

TEAMTAX

Professional Tax Preparation Services

Saving You Time, Hassle and Money!

**40395 Winchester Road, Suite B,
Temecula, CA 92591**
Phone 951.308.6444
Fax 951.308.6441

APPOINTMENT ORGANIZER CHECK LIST

**30650 Rancho Calif. Road.
STE 406, Temecula CA 92591**
Phone 951.695.1998
Fax 951.699.5521

www.teamtax.com

INCOME ITEMS

Check list of things to bring

- Wages (Include All W-2s)
- Interest (Banks, Escrow, Other)
- Dividends (Portfolio Statements from Investment Accounts)
- State Income Tax Refunds
- Social Security Income
- Pensions (1099R)
- Alimony Received
- K-1s (Investments, Trusts, Partnerships, S Corporations)
- Stock Transactions (Buy & Sell Info., Cost Basis)
- Other Income (Gambling, Jury Duty, **Debt Forgiveness 1099C**)
- Business Income and Expenses Summarized *(SEE US OR OUR WEB SITE FOR A DETAILED LIST)*
- Rental Income and Expenses Summarized *(SEE US OR OUR WEB SITE FOR A DETAILED LIST)*

ADJUSTMENTS TO INCOME

- Moving Expenses
- Alimony Paid (Need Ex-Spouse's name and SS#)
- Health Insurance Premiums Paid for **Self-Employed**
- Teacher Expenses
- IRA Contributions
- Un-reimbursed overnight transportation, meals, and lodging expenses of National Guard and Reserve Members who must travel away from home more than 100 miles & stay overnight
- Sales tax on Vehicle Purchase

ITEMIZED DEDUCTIONS

- Medical Expenses: **MUST BE GREATER THAN 7.5% OF YOUR ADJUSTED GROSS INCOME**
- | | AMOUNT |
|---|--------|
| Prescription Drugs | _____ |
| Insurance Premiums (Health, Dental & Vision) | _____ |
| Medicare Premiums | _____ |
| Doctors and Dentists | _____ |
| Hospitals and Labs | _____ |
| Medical Equipment and Supplies | _____ |
| Other (Glasses, Hearing Aids & Miscellaneous) | _____ |
| Medical Miles _____ | |

_____ Real Estate Taxes
 1st Home _____
 2nd Home _____
 Land _____
 _____ DMV Fees (Net VLF) _____

_____ **Sales Tax paid for large purchases** \$ _____
 (Large purchase is a Car, Boat, RV, and ECT)

AMOUNT

_____ Mortgage Interest Paid (Bring in Lender Statements)
 1st Home _____
 2nd Home _____
 Land _____

_____ **Private Mortgage Insurance Premiums (PMI)** _____

_____ Giving By Cash/Check (**must have receipts**) _____
 _____ Giving Non-Cash (**must have receipts**) _____
 _____ Charitable Miles _____
 _____ Union Dues _____
 _____ Tax Return Preparation Fees _____
 _____ Work Related Expenses (Need to Itemize) _____

See Our Web Site for a List of occupational deductions at www.teamtax.com

_____ Work Related Non-Reimbursed Miles _____ **MUST HAVE DETAILED LOG BOOK!**

CHILD CARE EXPENSES:

Providers Name: _____
 Address: _____
 SS# or Tax ID: _____
 Amount Paid: _____
 Provider's Phone Number: _____

Providers Name: _____
 Address: _____
 SS# or Tax ID: _____
 Amount Paid: _____
 Provider's Phone Number: _____

Advanced Earned Income Credit
AMOUNT IN BOX 9 OF YOUR W-2 (if any): _____

Dependent Care Benefits (Amount Your Employer Paid)
AMOUNT IN BOX 10 OF YOUR W-2 (if any): _____

OTHER

AMOUNT

____ School Tuition Paid (Student's Name, Tuition Paid, Full or Part-Time) _____
____ Student Loan Interest Paid _____

Alternative Minimum Tax Issues

_____ Amount of mortgage not related to purchase or improvement of first or second home.

_____ Amount of incentive stock options (**ISO**) exercised and not sold.

Energy Efficient Related Credits

Did you purchase Energy Efficient A/C, Water Heater, Windows? \$ _____

Did you purchase an electric, Fuel Cell or hybrid vehicle? \$ _____

Did you add solar power? (Non pool or spa) \$ _____

Did you purchase other Energy Efficient items? (non appliance) \$ _____

Explain _____

CA SALES OR USE TAX

\$ _____ Amount of purchases made over the Internet, by mail, or by phone order where no California sales or use tax was paid if paying use tax on this tax return. This amount will be used to calculate CA sales tax due.

ESTIMATED TAX PAYMENTS AND DATES PAID

| | Q1 | Q2 | Q3 | Q4 |
|---------|-------|-------|-------|-------|
| Federal | _____ | _____ | _____ | _____ |
| State | _____ | _____ | _____ | _____ |

CHANGES

____ Address

____ Dependents

____ Marital Status

____ Occupation

____ Refinance, Home Purchase, Home Sale (Bring In Escrow Statement)

____ **Foreclosure, Abandonment of Property**

OTHER (NEW CLIENTS)

Be sure all names you provide us match what is on your Social Security Cards or Social Security Records. Please bring in last year's tax return.

ADDITIONAL INFORMATION:

We have lots of worksheets download website,



of detailed you can from our

TAXES - INSURANCE - FINANCIAL

www.teamtax.com these worksheets include: Business, Rental and Occupational Specific expense deductions. You may also stop by the office to obtain these worksheets.

Tax Services

- Individual and Small Businesses
- Partnerships, Sub-Chapter S, and C Corporations, LLCs
- Non-Profit (Tax Exempt) Organizations
- Trust and Estate Returns
- Premier Services Plan
- Tax Planning
- Business Planning Including Start-ups
- Tax and Business consulting
- IRS and FTB Audit and Problem Representation, including Audit Notices, Offers In Compromise, Levies, Liens, and Payment Plans
- Back Taxes filed
- U.S. Tax Court Representation

Insurance Services



- Auto & Homeowners Insurance
- Motor Home Insurance
- Earthquake Insurance
- Commercial Insurance
- Condo Insurance
- Mobile Home Insurance
- Watercraft Insurance
- Motorcycle Insurance

Investment Advisory and Financial Planning Services Through;

*Jeffry S Cole, CFP® *Leonard P Cole, CFP®

*Securities offered through H.D. Vest Investment Services SM, Member: SIPC,

*Advisory Services offered through H.D. Vest Advisory Services SM,
Non-bank subsidiaries of Wells Fargo & Company.

IRS Enrolled Agent # 73687 & 54050, CA Dept of Insurance # 0751321 & OF19706