

**CAMMACK ACCOUNTING, APC**

Use of this worksheet is granted *exclusively* to clients of Cammack Accounting, APC. for organization assistance only.

<b>TAX PREPARATION WORKSHEET</b>			
<b>BASIC INFORMATION - Complete only if different from last year</b>			
Taxpayer		Spouse	
NAME:		NAME:	
SS#:		SS#:	
Birthdate		Birthdate	
Address			
Phone			
DEPENDENTS			
Name	Relationship	Social Security #	Birthdate (m/d/y)
INCOME		PERSONAL DEDUCTIONS	
<i>(Bring all W-2 and 1099 Forms)</i>		MEDICAL - Not reimbursed by insurance:	
WAGES, SALARIES: <i>Form W-2</i>		Doctors, Dentists, Chiropractors	\$
	\$	Hospitals	\$
	\$	Glasses, Contacts, Hearing Aids	\$
	\$	Prescription Drugs	\$
INTEREST INCOME: <i>Form 1099</i>	\$	Health ins. premiums	\$
	\$	Supplies, Equipment Purchased	\$
	\$	Travel to receive medical treatment:	
DIVIDEND INCOME: <i>Form 1099</i>		Lodging	\$
	\$	Actual fuel, tolls	
	\$	or Miles	
Pensions, Annuities, IRA Distributions : <i>Form 1099</i>		TAXES	
	\$	State income tax (not withheld on W-2)	\$
	\$	Real estate	\$
	\$	Sales Taxes	
	\$	Casualty, theft losses	\$
Social Security 1	\$	INTEREST PAID	
Social Security 2	\$	Home mortgage (Form 1098)	\$
Alimony	\$	Home mortgage interest not on 1098	\$
Unemployment	\$	to: Name	SS#
State Tax Refund	\$	Address	
Other	\$	Points paid \$	term of loan
Gain or Loss from Sales of Stocks, Securities and Other Assets		Investment int.	\$
<i>Date acquired/ Cost</i>	<i>Date sold/ Sale Price</i>	CHARITY CONTRIBUTIONS	
		Cash or check	\$
		<i>(If single donation more than \$250, have receipt)</i>	
		Miles driven or out of pocket expenses	
ADVANCED CHILD TAX CREDIT received		Noncash gifts (If more than \$500, bring details)	
DEDUCTIONS		EMPLOYEE EXPENSES	
IRA taxpayer	\$	Equipment, Tools, Supplies	\$
IRA spouse	\$	Books, journals, subscriptions	\$
Keogh and SEP deduction	\$	Professional, Union dues	\$
Student Loan Interest	\$	Education expenses <i>required to maintain job</i>	\$
Tuition and Fees	\$	Telephone used for employer's business (allocate)	\$
Moving expenses	\$	Uniforms, safety and protective clothing	\$
Alimony Paid	\$	Travel overnight <i>(except meals)</i>	\$
Penalty on early withdrawal of saving	\$	Meals	\$
Educator expenses	\$	Entertainment	\$
Other	\$	Other employee expenses	\$
CHILD CARE EXPENSES		Job seeking costs	\$
Total Cost	\$	Vehicle expense on job Description of auto	
Children cared for		Miles driven Business	
Provider name		Miles driven Commuting	
Provider address		Miles driven Personal	
Provider I D Number		Actual fuel, tolls, repairs, insurance	\$
ESTIMATES TAX PAYMENTS		MISCELLANEOUS EXPENSES	
Federal <i>date / amount</i>	State <i>date / amount</i>	Investment expenses	\$
		Tax Return Preparation	\$
		Safe Deposit Box	\$
		Other miscellaneous expenses	\$

Do you want to DIRECTLY DEPOSIT REFUND ? Bring a voided check  
 Do you want to allow the preparer to discuss this return with the IRS? Yes / No