



Tax Prep Worksheet For 2019 Tax Year

(Note: Values entered will *not* be saved if you save this to disk, but will appear if you print this page after entering them.)

This form prints best with landscape orientation. [Or click here for an Adobe Acrobat \(PDF\) version.](#)

Please tell us about yourself, The Taxpayer

Taxpayer's Full Name: *Home Phone:*

Taxpayer's Email Address: *Work Phone:*

Taxpayer's Birthdate: *Cell Phone:*

Taxpayer's Occupation: *Pager:*

Spouse's Full Name:
(optional)

Spouse's Occupation:
(optional)

Spouse's Birthdate:
(optional)

Check Here if there are any changes in your dependents and/or filing status, then fill in the details below.

Otherwise leave blank.

Special Credits

Energy Credits (Exterior Windows, Doors, Skylights, Insulation, New Roof, Furnace, Central Air and more - bring all receipts)

Income

Please bring these with you (or send to us):

- NEW CLIENTS ONLY: A copy of your last year's Tax Return.**
- ALL W-2 forms, including W-2P (pension), W-2G (gambling winnings) and/or 1099-R forms**
- ALL Social Security income and railroad retirement forms (SSA-1099, RRB-1099, RRB-1099R)**
- ALL Unemployment Income and State Tax Refund forms (1099-G)**
- ALL Interest Income forms (1099-INT)**

- ALL Dividend Income forms (1099-DIV)
- Information on Foreign Bank Account(s), if any.
- ALL Other Miscellaneous Income (1099-MISC, etc)
- ALL Sales of Stocks & Bonds ([Click here to open the Capital Gains and Losses Worksheet](#))

When Bought and how MUCH you paid **MANDATORY!**

TO COMPLETE YOUR TAXES WE MUST HAVE THE COST & SALES PRICE!

When Sold and how MUCH you received **MANDATORY!**

- ALL Other Income and ALL expenses incurred with that activity:

[Click here to open the Sole Proprietorship Worksheet](#)

[Click here to open the Rental Income Worksheet](#)

- ALL ROLLOVER Information 401(k), Pension, IRA
- ALL 529 Plan Distributions 1099-Q
- ALL Alimony Received \$ _____ .00
- Estimated Income Tax Payments (if any)

	April 2019	June 2019	September 2019	January 2020
<input type="checkbox"/> Federal	\$ _____	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> State	\$ _____	\$ _____	\$ _____	\$ _____

Dependents

EXEMPTIONS: Do not include your spouse. -- If you do not have the Social Security Number, you won't be able to claim the dependent!

Returning clients: Bill has this information, you only need to provide changes, if any.

Name: [First, Initial, Last]	Birth Date	Social Security Number	Relationship to Taxpayer

Outgo

- School Teachers (K-12) School supplies (up to \$250)
\$ _____ .00
- ALL I.R.A. / Keogh or SEP Contributions (if any)
 (H)\$ _____ .00 (W)\$ _____ .00
- Medical or Health Savings Account Contributions
\$ _____ .00
- Education Credits (modified Hope and Lifetime Learning - 1098-T required)

Tuition and Fees \$ _____ .00 Books \$ _____ .00

Is Student in years 1 through 4 of College and a full time student? Y N

Name of College: _____

Federal ID: _____

- Student Loan Interest Paid
\$ _____ .00
- Alimony Paid
\$ _____ .00 Recipient's Social Security Number _____

Medical

RX, prescribed drugs and medicines \$ _____

Health Insurance (premiums you paid, Medicare) - includes money withheld from your salary	\$	<input type="text"/>
Long Term Care Premiums	\$	<input type="text"/>
Doctor(s) and/or Dentist(s)	\$	<input type="text"/>
Eyeglasses (contact lenses and/or solution)	\$	<input type="text"/>
Hospitals, Lab Fees, X-Rays, ANY Medical Cost	\$	<input type="text"/>
Hearing Aids (batteries, etc.)	\$	<input type="text"/>
Sick-Room Equipment and/or Supplies	\$	<input type="text"/>
Canine, TTY/TDD Care, Deaf / Blind Taxpayers	\$	<input type="text"/>
GRAND TOTAL (actual money paid by you)	\$	<input type="text"/>
Number of Miles Driven for Medical Reasons		<input type="text"/> Miles

Taxes

Real Estate Property Taxes (home)	\$	<input type="text"/>
Real Estate Property Taxes (other property)	\$	<input type="text"/>
Personal Property Taxes (Virginia Taxpayers)	\$	<input type="text"/>

Interest You Paid Out

Home Mortgage (1st & 2nd Trust)	\$	<input type="text"/>
Other Mortgage (vacation home, etc.)	\$	<input type="text"/>
Mortgage Insurance Premium (PMI)	\$	<input type="text"/>
Investment Interest (Margin, Land)	\$	<input type="text"/>

Contributions

CASH: (Money / Checks You Gave Away)
 Church, Other Religious Organizations, UGF, One-Fund, heart Fund, Boy Scouts, Girls Scouts, Boys' and Girls' Clubs, Easter / Christmas Seals, misc. contributions

GRAND TOTAL (dollar amount actually contributed) \$

Non-CASH:

Goodwill, Purple Heart, AmVets, Salvation Army, National Children's Center, etc., any items that you have given away. You only need to bring a list of items whose "Fair Market Value" exceeds \$500.00, just provide a total "Fair Market Value" for the rest.

[\(Click here to open the Valuation Guide for Items Donated\)](#)

Include any volunteer mileage driven (School, Church, Miles Boys' & Girls' Club, etc.):

GRAND TOTAL ("Fair Market Value" of items not counting mileage) \$

Miscellaneous

Gambling Losses (Up to the amount reported as income) \$

Child Care

Provide the amount you paid to have someone watch / care for your child / children, while you were earning a salary. Name, Address, and Social Security Number or Federal Tax ID of the daycare provider are required. *Without either number you will not be able to claim the credit!* \$

Social Security or Federal Taxpayer ID:

Caregiver Name and Address:

Notes For When We Meet

- Bring figures only, we do not need receipts, though you DO need to save them.
- If you sold or refinanced your home and/or bought a new home, bring all settlement papers. There are Points, Taxes, and Interest on these papers that are TAX DEDUCTABLE.
- A good thing to bring along is last year's check register just in case we ask a question about a deduction or tax deductible payment you made last year.
- If you have any doubt about any other documents or figures, it can't hurt to bring them, and might save us time in the long run.
- In case Bill needs to reach you, you may want to provide a daytime and/or evening phone number:
Daytime: (optional)
Evening: (optional)
- Please Remember: If you have any questions at all, Bill is as close as your phone: (301) 345-0101 or (301) 345-0008(fax) or computer brabbtax@gmail.com

Fill out this form and print it from your web browser, then bring it along when you come to see Bill.

Please Note: This form does NOT send or save this information in any way electronically, it is just provided as a convenient form you may fill out and print from your computer. All information you enter will be lost when you close down your web browser.

Informal Poll: Check here if you would be interested if we were to provide a free secure way this information could be sent to Bill over the internet in advance of your appointment.

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