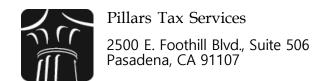


Email: pillarstaxservices@yahoo.com Web: www.PillarsTax.com

INCOME TAX ORGANIZER

		ONFIDENT	I I A L	INFOR	MATION	V				
Taxpayer I	ntormation	1.			T					
SSN		First Name & MI		Last Name	Last Name		Birth Date			
Spouse Inf	ormation	1					1			
SSN		First Name & MI		Last Name			Birth Date			
NOT	TE TO OUR VAL	JED CLIENTS: Plea	ase fill-out	out or update your e-mail address & cell			hone numbers!			
If there are NO changes to the below information, there is no need to fill out the remaining part of this page.										
Filing Status (Please Check One)										
1-Single 2-Married Joint 3-Married Filing Separate 4-Head of Household 5-Widow/er										
Street Address										
City			State Zip Code							
Work Phone (with area code)				Home Phone (w	ne (with area code)					
Email Address				Cell Phone						
Email Address					Cell Phone					
Taxpayer Occupation				Electio		Election F	und Yes No			
Spouse	Occupation					und Yes No				
		DEPENDE	N T I	NFORM	ATION					
First Name		Last Name		SSN	Date	of Birth	Relationship			
						L				
	I	RS REFUN	D – D	IRECT	DEPOS	ΙΤ				
		(Please submit a vo	oided check	to our office	for accuracy)					
This-Year Ba	ank Interest Inco	ome \$		Last-Year State Tax Refund \$						
By signing b and true. I/V	elow, I/We herek Ve also solemnly	by certify that ALL in declare that all of the Revenue Service (IR:	formation finese inform							
Check this	s box if you DO NO	OT want to receive other	er financial s	ervice offers fro	m our affiliated	companies				
Signatura					Data					
Signature			Б							
Signature	_			Date						



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SUMMARY OF INCOME AND JOB-RELATED EXPENSES

Total Gifts to Charity	\$	- '				
Other than cash or check	\$		\$			
Church Name	\$		\$			
Gifts by cash or check	\$		\$			
GIFTS TO CHARITY (Receipts require	eu on \$250+ giving)	Gas, oil, insurance, repairs, etc.	\$ 			
·		— ACTUAL EXPENSES (2106) Taxes	\$			
Total Interest Expenses	\$ \$					
Unreported Points	\$ 	Total Commuting Miles				
		D. 11. C				
INTEREST PAID		Business miles do not include personal miles				
		Total mileage for year				
Total Taxes Paid	\$	— Date placed in service				
Other Taxes	\$	— MILEAGE INFORMATION (2106)				
Real Estate	\$	Total Employee Expenses	.			
General Sales Tax – Local/State	\$	<u></u>	\$			
Income Taxes – Local/State	\$	Other business expense Meals & Entertainment	\$			
TAXES PAID		Travel away from home	\$			
. Star Medicar Experises	Ψ	— Park, tolls and transportation	\$			
Total Medical Expenses	\$ \$	EMPLOYEE BUSINESS EXPENSES (2	106)			
• (RX, Doctors, Labs, Co-Pays, etc.)	\$	_				
Other Medical Expenses	\$	Total Misc. Deductions	\$			
Medical Miles	·	Declared - Gambling Winnings	\$			
Long Term Care Premiums	\$	Gambling Losses	\$			
Health Insurance Premiums	\$	OTHER MISC. DEDUCTIONS (27)				
MEDICAL & DENTAL EXPENSES (A)			r			
Total Income	\$	IRA & Investment Fees	\$			
Other income	\$	Legal Fees	\$			
Social Security received	.	OTHER EXPENSES (22)				
Unemployment compensation	\$	Tax Preparation Fees	\$			
Gambling Winnings (W2-2G)	\$	— To Domination F	¢			
IRA distributions received	\$	Total Job-Related Expenses	\$			
Alimony received	\$		\$			
Refund of state and local taxes	\$	Job Supplies & Subscriptions	\$			
Dividend income	\$					
Interest Income	\$		\$			
Non-Employee Comp. (1099)	\$	Small Tools and Equipment	\$			
Salaries & Wages from W-2 \$		Uniforms and Shoes \$				
SOURCES OF INCOME (3)		UNREIMBURSED EMPLOYEE EXPENS	ES (20)			