

2019 TAX DATA WORKSHEET

IMPORTANT –PLEASE FILL IN ALL ITEMS TO BE INCLUDED ON YOUR TAX RETURN

BRING ALL DOCUMENTS

NEW CLIENTS: BRING COPY OF LAST TAX RETURN & SOCIAL SECURITY CARD FOR FILERS & DEPENDENTS

- 1095 – Health Insurance
- W-2 Statements, W-2G (Gambling)
- 1099-INT (Interest)
- 1099-DIV (Dividends)
- Home Purchase/Sale Papers
- Home Mortgage Refinance Papers
- 1099 Social Security Income
- 1099-R (Pensions/IRA's)
- All IRA Year-end Statements
- 1099 Unemployment Income
- 1099 State Tax Refund
- Stock Sales-Buy Side & Sell Side
- 1099-B (Broker Statement)
- 1099 Miscellaneous Commissions
- 1099 Prizes, Misc. Income
- Rents
- Agricultural Payments
- K-1's
- Alimony
- Jury Duty

► BRING BANK INFO OR VOIDED CHECK FOR DIRECT DEPOSIT OF REFUND ◀

NAME						
		Taxpayer		Spouse		
Phone						
E-Mail						
Occupation			Occupation			
Social Security #			Social Security #			
Birthdate			Birthdate			
Mailing Address:		New?	Yes	No	County	School District
City				State	Zip Code	

DEPENDENT					
Name:		Birthdate <small>(Req'd for Child Tax Credit)</small>	"X" if not living with you*		# Mos lived in your home this year
First, Initial and Last (If Different)					
			Soc. Sec. #	Relation	

*If you are the non-custodial parent, you must bring a signed Form 8332 to take a deduction for your dependent.

ESTIMATED TAXES PAID					
	Date Due	Date Paid	Federal	Date Paid	State
Fourth Qtr Prior	Jan 2019		\$		\$
First Quarter	Apr 2019		\$		\$
Second Quarter	June 2019		\$		\$
Third Quarter	Sept 2019		\$		\$
Fourth Quarter	Jan 2020		\$		\$

OTHER DEDUCTIONS & CREDITS
BRING TUITION PAID STATEMENTS/FORM 1098 T; <u>MUST HAVE DETAIL OF EDUCATION EXPENSES PAID FROM COLLEGE/UNIVERSITY.</u>
COLLEGE SAVINGS PLAN IOWA: BRING STATEMENT VERIFYING PAYMENTS
IRA (REGULAR & ROTH) BRING DETAIL OF ROLLOVERS, DISTRIBUTIONS & CONTRIBUTIONS

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ITEMIZED DEDUCTIONS:

DO NOT INCLUDE PRE-TAX PREMIUMS OR HSA PAYMENTS -- BRING COPY OF YOUR PAYSTUB TO VERIFY

MEDICAL EXPENSES - Generally Must Exceed 10% of Income for Federal & Most States	
Prescription Drugs (no "over-the-counter" drugs)	
Doctors/Dentists/Hospitals/Glasses/Hearing Aid & Battery	
Medical Ins Premiums (out of pocket)	
Long-Term Health Care Premiums – Taxpayer/Spouse	
Medicare D Prem Deducted from Soc Sec or Paid Direct Medicare Premiums from Social Security	
Auto Travel (for medical purposes)	mi.
Out of Town Lodging & Number of Nights Insurance Reimbursements (only for above amounts)	
HSA-Bring 1099SA Form & Summary Report/Contributions Made & Distributions	

TAXES PAID	
Real Estate - Residence	
Real Estate - 2nd Home	
Real Estate – Other, Timeshare	
Auto License Fee – No Boats, Motorcycles, or RV's	
Sales Tax – Large Purchases	

HOME MORTGAGE INTEREST PAID --INCLUDE TIMESHARE		
BRING YOUR 1098 FORM(S)	Primary Home	Second Home
Interest Paid to an Institution:		
Points		
Interest Paid to an Individual:		
Individual's Name: Social Sec. #		
Address:		

STUDENT LOAN INTEREST PD
Bring statement from lending agency.

CHILD OR DEPENDENT CARE		
Child or dependent care expenses to enable you to work or attend school full time. Number of children under 13:		
Name of Provider/Address	Soc Sec # or EIN #	Amount Paid

CHARITABLE CONTRIBUTIONS	
Cash/Check (only if substantiated by bank record or done) Written receipt MUST state that no goods or services were received by you.	
Payroll Deductions (i.e. United Way)	
Travel For Charitable Purposes	mi.
Value of goods contributed (usually the fair market value). Name & address of charitable recipient and detailed list of donated items when total equals \$500 or more.	

MISCELLANEOUS BUSINESS & INVESTMENT EXPENSES NOT LISTED ELSEWHERE		
	Taxpayer	Spouse
Tools, Supplies, Equipment -- used in classroom by teacher (\$250 max.)		
Gambling Losses – Only to Amt of Winnings		
Tuition (K-12 Only) -- For State Credit		
Text Books (K-12 Only) -- For State Credit		

SIGNATURE: _____

DATE: _____