

2021

Taxpayer: _____ DOB: _____ Soc Sec #: _____ Occupation _____

Spouse: _____ DOB: _____ Soc Sec #: _____ Occupation _____

Current Address: _____

Filing Status Married: _____ Head of Household: _____ Single: _____ Email Address: _____

County of Residency Jan 1st, 2021: _____ Tele: Home: _____ Work: _____ Cell: _____

School District (Ohio) Jan 1st, 2021 _____

Children and Other Dependents (if not sure if you can claim do not hesitate to ask)

Name: _____ Relationship _____ DOB _____ Mo In Home _____ Soc Sec # _____ Dependent Income _____ How many yrs in college _____

<u>Interest Income – Earned</u>		<u>Dividend Income</u>		<u>Other Income</u>	
<u>From Whom</u>	<u>Amounts</u>	<u>From Whom</u>	<u>Amounts</u>	<u>From Whom</u>	<u>Amounts</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

To assist us in claiming all deductions and credits due you and in reporting all income items:

Please check the following questions if they apply to you and bring the supporting data.

- | | | |
|---|-----------------------|--|
| <u>Income Type</u> | <u>Amounts</u> | <u>Credits, Deductions & Info Con't</u> |
| ___ Tax Exempt Interest (Municipal)... | _____ | ___ List Num. of Dep. In College: ___ Bring Form 1098-T and <u>tuition stmts</u> |
| ___ Social Security Benefits (Yours)... | _____ | ___ Tuition Paid or Financed: _____ Amount |
| ___ Social Security Benefits (Spouse)... | _____ | ___ Are you legally blind? (H) ___ (W) ___ |
| ___ Number of W-2s Self _____ Spouse _____ | | ___ Sell Home-Bring Closing Statement for taxes paid |
| ___ Baby sitting income | _____ | ___ Pay over \$2,200 to household / in-home service |
| ___ Unemployment Compensation... | _____ | ___ Pay / Receive Alimony / Periodic Payments |
| ___ Sell Stocks –Need Cost and Statements _____ | | ___ Own any worthless stock? _____ |
| ___ Rentals – List Income / Include Expenses _____ | | ___ Buy goods or Magazines out of state\$ _____ |
| ___ Gambling Winnings / Prizes / Bring W2-G _____ | | ___ Travel over 100 miles for Reserve Training |
| ___ Partnership / Sub S – Bring K-1..... _____ | | ___ Start a new Business? Call us for details! |
| ___ Estate / Trust ---Bring K-1..... _____ | | ___ If a new client – Please bring last year’s return |
| ___ Withdrawal from IRA-TRA/ROTH (Circle) _____ | | ___ Did you barter in 2021 or belong to barter group? |
| ___ Pay \$600 for rent or service in bus./ farm _____ | | ___ Buy special license plate (note if an IN College) |
| ___ Jury Duty / Odd Jobs..... _____ | | ___ Schedule C filers list 12/31 Inventory |
| ___ Ebay/ list sales | _____ | ___ Rec. any notices from IRS /State <u>ALWAYS CALL US!</u> |

Credits, Deductions & Information

- | | |
|--|---|
| ___ Teachers / Aides class supplies..... _____ | ___ Please bring blank VOIDED check for E-File if new |
| ___ Pay rent (please see list on other side info) | ___ List 12/31/2021 IRA Balance if over 72 |
| ___ 2021 IRA TRAD/ROTH (Circle) Contr (H) _____ | ___ IRA Balance (H) _____ (W) _____ |
| ___ 2021 IRA TRAD/ROTH (Circle) Contr (W) _____ | ___ List Incentive Stock Options (ISO) issued in 2021 |
| ___ Pay Child Care (please list on reverse side) _____ | ___ Sales tax paid on Cars/Trucks/Boats |
| ___ Adoption Expenses | ___ Moving Expenses for Armed Forces |
| ___ Pay Long Term Care Ins. that qualifies for | ___ Any demutualized insurance Co Stock sold / held |
| ___ Indiana Partnership credit | |
| ___ HSA Contributions: Amount Paid After Tax _____ | ___ 529 Contributions by 12/31/2021 (bring statement) |

Questions or Concerns:

Hartley Tax & Accounting, LLC
6066 East State Blvd
Fort Wayne, IN 46815

Telephone 260.749.0444
Fax 260.749.4002

Tax checklists also online
Website: Hartleytaxaccounting.com

2021

Itemized Deductions and Credits

Medical and Dental Expses (must exceed 7.5% of AGI) Amount

Medical Insurance Premium
Long Term Care Insurance Premium
Indiana Partnership Long Term Care Insurance.....
College and School Insurance Premium.....
Medicare Insurance Premium.....
Medicare Drug Coverage Insurance.....
Contact Lens/Vision Insurance
Prescription Drugs / Insulin.....
Eyeglasses and Repairs.....
Hearing Aids and batteries.....
Hospitals.....

Nursing Home Expenses.....

Lab and X-Ray Fees.....
Doctors / Dentists.....
Parking Fees and Lodging Expenses for Medical.....
Miles Driven for Medical Purposes miles

Taxes

Real Estate – Home
Condo or Lake Property Taxes.....
Personal Property and Boat Excise.....
Vehicle Excise Tax Veh 1 Veh 2 Veh 3 Veh 4
Excise Tax

Estimated State and Federal taxes you Paid by Check
Due Date 04/21 06/21 09/21 01/22
Federal
State

*Would you like 2022 vouchers and envelopes?
Yes No

Interest Paid to Others

Home Mortgage – (if paid to an individual List Name,
Address, and Social Security Number)

Mortgage Insurance Premium.....
Home Equity / 2nd Mortgage.....
Time Share / Lake Property.....
Investment Interest.....
Vehicle Interest / Schedule C Filers Only
Credit Card Interest / Schedule C Filers Only
Student Loan Interest (bring statements)
Points Paid On Home Refinance or Purchase

Credits and Other Deductibles

Day Care Business – List on Separate Sheet Please

Daycare Information (for Children through age 12)

(This Includes Sitter, Preschool and Maid Services)

Name Address Social Security Number or EIN (Required) Amount Paid

Contributions – Gift to Charity Amount

Church (must have acknowledgement)
College – (list University).....
Special License Plate (Note if IN College)..
Foreign Exchange Student ___ X \$50 mo..
Other Charitable Contributions.....
Miles driven for charity miles
In Kind (household goods given to charity (if \$500 or more
must have acknowledgement from Charity and detailed list
of items in order to take)

NEW FOR 2021 ONLY:

Charitable Contribution-\$300 per person allowed w/o itemizing
Prepaid Child Tax Credit Received
Stimulus (EIP) payments received
PPP/EIDL loans received for SCH C and business owners

Other Potential Items:

Bad Debt or Worthless Stock.....
Gambling Losses
Teaching Supplies (K – 12).....

If claiming a child that did not live with you, you must have
a signed Form 8332.

American Opportunity and Lifetime Learning

Credit Tuition Paid or Financed.....

Renters Deduction-Landlord Name, Address, Rent
(\$3000 Maximum allowed in Indiana)

Energy Credits/Deductions

Federal: Solar Energy Equip, Electric Cars, and Energy
efficient property. \$500 Lifetime Limit Credit

Standard Deduction: Single \$12,550 - HOH \$18,800 - Joint \$25,100 - Additional if over 65 \$2,700(M), \$1,700(S)
FOR ALL MILEAGE DEDUCTIONS record ODOMETER READINGS AND PURPOSE – Business mileage rate is \$.56 Per Mile

Please see other side