

MDW Tax & Financial Services
Income Tax Guide

Family Information:

| Name | DOB | SSN | Occupation |
|------|-----|-----|------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Address: _____
 Street City, State, Zip

Required Questions: Has the bank account for direct deposit of refund(s) changed since last year? yes no

Child Care:

| Provider | Address |
|----------|---------|
| | |
| | |
| | |

Investments/Property Sold:

(Need dates of purchase & sale, cost information and sales proceeds)
 Broker Statement (1099-B) (if available)

Income:

- Wages (W-2s) _____
- _____
- _____
- Dividends (1099-Div) _____
- _____
- _____
- Interest (1099-Int) _____
- _____
- _____
- Pension/Soc Sec (1099-R) _____
- _____
- _____
- _____
- Commissions/Bonuses _____
- State Inc Tax Refunds (1099-G) _____
- Unemployment _____
- Alimony _____
- Gambling Winnings _____
- K-1 Income _____
- Prizes/Commissions _____
- Other Income _____

Education Credits:

- Tuition paid (1098-T) _____
- _____
- Interest paid on student loans (1098-E) _____
- _____
- _____

Estimated Taxes:

Dates/Amounts paid to Fed & State

| | | |
|-------|-------|-------|
| 4/15/ | Fed | _____ |
| | State | _____ |
| 6/15/ | Fed | _____ |
| | State | _____ |
| 9/15/ | Fed | _____ |
| | State | _____ |
| 1/15/ | Fed | _____ |
| | State | _____ |

Itemized Deductions:

Medical/Dental (total costs need to exceed 7.5% adjusted gross income)

| | |
|------------------------|-------|
| Prescription Drugs | _____ |
| Medical Ins Prem | _____ |
| Medicare B Prem | _____ |
| Long Term Care Ins | _____ |
| Doctors/Dentists Fees | _____ |
| Hospitals/Clinics/Labs | _____ |
| Eye Care/Glasses | _____ |
| Med Equip/Supplies | _____ |
| Nursing Care | _____ |
| Medical Therapy | _____ |
| Chiropractor Fees | _____ |
| Mileage | _____ |
| Other | _____ |

Taxes Paid

| | |
|-------------------|-------|
| Real Estate | _____ |
| Personal Property | _____ |
| State/Local | _____ |

Interest Expense

| | |
|---|-------|
| Mortgage Int. to Bank (incl. Mortgage Insurance premiums "PMI") | _____ |
| Mortgage Int. to Individual | _____ |
| Equity loan int. (up to Fair Mkt Value) | _____ |
| Equity loan used for home improvement? yes no | |

Charitable Contributions

| | |
|--------------------------|-------|
| Church | _____ |
| United Way | _____ |
| Salvation Army | _____ |
| Other charities: | _____ |
| | _____ |
| Non-Cash (Clothes, etc.) | _____ |
| Mileage | _____ |

Casualty/Theft Losses

Other Information

Contributions into retirement account or health savings account (HSA)

Sales tax on motor vehicles or other large purchases during the year

| | |
|------------------------------------|----------------|
| Energy-efficient home improvements | Insulation |
| | Windows |
| | Water heater |
| | Furnace |
| | Exterior doors |