

## **RHODES-MURPHY** INCOME AND DEDUCTION CHECKLIST

Date:

PERSONAL DATA												
TAXPAYER (OR SINGLE)						SPOUSE						
Name												
Occupation							Name Occupation					
SS# Birthdate / /							SS#         Birthdate /					
E-Mail						E-Mail						
			Cell Phone ( )									
Street Address Apt									Bus. Phone ( ) Home Phone ( )			
City State					_ Zip							
FILING STATUS												
Single []     Married []     Married Filing Separately []     Head of Household []										ehold [ ]		
			L					, L ]				
DEPENDENTS											Euli Time	
Name/Relationship			Age			fotal come	Provide Over ½ Support		Social Security Number		Full-Time Student	
					Y		N			Y / N		
										Y / N		
						Y / N Y / N				Y / N		
	Y / N Y / N											
			W-2 (W	AGES) AN	ID/C				N)			
Circle		Source				Gross Amount		Tax Withheld FICA Federal State				
H / W								HOA		State		
H / W												
H / W												
H / W												
		IN	ITERES	T (I) AND	/OR		ND (D	) INC	OME	1		
Circle	Circle			Amount		Circle Circle		ircle	Source Amour		Amount	
Н/W/J	I/D					H / W /	J I	/ D				
H / W / J						H / W /		/ D				
H / W / J						H / W /		/ D				
H / W / J						H / W / H / W /		/ D / D				
H / W / J						н/w/ Н/W/		/ D				
H / W / J						H / W /		/ D				
SALE OF STOCKS, BONDS, REAL ESTATE, ETC.												
Circle								ate Sold	Gross Sales Price	Cost or Other Basis		
H/W/												
H / W /												
H / W / H / W /												
H / W /												
H/W/J												
H/W/	l											

BUSINESS AND/OR RENTAL INCOME FID #										
	Business Inc./Exp.		Rental (A)	Rer	ntal (B)	Rental (C)				
Business Name o	r Rental Description									
Address										
Gross Receipts ar										
Beginning - Invent										
Purchases - Inven										
Ending - Inventory	,									
Advertising	uding mileage (attach detail)									
Commissions										
Insurance										
Interest										
Legal & Professio	nal Fees									
Repairs & Mainter										
Salaries										
Supplies										
Taxes										
Telephone & Utilit	ies									
Other:										
RENTAL PROPERTY AND/OR EQUIPMENT PURCHASES										
Circle Description		Date Acquired		Cost/Basis	Land Value	Prior Years Depr.	Expected Life			
Business / Rent	al									
Business / Rent		/	/							
Business / Rent		/	/							
Business / Rent		/	/							
Business / Rent		/	/							
Business / Rent	al	/	/							
		ITEM		DEDUCTIONS						
	Madical			Contributions Amount						
Drocorintian Madi	Medical	Amo	uni	Cifta by Coob or (		Amount				
Prescription Medi Medical & Dental			Gifts by Cash or C Non-Cash (explain							
	s – Nurses – Hospital			Non-Cash (explain	1)					
Transportation										
Other (ex: glasses	ambulance)			Casualty & Theft	Losses (attach detail)	)				
	, ambarance)			Moving Expenses (attach detail) <i>Military Only</i>						
	Taxes	Amo	unt							
State & Local										
Real Estate					E des a di					
Personal Property	1				Educati	<u>on Credits</u>				
				_						
If you have education expenses for either the taxpaye										
	Interest (Paid)	Amo	unt	spouse or dependents you will need to provide the preparer with a copy of the <u>1098-T</u> for each student.						
Home Mortgage -				Wit	<u>J98-1</u> for each stud	ent.				
Second Mortgage										
Points				This 1098-T information is usually found in the student portal at most colleges or universities.						
Other:					5.					
				-						
				-						
OTHER INFORMATION										
Circle	Source		nount	Circle	C	Source	Amount			
H / W / J	Alimony [] Paid [] Received	7.11		H / W / J	Employee Auto Expe		Announc			
H / W / J	Social Security Income			H / W / J		ntertain (attach detail)				
H / W / J	Unemployment Compensation			H / W / J	Day Care Expense					
Н/W/Ј	State Tax Refund			H / W / J	Estimated Payment	s – Federal				
H / W / J IRA/KEOGH Contribution				H / W / J	Estimated Payment					
H/W/J	Home Energy Improvement			H/W/J	HSA/MSA Contribut	tion				