

CYNTAX, LLC

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2019 INCOME TAX INFORMATION

Taxpayer's Full Name _____ Spouse's Full Name _____
Soc. Sec. No. _____ Date of Birth _____ Soc. Sec. No. _____ Date of Birth _____
Occupation _____ Driver's License No. _____ Occupation _____ Driver's License No. _____
Driver's License Issue Date: _____ Expiration Date: _____ Driver's License Issue Date: _____ Expiration Date: _____
Home Address _____
Home Phone _____ Cell Phone _____ Cell Phone (Spouse) _____
Email address _____ Email address (Spouse) _____

DEPENDENTS

Full Name	Social Security Number*	Date of Birth	Relationship

*Please bring Social Security cards for verification if we do not have a copy.

IMPORTANT ITEMS TO BRING

W-2s from all employers
Social Security Benefits Statement (SSA-1099)
Unemployment Compensation (1099-G)
Form 1095 – Proof of Health Insurance
Forms 1099: 1099-MISC (Miscellaneous Income); 1099-INT (Interest);
1099-DIV (Dividends); 1099-B (Sale of stocks/securities);
1099-R (Pensions & Annuities/Retirement Plan Withdrawals);
1099-C or 1099-A (Debt Forgiveness); 1099-K (Credit card/3rd party payments)
Form K-1 from Estates/Trusts, Partnerships or S Corporations
Form W-2G for Gambling Winnings

Mortgage Interest Statement (If you bought/sold/refinanced a home in 2019, please provide a copy of the settlement statement)
Real estate/property taxes paid
Car Tag Receipts & Proof of charitable contributions
Form 1098-T from college + billing statement from college + amounts paid for tuition/books
Student loan interest information (Form 1099-E)
Stock or property sold? Bring historical cost basis (Form 1099-B)
Purchase price/cost basis for any stock declared worthless
Medical Savings Account/Health Savings Account info

If you are a new client, please bring a copy of last year's tax return.

QUICK QUESTIONNAIRE

(Check any that apply and bring all data)

During 2019, did you:

- _____ Receive an Identity Protection PIN from the IRS? If so, bring letter.
- _____ Have a change in marital status due to marriage/divorce? Any change in number of dependents?
- _____ Have qualifying health insurance for everyone in your household? Was it purchased online through the Marketplace? (Bring Form 1095-A)
- _____ Receive Social Security benefits or Unemployment Compensation? (Bring SSA-1099 for Social Security; 1099-G for Unemployment)
- _____ Make any estimated tax payments? Please provide payment details on the next page.
- _____ Transfer or rollover any 401(k) or IRA accounts? If so, bring 1099-R.
- _____ Contribute (or do you plan to contribute) to an IRA or Roth IRA? Provide details.
- _____ Donate your Required Minimum Distribution (RMD) from your IRA directly to a charity?
- _____ Incur any education expenses for yourself, your spouse, or dependent? Receive education benefits through a prepaid tuition program (PACT or Alabama 529 Plan)? Pay student loan interest? Contribute to the Alabama College Counts 529 Plan? Bring 1098-T
- _____ Pay for child/dependent care? If so, we need the name, address, social security number/EIN of your childcare provider, plus the total amount you paid during 2019. Did you receive any employer-provided dependent care assistance benefits? Use Flex Plan benefits for daycare expenses?
- _____ Have unreimbursed work-related expenses? (Union dues, professional association dues, uniforms, job search, etc.)
- _____ Receive any income from a pension, profit-sharing, 401(k), Retirement, Keogh, IRA, Roth, or tax sheltered annuity plan? (Bring 1099-R)
- _____ Have any out-of-pocket expenses incurred as a volunteer? (This includes mileage, uniforms, and supplies).
- _____ Pay (or receive) alimony? (If you paid alimony, please provide the date of divorce, along with the name, SSN, and address of the person receiving payments).
- _____ Purchase a new home? Sell or refinance an existing home? Please provide a copy of the settlement statement.
- _____ Sell or cash in stocks, bonds, U.S. savings bonds, or property? If so, bring form 1099-B. Any stocks declared worthless? Need basis.
- _____ Start a business? Purchase (or sell) rental property?
- _____ Have income (or loss) on K-1 from any Partnership, LLC, S Corp, Estate or Trust? (Bring K-1)
- _____ Have foreign income or pay foreign taxes? Have foreign investment/bank accounts valued at over \$10,000 at any time during 2019?
- _____ Make any internet purchases from out-of-state retailers on which no sales tax was paid? Need total dollar amount of those purchases.
- _____ Make any residential energy efficiency improvements? (Windows, insulation, etc.)

2019 ESTIMATED TAX PAYMENTS

Federal Estimated Tax Payments

State Estimated Tax Payments

Date Due	Amount Paid	Date Sent	Date Due	Amount Paid	Date Sent
4/15/2019			4/15/2019		
6/17/2019			6/17/2019		
9/16/2019			9/16/2019		
1/15/2020			1/15/2020		

SCHEDULE A – ITEMIZED DEDUCTIONS

<u>UNREIMBURSED MEDICAL EXPENSES</u>	<u>TAXES PAID</u>
Prescription Drugs. \$ _____	Real Estate Taxes. \$ _____
Medical Insurance Premiums. \$ _____	Personal Property Taxes. \$ _____
Long-Term Care Ins. Premiums. \$ _____	State/Local Income Taxes. \$ _____
Medicare Premiums. \$ _____	Sales Tax paid on Car/Boat/RV. \$ _____
Doctors \$ _____	Car Tag (Ad Valorem Tax). \$ _____
Dentists \$ _____	
Clinic/Lab Tests. \$ _____	<u>CHARITABLE CONTRIBUTIONS</u>
Eyeglasses/Contact Lenses. \$ _____	Cash/Check Contributions. \$ _____
Hearing Aids/Batteries. \$ _____	
Orthopedic Shoes/Brace \$ _____	Non-Cash Contributions. \$ _____
Medical Lodging. \$ _____	
Miles for Medical Treatment:	Were any charitable contributions from your IRA? \$ _____
_____ miles @.20 per mile \$ _____	Miles for Charity:
	_____ miles @.14 per mile. \$ _____
<u>INTEREST EXPENSE</u>	<u>MISCELLANEOUS DEDUCTIONS</u>
Home Mortgage Interest Paid to	Unreimbursed Business Expenses. \$ _____
Financial Institutions. \$ _____	Union/Professional Dues. \$ _____
Home Equity Interest. \$ _____	Safe Deposit Box. \$ _____
Home Mortgage Interest Paid to Individual. \$ _____	Tax Return Preparation Fee. \$ _____
Name/Address _____	Business Publications. \$ _____
_____	Business Phone Calls/Cell Phone Usage. \$ _____
Social Security No. _____	Tools, Supplies, Equipment. \$ _____
Deductible Points Paid. \$ _____	Job Search Expenses. \$ _____
Investment Interest. \$ _____	Gambling Losses. \$ _____

SCHEDULE C – BUSINESS INCOME

Business Name _____ ID Number _____

<p>Gross Income:</p> <p>Gross Income. \$ _____</p> <p>Less: Returns & Allowances. \$ _____</p> <p>Cost of Sales:</p> <p>Beginning Inventory. \$ _____</p> <p>Purchases. \$ _____</p> <p>Cost of Labor. \$ _____</p> <p>Materials & Supplies \$ _____</p> <p>Freight In \$ _____</p> <p>Other _____ \$ _____</p> <p>Ending Inventory. \$ _____</p> <p>Deductions/Expenses:</p> <p>Advertising. \$ _____</p> <p>Car & Truck Expenses. \$ _____</p> <p>Business Miles: _____ miles @.58 per mile. \$ _____</p> <p>Bank Fees. \$ _____</p> <p>Collection Expenses. \$ _____</p> <p>Contract Labor. \$ _____</p> <p>Employee Benefit Plan. \$ _____</p> <p>Insurance. \$ _____</p>	<p>Deductions/Expenses (continued)</p> <p>Interest (Mortgage). \$ _____</p> <p>Interest (Other). \$ _____</p> <p>Janitorial/Cleaning. \$ _____</p> <p>Legal/Accounting Fees. \$ _____</p> <p>Meals (Business-Related). \$ _____</p> <p>Office Expenses. \$ _____</p> <p>Postage. \$ _____</p> <p>Professional Development \$ _____</p> <p>Professional Dues/Subscriptions. \$ _____</p> <p>Rent or Lease. \$ _____</p> <p>Repairs/Maintenance \$ _____</p> <p>Salaries \$ _____</p> <p>Supplies \$ _____</p> <p>Taxes & Licenses. \$ _____</p> <p>Telephone \$ _____</p> <p>Travel (Hotel/Airfare). \$ _____</p> <p>Utilities \$ _____</p> <p>Misc/Other (Please describe). \$ _____</p> <p>_____</p> <p>_____</p> <p>Home Office (100% Business Use): House Sq. Ft. _____ Office Area Sq. Ft. _____</p>
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MAJOR PURCHASES – SCHEDULE C

DESCRIPTION	DATE PURCHASED	COST	TRADE-IN (IF ANY)

SCHEDULE E – RENTAL PROPERTY/ROYALTIES

Property Description: _____

Gross Rental Income:\$ _____

Number of days rented in 2019: _____

Number of days used personally: _____

Expenses:

Advertising\$ _____

Other Interest\$ _____

Auto/Travel Expense\$ _____

Professional Fees\$ _____

Mileage:
_____ miles @.58 per mile. \$ _____

Repairs\$ _____

Cleaning/Maintenance\$ _____

Supplies\$ _____

Commissions\$ _____

Taxes\$ _____

Insurance\$ _____

Utilities\$ _____

Management Fees\$ _____

Misc/Other (Please Describe). \$ _____

Mortgage Interest\$ _____

MAJOR PURCHASES – SCHEDULE E

DESCRIPTION	DATE PURCHASED	COST	TRADE-IN (IF ANY)