

Hupp Tax Service

32341 Vine Street, Willowick, OH 44095

Phone (440) 944-4343

Fax (440) 944-4341

WHAT TO BRING (or mail, fax, email)

Tax year 2009

- W2's**
- 1099's** (1099R, 1099MISC, 1099INT, 1099DIV, 1099B, 1099G, 1099B, etc.)
- 1098's** (mortgage interest, student loans, tuition, etc.)
- Anything marked **"Important Tax Document"**

Name _____
Contact information (we will confirm at check in):
Phone # _____
What dependents should be on your return?

Did you move? If so, date? _____
New address _____

If you're new to Hupp Tax Service, bring: ❖ Prior year tax returns (Federal State & City).
❖ Social Security numbers & birthdates for everyone included in your return.

Section 1 - All clients please complete.

Energy Efficient Home Improvements - Primarily Energy Star windows, doors, and insulation.
Other items may qualify (e.g. geothermal, etc). Ask the manufacturer, check energystar.gov, or ask us.

None / Not applicable

Quarterly estimate payments

None / Not applicable

	Date Paid	Federal	State	City
1 st qtr	_____	_____	_____	_____
2 nd qtr	_____	_____	_____	_____
3 rd qtr	_____	_____	_____	_____
4 th qtr	_____	_____	_____	_____
Total	_____	_____	_____	_____

- College tuition** Include the 1098T from the school and/or the amount of tuition you paid.
- Car purchase - new (not used)** Include the invoice indicating purchase date & sales tax paid.
- Home purchase** - Bring final settlement statement.

None / Not applicable

Child Care

Expenses for child care in order for you to work.

Child _____ Amt Paid \$ _____

None / Not applicable

Provider Name _____

Address _____

Tax ID or SS number _____

IRA contributions. Please note the amount and type of IRA contributions for tax year 2009.

None / Not applicable

Traditional \$ _____

Roth \$ _____

Self-Employed or Rental Property

Include name, address and type of each business or rental property.

None / Not applicable

Summarize on a separate sheet or request a worksheet from us:

- Income
- Expenses (phone, licenses, business miles*, etc.)
- Please list equipment and capital improvements individually

Home office

An area used regularly and exclusively for business.

None / Not applicable

Summarize on a separate sheet:

- Square feet of office and home, cost of house, dates used.
- Annual household expenses for utilities, insurance, mortgage interest, property taxes, office remodeling or improvements, etc.

Section 2 - ITEMIZED DEDUCTIONS - Complete this section only if you itemize. When in doubt, fill it out. It may help us save you money. The list below is not all-inclusive, but includes examples of items that are commonly deductible.

<input type="checkbox"/> Mortgage Interest and Property Taxes Please fill in unless summarized on your mortgage statement(s) Form 1098. <input type="checkbox"/> None / Not applicable	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><u>Mortgage Int.</u></td> <td style="width: 50%;"><u>Property Tax</u></td> </tr> <tr> <td>Primary residence \$ _____</td> <td>\$ _____</td> </tr> <tr> <td>Second residence \$ _____</td> <td>\$ _____</td> </tr> </table> <input type="checkbox"/> Taxes are included in my mortgage payment	<u>Mortgage Int.</u>	<u>Property Tax</u>	Primary residence \$ _____	\$ _____	Second residence \$ _____	\$ _____
<u>Mortgage Int.</u>	<u>Property Tax</u>						
Primary residence \$ _____	\$ _____						
Second residence \$ _____	\$ _____						
<input type="checkbox"/> Charitable Deductions <u>Cash</u> <input type="checkbox"/> None / Not applicable Church \$ _____ Red Cross \$ _____ United Way \$ _____ Heart Association \$ _____ Others \$ _____ NOTE: IRS requires receipts or cancelled checks for All donations.	<input type="checkbox"/> None / Not applicable Please indicate value of donation: Purple Heart \$ _____ Goodwill \$ _____ Salvation Army \$ _____ Others \$ _____ NOTE: If non-cash donations are more than \$500, we need detailed information: list of items and value, dates donated, recipients, how acquired and value, etc.						
<input type="checkbox"/> Medical Deductions You can deduct medical expenses <u>paid</u> in 2009. NOTE: Medical expenses are deductible once they are over 7.5% of your adjusted gross income. That means if you earn \$30,000 at your job, medical expenses only start being deductible after you've spent approximately \$2,250. <input type="checkbox"/> None / Not applicable	Health insurance premiums not paid thru employer \$ _____ Doctors \$ _____ Dentists \$ _____ Prescriptions \$ _____ Long-term care insurance \$ _____ Contacts, eyeglasses \$ _____ Other \$ _____ Miles driven for year _____ (office visits, pharmacy, therapy, etc.)						
<input type="checkbox"/> Miscellaneous Deductions Work related expenses that are not reimbursed by your employer. Miscellaneous deductions are deductible if they are more than 2% of your adjusted gross income. <input type="checkbox"/> None / Not applicable NOTE: Gambling losses are deductible to the extent of your gambling winnings. If you won something this year, your gambling losses might help you if you itemize your deductions.	Union Dues \$ _____ Uniforms, safety equipment \$ _____ Licenses, permits \$ _____ Call phone expenses (for work) \$ _____ Other \$ _____ Non-commuting work miles* _____ Safe deposit box \$ _____ Investment advisory fees \$ _____ Tax preparation \$ _____ Other \$ _____						

* **NOTE: We don't need to see your receipts, but you need to keep them for all of your deductions.**