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NAME:	SSN:
STREET:	SSN Spouse:
CITY/STATE/ZIP:	Phone #:

Tax Year

DEDUCTIONS & CREDITS

INCOME		TAXES				MEDICAL-YOU PAID				MISC. DEDUCTIONS		
SEND ME ALL STATEMENTS FROM WORK, BANKS, MUTUAL FUNDS, STOCKS, ETC.		Fed Income Tax Bal. Paid				Health Insurance You Pay:				Union/Professional Dues		
		Federal Quarterly Estimate				Doctors, Dentists, Hospitals:				Uniforms & cleaning		
		1st	2nd	3rd	4th	Prescriptions, Glasses, Contacts:				Tools/Equipment		
						Mileage:				Safety Equipment		
INTEREST/DIVIDENDS:		State Income Tax Bal. Pd				CONTRIBUTIONS BY CASH OR CHECK				Vocational Supplies		
Issued by: Amt:		State Quarterly Estimate				Organization	Amount	Ck #	Date	Req. Continuing Ed		
		1st	2nd	3rd	4th	Church				Safe Deposit Box		
		PERSONAL RESIDENCE				United Fund				Tax Return Fee		
		Real Estate Property Tax:								Fund Maintenance Fees		
		2nd Home Property Tax:								LOSSES FROM FIRE, WATER LIGHTENING, WIND, THEFT & CAR ACCIDENTS		
		OTHER PROPERTY								What?	When?	Amt?
		Investment Tax:								EMPLOYEE BUSINESS EXPENSE		
Pension/IRA Distrib:		Rental Property Tax:				NON-CASH CONTRIBUTIONS						
Pension/IRA Distrib:		Ad Valorem on Autos:				(Receipts and records required)						
Rental Income Rec'd:		Other Personal Property:				Goodwill, etc						
Unemployment:		City Earnings Tax:										
Social Security:		INTEREST				Volunteer Miles				Total miles driven this year:		
Other:		Home Mortgage				Scouts/Coaching/etc.				Business miles driven:		
ADJUSTMENTS:		Second Home Mortgage				CHILD & DEPENDENT CARE				Actual Auto Expenses:		
IRA Paid in:(not Roth)		Rental Mortgage Interest:				Caregiver:				Gas, Maintenance		
Student Loan Interest:		Investment Interest:				SS# or EIN:			Amt Pd	Insurance, Detailing		
Date Loan repay begun:						Child's Name:				Finance Charge on Auto		
CD Early w/d Penalty:		OTHER RENTAL EXPENSES				Child's Name:				Parking		
		Advertising:				Total for Year:				Tools, Supplies		
ALIMONY PAID:		Fire Insurance:				Moving Expenses:				Postage, Office Supplies		
Receiver's SS# :		Travel:				Miles from Old Home to New: Job:				Phone Expenses		
SELF-EMPLOYED?		Management Fees:				Cost of Moving Household Goods:				Overnight Travel/Motel		
Health Insurance:		Maintenance:				Travel Costs for Family on Day of Move:				Meals while Overnight		
Keogh, Sep, Simple:		Association Dues:								Entertainment		
		Repairs:								Employer Reimbursed:		