

What to bring to your appointment with FMV Tax Professionals

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Please fill in the blanks on this form if you are a first time client to FMV Tax Professionals. For current and future clients this **guide can be used as a handy reminder** to be assured that you have collected all you need to have a complete tax visit.

	Name	SSN	Birth Date	Occupation/student/relationship
Taxpayer	_____	_____	_____	_____
Spouse	_____	_____	_____	_____
Child 1*	_____	_____	_____	_____
Child 2	_____	_____	_____	_____
Child 3	_____	_____	_____	_____

*Are your children still dependents? Do you have dependents who are not your children?
Not sure, call 716.537.2066. Use the occupation spaces above to indicate children's student status or non children's relationship to the taxpayer. If you need extra space please use the back of this form.

Address _____
Number and street City State Zip

County _____ School District _____

Checking or Savings Account Number _____ Routing Number _____
Only required if you choose to have your refund directly deposited or a balance due withdrawn OR you may bring a voided check for reference numbers.

WHAT HAS CHANGED IN YOUR LIFE??

Did you: have a new child; get married; have a child go to college; buy or sell a house; put money in an IRA; make energy saving improvements to your house? All of these will make a difference in your tax return, please make a note and mention them when you come for your appointment.

Please bring all important tax documents that have been mailed to you from banks and employers that show your income and expenses. Some examples are listed below, but there may be others.

Income:	Deductions:	My Notes:
<input type="checkbox"/> W-2(s) from Employer(s)	<input type="checkbox"/> Property taxes	_____
<input type="checkbox"/> 1099 Statements from:	<input type="checkbox"/> Mortgage interest	_____
<input type="checkbox"/> Banks	<input type="checkbox"/> Charitable gifts	_____
<input type="checkbox"/> Investment firms	<input type="checkbox"/> Charitable miles	_____
<input type="checkbox"/> Retirement income	<input type="checkbox"/> IRA contributions	_____
<input type="checkbox"/> Bonus at work	<input type="checkbox"/> Alimony paid to others	_____
<input type="checkbox"/> Commissions at work	<input type="checkbox"/> Child care payments	_____
<input type="checkbox"/> Unemployment	<input type="checkbox"/> Student loan interest	_____
<input type="checkbox"/> Social Security	<input type="checkbox"/> Payments to a medical HSA	_____
<input type="checkbox"/> Alimony received	<input type="checkbox"/> Teacher purchases for classroom	_____
<input type="checkbox"/> Rental income	<input type="checkbox"/> Moving expenses	_____
<input type="checkbox"/> Business income	<input type="checkbox"/> Firefighter's credit	_____
<input type="checkbox"/> Farm	<input type="checkbox"/> Business expenses	_____
<input type="checkbox"/> Hobby income	<input type="checkbox"/> Rental property expenses	_____
<input type="checkbox"/> Gambling income	<input type="checkbox"/> Business miles	_____
<input type="checkbox"/> Jury Duty income	<input type="checkbox"/> Farm expenses	_____
	<input type="checkbox"/> Medical & dental expenses	_____
	<input type="checkbox"/> Medical miles	_____