

# Things we need to prepare your Income Tax Return

## Business Income & Expenses for the year of \_\_\_\_\_

Business name \_\_\_\_\_  
Business Address \_\_\_\_\_  
Employer Identification Number \_\_\_\_\_ Phone # \_\_\_\_\_

### Business Income:

Gross receipts \_\_\_\_\_  
Other Income \_\_\_\_\_  
Total Income \_\_\_\_\_

### Business Expenses:

Accounting & Tax Preparation	_____	Telephone - Cellphone	_____
Advertising	_____	Uniforms, Safety Gear	_____
Bank Charges	_____	Restaurants (with Clients)	_____
Business Insurance	_____	Other Expenses:	_____
Commission	_____	Gifts & Promotions	_____
Dues & Subscription	_____	Safety Equipment	_____
Sub-Contractors(send Form 1099)	_____	Membership Fees	_____
Interest (credit cards,...)	_____		_____
Janitorial	_____		_____
Laundry & Cleaning	_____		_____
Legal & Profesional	_____		_____
Licence Fee & Cont. Education	_____		_____
Mischelaneous Expenche	_____		_____
Materials/Supplies	_____		_____
Office Expenche	_____		_____
Postage & Delivery	_____	Car & truck expences:	
Rent machinery & equipment	_____	Vehicle name	_____
Rent Other (building,...)	_____	Repairs & Maintenance	_____
Repairs & Maintenance	_____	Vehicle Insurance	_____
IRS Estimated Tax (paid in advance 1040-V)	_____	Fuel & Oil change	_____
OR Estimated Tax (paid in advance 40-V)	_____	Vehicle Interest	_____
Telephone - Home	_____	Milleage (business portion only)	_____

### Assets

Purchase or Sale of Property that **lasts longer** than a year  
(tools, furniture, electronics, equipment, appliences, car, etc.)

Description of Property	Cost	Date of Purchase	Date of Sale
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**House Expences only**  
Business Use of Home

Mortgage Interest	_____
Real estate taxes for House	_____
House Insurance	_____
Repairs & Maintenance	_____
House Decorations	_____
Security Fee	_____
Landscaping	_____
Rent	_____
Utilities	_____
Electricity	_____
Heat (gas, oil, wood)	_____
Garbage	_____
Water	_____
Cable	_____
Internet	_____
Other Expences	_____

If the house was used for **Both** residential & business then enter :

Business use area (square footage)	_____
Total area of home (square footage)	_____

**Additional Expences you may have**

Sales of Stocks or Bonds	_____
Health Insurance Premium (monthly payments only)	_____
Doctors & Prescriptions	_____
Health Coverage Documentation (Form 1095)	_____
Cash & Noncash Charitable Donation	_____
School Fees - 1098-T (not including 1st to 12 grade)	_____
Child Day Care expences (babysiting)	_____
Education Loan Interest	_____
State Income Tax Refund Amount	_____

**Additional Income you may have**

Form W-2	_____
Unemployment Income	_____
Interest & Dividend Income	_____
Social Security Income	_____
Pension or Retirement Income	_____
Rental Income and rental expences	_____

Please attach another sheet of paper if you have items not included on this page.  
Please bring a copy of your Last year Tax Return, Social Security Cards & Driver Licence

Client Information - For the \_\_\_\_\_ Tax Year

**Taxpayer**

First name and initial	
Last name	
Social security no.	
Occupation	
Date of birth (m/d/y)	

**Spouse**

First name and initial	
Last name	
Social security no.	
Occupation	
Date of birth (m/d/y)	

**Address**

Street Address	
Apartment number	
City	
State	
ZIP code	

**Contact Info**

Home phone	
Other phone	

**Dependents**

First name and initial	
Last name	
Social security no.	
Occupation	
Date of birth (m/d/y)	
Relationship	

**Dependents**

First name and initial	
Last name	
Social security no.	
Occupation	
Date of birth (m/d/y)	
Relationship	