless of amount! Must have receipt say in "GOOD or like New condition" from the Charity!

Fill out our worksheet we provide you for non-cash donations—request if you need one.

Take extra worksheets to have for Year 2018 to fill out throughout the year!

MISC. DEDUCTIONS

- TAX PREP FEES FOR 2017 PREPARATION: ______________
- ATTORNEY FEES OR INVESTMENT FEES: ______________
- SAFETY DEPOSIT BOX FEE: ___________________________
- EDUCATOR/ TEACHING SUPPLIES:______________________

ALIMONY AMOUNT PAID OUT:____________NEED TO WHOM PAID & SSN OF PERSON!

DO YOU HAVE ANY BACK YEARS TAXES NOT FILED YET? Y/ N
What year(s)?____

IRA CONTRIBUTIONS: Taxpayer's: $___________ Spouse's: $___________
Was it a Roth or Traditional contribution? Roth Trad.________

EMPLOYEE BUSINESS EXPENSES:

- UNION DUES _____________ LODGING:_____________
- BUS. MEALS _____________ TOOLS _________ SAFETY EQUIP __________
- UNIFORMS ______________ LAUNDRY ___________JOB SUPPLIES______
- DUES/SUBS. ______________ EDUCATION __________ OTHER___________
- CELL PHONE ______________ LICENSES:____________
- REQUIRED PHONE _________ AIR/TRAIN TRAVEL:_____________

#DAYS OUT OF TOWN:______________ for Per Diem purposes

JOB SEARCH COSTS: List item: cost:$________

DESCRIPTION OF VEHICLES

1._Year _____________Make________________Model__________________________
2._Year______________Make________________Model__________________________

Purchase date: ________________ Cost:______________________

TRAVEL INFORMATION: Odometer Odometer

Veh.#	Date in Service	Reading 1/1	Reading 12/31	Total Mileage	Bus.Miles
1.					
2.					

(IRS IS AUDITING THESE NOW…. SO PLEASE MAKE SURE YOU HAVE PROOF WITH MILEAGE RECORDS RECORDED ON A CALENDAR OR DAYTIMER APPT.BOOK!)

ARE YOU TAKING A HOME OFFICE DEDUCTION? Yes / No
IF YES, PLEASE ANSWER THE FOLLOWING:

OFFICE IN HOME SQ. FT: _______________
TOTAL SQ. FT. OF HOME:_______________
RENT PAID THRU YEAR:________________
MORTGAGE INTEREST: ________________
PROPERTY TAXES: ________________
UTILITIES PAID YEAR: ________________

REPAIRS/Maint.: ___________________
CAPITAL IMPROVEMTS:_____________
TOTAL COST OF HOME:_____________
Value of Building(s):_________________
Value of Land only: _________________

COLLEGE Tuition COSTS:____________________ Full or Part Time student?
(Bring in Financial Aid letter and Form 1098-T)

Student Loan Interest paid for tax year: ___________________
(Bring in1098-E or letter from lender)

Any other information or questions you may have:________________________
____

FILL THIS OUT OR FILL OUT FULL ORGANIZER (requested by you, this can be e-mailed) FOR OUR OFFICE PLEASE, so we can prepare an accurate tax return for you! (Thank-you.)

I am providing this information to my Tax Preparer and I hereby state these figures are accurate to the best of my ability and that I have receipts to back up all expenses:

____

Signature of Taxpayer and / or Spouse