

CONFIDENTIAL TAX PLANNIN	ig workshe	ET
DATE://	NAME, LAST:	NAME, FIRST:
FILING STATUS	CONTACT INF	ORMATION
SINGLE	ADDRESS:	
HEAD OF HOUSEHOLD	_	
MARRIED FILING JOINTLY	PHONE: _	
MARRIED FILING SEPARATELY	EMAIL:	
INCOME & TAX		
ADJUSTED GROSS INCOME: \$ (PRIOR TO 2018 TAXES, SEE LINE 37 ON F 1040NR. 2018 TAXES LINE 7 ON FORM 10	ORM 1040, LINE 2	 21 ON FORM 1040A, LINE 4 ON FORM 1040EZ, LINE 36 ON FORM
TAXABLE INCOME: \$ (PRIOR TO 2018 TAXES, SEE LINE 27 OF F	ORM 1040A. 2018	 B TAXES SEE LINE ON FORM 1040)
ALTERNATIVE MINIMUM TAX: \$	PEOPLE DO NOT	RECORD AN ALTERNATIVE MINIMUM TAX)
SOCIAL SECURITY INCOME, TAXPAYER:	\$	_ PER MONTH
SOCIAL SECURITY INCOME, SPOUSE:	\$	PER MONTH

FAMILY MEMBERS RECORDED ON TAX RETURNS

CODE*	first name	LAST NAME	BIRTHDATE
T			

CODES: T = TAXPAYERS = SPOUSE

C = CHILD

D = OTHER DEPENDENT

HOME & LIFESTYLE (PLEASE CHECK ALL THAT APPLY)					
	RENT HOME		EXPECT A BABY WITHIN 12 MONTHS		
	BUY HOME		PAY DAYCARE COSTS		
	PLAN TO BUY 2 ND HOME		PAY OR RECEIVE ALIMONY OR CHILD SUPPORT		
	OWN 2 ND HOME IN STATE:		SAVING FOR COLLEGE		
	PLAN TO RETIRE TO THAT HOME/STATE		PAYING COLLEGE TUITION		
	ACTIVE DUTY U.S. MILITARY		SUPPORTING PARENTS FINANCIALLY		
	OWE \$10,000+ IN UNSECURED DEBT		PLAN TO MARRY WITHIN 12 MONTHS		
	MEMBER OF CLERGY		PLAN TO DIVORCE WITHIN 12 MONTHS		

EMPLOYMENT BENEFITS

TAXPAYER	SPOUSE	PLEASE CHECK THE BOX IF EITHER TAXPAYER OR SPOUSE RECEIVES BENEFITS FROM AN OUTSIDE EMPLOYER ONLY. IF EITHER IS SELF-EMPLOYED, PLEASE USE THE NEXT SECTION.	
\$	\$	ANNUAL SALARY PLUS BONUS AND/OR COMMISSIONS	
		RETIRED, OR RETIRING WITHIN 12 MONTHS	
		SIMPLE IRA	
		401K PLAN	
		403B PLAN	
		FLEXIBLE SPENDING ACCOUNT: HEALTHCARE	
		FLEXIBLE SPENDING ACCOUNT: DAYCARE	
		HEALTH SAVINGS ACCOUNT	
		INCENTIVE STOCK OPTIONS	
		NON QUALIFIED STOCK OPTIONS	
		RESTRICTED STOCK	
		EMPLOYEE STOCK PURCHASE PLAN	
		NON QUALIFIED DEFERRED COMPENSATION OR KEY MAN	
		EMPLOYER STOCK IN RETIREMENT PLAN	
		UNREIMBURSED EMPLOYEE BUSINESS EXPENSES	

PERSONAL INVESTMENTS

TAXPAYER	SPOUSE	JOINT	TYPE
\$	\$	\$	TAXABLE INVESTMENT ACCOUNT
\$	\$	\$	TRADITIONAL IRA
\$	\$	\$	ROTH IRA
\$	\$	\$	401K/403B WITH CURRENT EMPLOYER
\$	\$	\$	401K/403B WITH FORMER EMPLOYER
\$	\$	\$	ANNUITY
\$	\$	\$	ANNUITY
\$	\$	\$	CASH VALUE IN LIFE INSURANCE POLICY
\$	\$	\$	CASH VALUE IN LIFE INSURANCE POLICY
\$	\$	\$	RENTAL REAL ESTATE TOTAL NET EQUITY
\$	\$	\$	CASH / CD'S / SAVINGS
\$	\$	\$	OTHER:
\$	\$	\$	OTHER:
\$	\$	\$	OTHER:

PERSONAL INVESTMENTS, CONTINUED

TAXPAYER	SPOUSE	JOINT	PLEASE CHECK BOX FOR ANY APPROPRIATE INVESTMENT STATUS
			INVEST PRIMARILY FOR INCOME
			INVEST PRIMARILY FOR GROWTH
			INVEST FOR INCOME AND GROWTH
			MANAGE IRA OR QUALIFIED RETIREMENT PLAN ASSETS
			MANAGE ROTH IRA ASSETS
			OWN PERMANENT LIFE INSURANCE
			OWN ANNUITIES
			OWN MUNICIPAL BONDS OR MUNICIPAL BOND FUNDS
			OWN REAL ESTATE INVESTMENT TRUSTS
			OWN OPTIONS, FUTURES OR COMMODITIES
			OWN OIL & GAS, EQUIPMENT LEASING, OR TIMBER INVESTMENTS
			RECEIVE LOW-INCOME HOUSE TAX CREDITS
			PAY ASSET MANAGEMENT FEES
			INVEST ON MARGIN
			DAY TRADE OR USE MARKET-TIMING STRATEGIES
			SELL STOCKS SHORT
			HOLD \$100,000+ GAINS IN PORTFOLIO
			HOLD \$100,000+ GAINS IN A SINGLE SECURITY
			HOLD \$100,000+ IN UNREALIZED PORTFOLIO LOSSES
			HOLD \$100,000+ IN CAPITAL LOSS CARRY-FORWARDS
			OWN REAL ESTATE IN PERSONAL NAME (INDIVIDUALLY)
			OWN REAL ESTATE IN PERSONAL NAME (JOINTLY WITH SPOUSE)
			OWN REAL ESTATE THROUGH AN LLC/S CORP (INDIVIDUALLY)
			OWN REAL ESTATE THROUGH AN LLC/S CORP (JOINTLY WITH SPOUSE)
			OWN REAL ESTATE THROUGH AN LLC/S CORP (WITH NON-FAMILY PARTNERS)
			OWN REAL ESTATE AS A LIMITED PARTNER
			WHOLESALE OR "FLIP" PROPERTY INDIVIDUALLY
			WHOLESALE OR "FLIP" PROPERTY THROUGH LLC OR S CORP
			INVEST IN MORTGAGE NOTES OR TAX LIEN CERTIFICATES
			REPORT FARM INCOME OR LOSS
			QUALIFY AS A "REAL ESTATE PROFESSIONAL"

NOTES ON PERSONAL INVESTMENTS		

BUSINESS (BUSINESS OWNER ONLY - PLEASE USE INDIVIDUAL PAGE FOR EACH INDIVIDUAL BUSINESS) BUSINESS NAME: ADDRESS: **INDUSTRY:** PERCENTAGE OF BUSINESS OWNED BY TAXPAYER: % PERCENTAGE OF BUSINESS OWNED BY SPOUSE: \$_____ THIS YEAR: \$_____ BUSINESS NET INCOME LAST YEAR: TAXPAYER SALARY FROM BUSINESS LAST YEAR: \$_____ THIS YEAR: \$____ SPOUSE SALARY LAST YEAR: \$_____ THIS YEAR: \$_____ THIS YEAR: \$ NON FAMILY W2 PAYROLL LAST YEAR: PLEASE CHECK ALL THAT APPLY FOR THIS BUSINESS: STARTUP (LESS THAN 2 YEARS OLD) PART TIME OR SIDELINE BUSINESS SPECIFIED SERVICE BUSINESS (Heath, healthcare, law, account, actuarial, consulting, performing arts, athletics or any business that relies on "the reputation and skill of one or more employees" BUSINESS OWNS CAPITAL EQUIPMENT (machinery, vehicles, etc) BUSINESS OWNS OR OCCUPIES REAL ESTATE BUSINESS OCCUPIES A HOME OFFICE I/WE INTEND TO SELL THIS BUSINSS WITHIN YEARS I/WE INTEND TO LEAVE THIS BUSINESS TO FAMILY WITHIN YEARS ENTITY: PROPRIETOR OR SINGLE MEMBER LLC ENTITY: PARTNERSHIP OR MULTI MEMBER LLC **S CORPORATION C CORPORATION** EMPLOY MY MINOR CHILD OR CHILDREN EMPLOY MY ADULT CHILD OR CHILDREN EMPLOY NON-FAMILY OFFER GROUP HEALTH INSURANCE OFFER HEALTH SAVINGS ACCOUNTS OFFER MEDICAL EXPENSE REIMBURSEMENT PLAN OFFER FLEXIBLE SPENDING ACCOUNT: HEALTHCARE OFFER FLEXIBLE SPENDING ACCOUNT: DAYCARE OFFER EDUCATION ASSISTANCE PLAN OFFER KEY MAN PLAN OFFER NON-QUALIFIED DEFERRED COMPENSATION PLAN OFFER SIMPLE IRA OFFER SEP IRA OFFER PROFIT SHARING/MONEY PURCHASE PLAN OFFER 401K PLA OFFER DEFINED BENEFIT PLAN NOTES ON BUSINESS FINANCES