

**TaxWorksConversions2006**



## Welcome to TaxWorks

Thank you for choosing TaxWorks Professional Tax Software. We're excited to have you on our team and are look forward to building a lasting relationship together.

As you make the transition to TaxWorks, we want to ensure that everything runs as smoothly as possible. The first step of this transition will be converting your clients from TaxWise to TaxWorks. This document contains step-by-step instructions on converting your clients. Please read through it carefully.

We have also included a section noting specifics for each form and line number that is converted to each TaxWorks system. The form and line number information is lengthy and is intended for reference purposes only; you needn't read it in its entirety. Information and conversion is documented for system 1040 only.

If you require assistance during the conversion process, please don't hesitate to contact our support team at 1-800-843-1139. Again, welcome! We look forward to working with you.

Sincerely,

TaxWorks Professional Tax Software

## Table of Contents

<b>Welcome to TaxWorks .....</b>	<b>1</b>
<b>Disclaimer Statement.....</b>	<b>3</b>
<b>Conversion Process.....</b>	<b>5</b>
<b>TaxWise to TaxWorks, Individual Conversion Items.....</b>	<b>8</b>

---

## Disclaimer Statement

### ***The goals of the TaxWorks data conversion are as follows:***

1. To convert only the TaxWise data (to TaxWorks format) that you will need to run the Update Clients, this transfers your 2006 TaxWorks data to 2007 TaxWorks.
2. To convert only the 2006 TaxWise data (to 2006 TaxWorks format) that will allow you to generate **complete** and accurate Tax Organizers.

### ***The data conversion is NOT intended to do the following:***

1. It is NOT intended to convert all of your data
2. It is NOT intended to allow you to generate a complete and accurate 2006 TaxWorks tax return!

**Note:** Do not process/prepare 2006 tax returns using only the converted information, as tax calculations may not be accurate. Some manual data entry may be required.

### Asset Manager Conversions (All Systems)

- ✍ We recommend you print a copy of the TaxWorks Federal Depreciation Schedule and verify that the TaxWorks current depreciation amounts match those calculated by your prior software. Due to the many ways depreciation can be calculated, there may be slight differences that could require manual overrides in the TaxWorks Asset Manager.
- ✍ If you have overridden any depreciation calculations, please review them for accuracy.
- ✍ If you used 200% declining balance on any farm asset, you will need to override the current depreciation.
- ✍ If you had selected to delete the asset next year, the asset will not convert.
- ✍ Any asset carrying to Sch A points will be depreciated over the life of the asset using the Straight Line Method.
- ✍ Assets involved in a like-kind exchange may not convert properly, because of the difference in handling between the two systems. Please review them carefully to make sure the correct information is entered into the TaxWorks Asset Manager.
- ✍ Due to the limited amount of information being converted, if you have current year Section 179, the conversion may calculate a carryforward of these amounts. To remove the unused carryforward, open the TaxWorks 2006 Asset Manager, click the 179 button, and remove any unnecessary information.

### Individual Conversions

**Note:** TaxWorks only converts the information necessary to prepare a Proforma and Taxpayer Organizer.

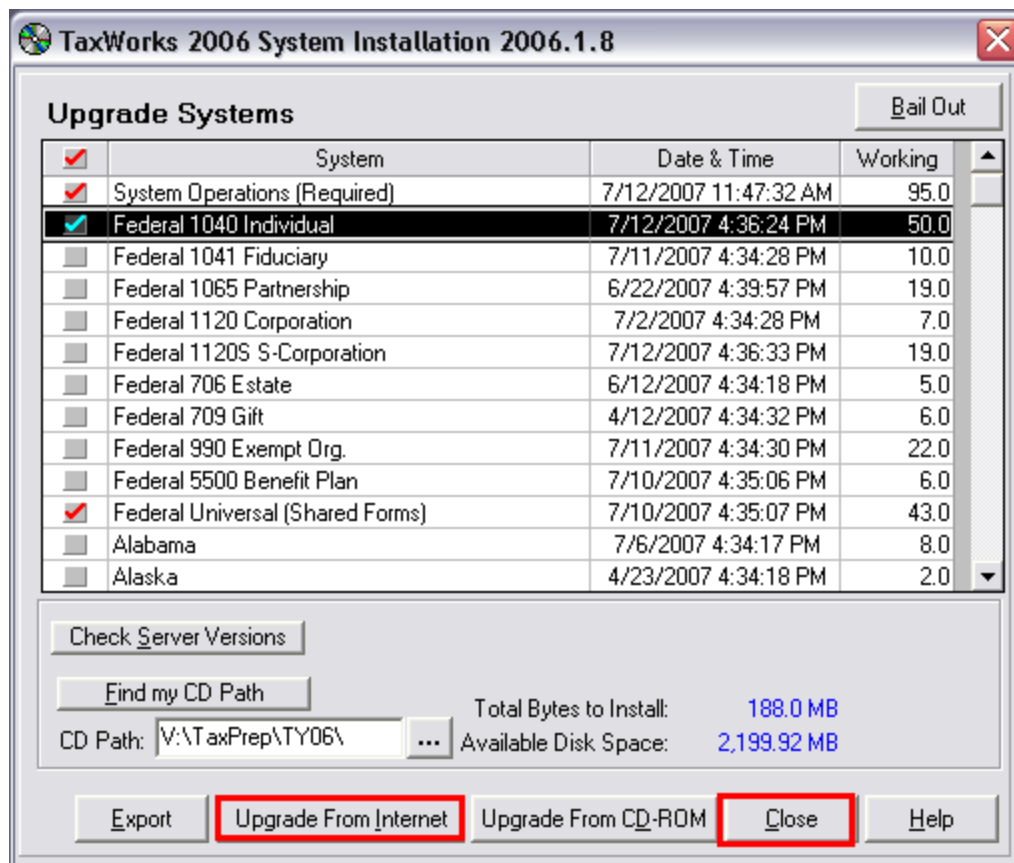
- ✍ Preparer Information – Will not convert.
- ✍ State information - Will not convert.
- ✍ Form 8863 Education Credit - If “Optimize” is selected in TaxWise this will not convert. To convert this you must select a credit type.
- ✍ Items selected for deletion for next year - May not be taken into account. You may have to manually remove some items after updating to 2006 in TaxWorks.
- ✍ 1099G -
  - 1099G Income reported on Form - Not available from TaxWise
  - 1099G Box 2 is for Tax year - Not available in TaxWise
  - 1099G State info - Only available for one state in TaxWise
- ✍ 1040 Estimated Voucher - Estimate options will not convert
- ✍ Estimate Threshold - Will not convert.
- ✍ Form 2106 - Verify occupation.
- ✍ Detail statements – All amounts and descriptions may not convert.
- ✍ TaxWorks 2006 Taxpayer Organizer - Will be available November 2006.

### Business System Conversions

- ✍ 1041 – If multiple beneficiaries have dollar distributions these amounts must be entered manually in TaxWorks Tier 1 and Tier 2 allocation boxes.
- ✍ 1041 – Form 5227 - Due to the limited amount of information being converted, carry forward amounts may not convert correctly.
- ✍ 1065 and 1120S – Schedule K Line 18a Type of Sec 59(e)(2) expenditures – Description will not convert; amount will.
- ✍ 1065 - Form 4835 – Will not convert.
- ✍ 1120 - NOL - Utilization amounts will not convert
- ✍ Detail statements – Detail statements – All amounts and descriptions may not convert.

## Conversion Process

1. As a precaution, backup your client data in your prior year software package.
2. Install the TaxWorks 2006 Demo (follow the installation instructions provided with the demo).
  - a. If you do not have a copy of the demo, call our Sales Team at (800) 230-2322.
3. After the installation is complete, open the TaxWorks 2006 Demo by clicking the *TaxWorks icon* located on your desktop.
4. If the Client Selection screen appears, click the *Close* button.
5. On the menu bar click "Installations", and then "Upgrade Systems".

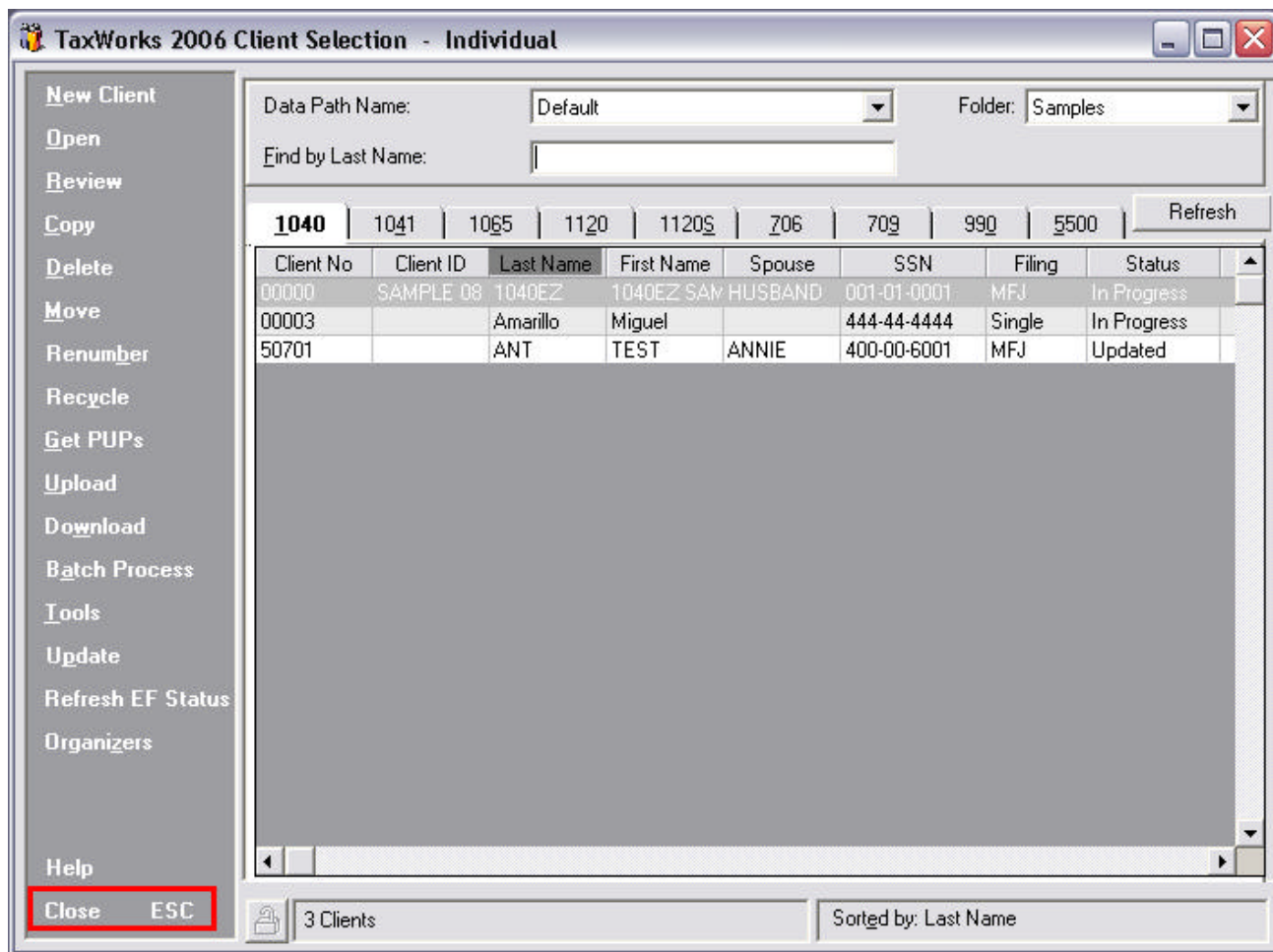


6. Tag the following items using your mouse. Do this by clicking on the gray box to the left of the item:
  - a. System Operations
  - b. Asset Manager
  - c. Federal Universal (Shared Forms)

Tag only the Federal systems for clients you wish to convert:

- d. Federal 1040 Individual

7. Click the **Upgrade From Internet** button (Upgrades may take up to 1 hour).
8. Once the upgrade is complete, click the *Close* button.
9. Files that were upgraded will automatically decompress.
10. TaxWorks 2006 will automatically open.
11. If the Client Selection screen appears, click the *Close* button.

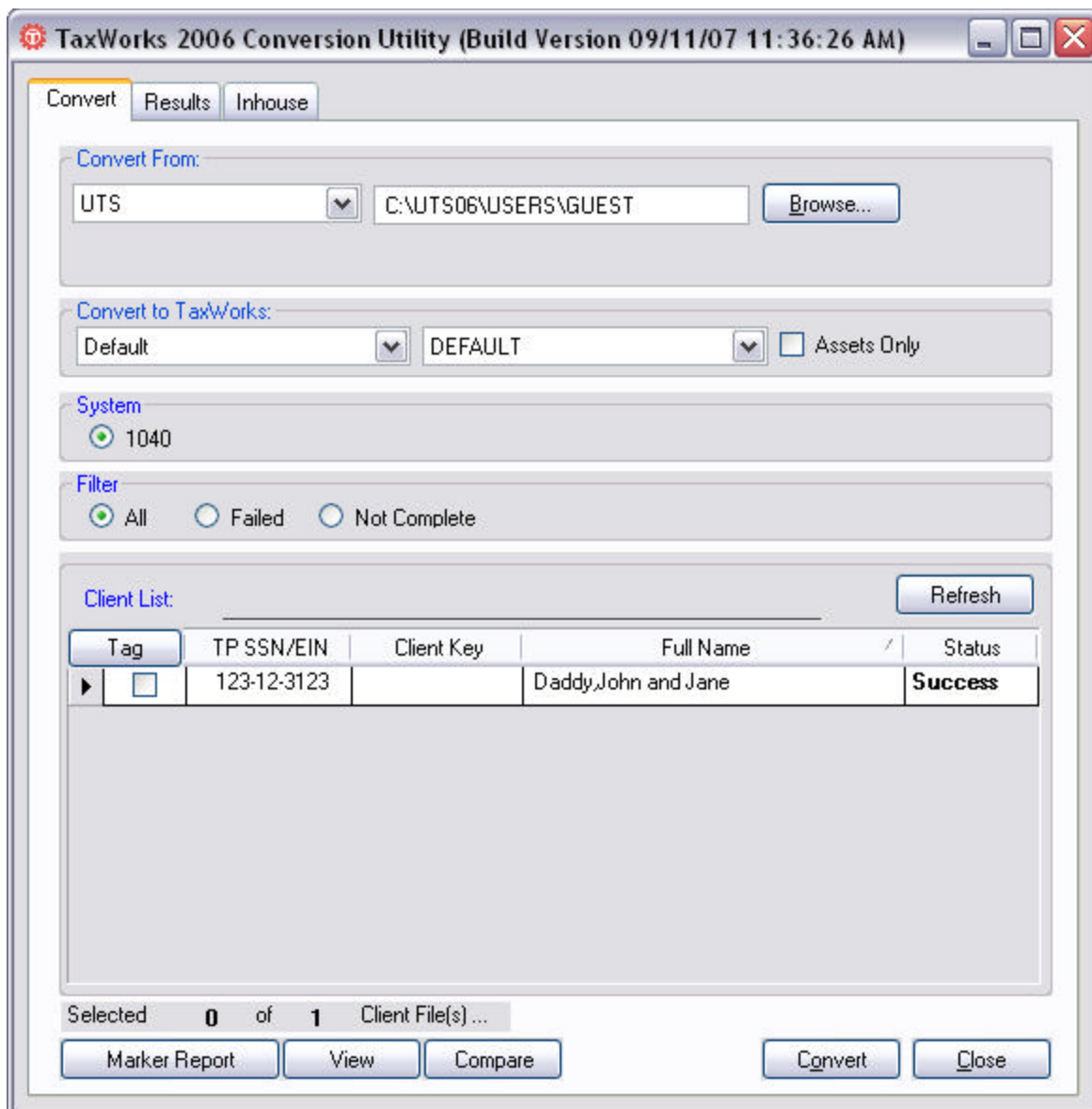


12. Click the *File* menu and select *Convert Clients*.
13. TaxWorks will automatically close.
14. The TaxWorks 2006 Conversion Utility will open.
15. Verify TaxWise Data Path:

C:\UTS06\users\XXXXX (Default TaxWise XXXX=USERID)

*Note: Vendor Data Path will change with system selected at the bottom of the screen.*

16. Select the TaxWorks Drive (default is C:)
17. Select the TaxWorks Folder (default is DEFAULT)
18. Tag the clients you want to convert. Do this by clicking the gray box to the left of the client.
19. Click the *Convert* button.



20. Once the conversion is complete, the status of each client will be displayed in the *Status* column.
21. To view a conversion report. Click the *Results* tab.
22. When you are done click the *Close* button
23. TaxWorks 2006 will automatically open.
24. If the Client Selection does not open automatically click, the *Clients* button located on the button bar.
25. Carefully review your converted data files to be sure your converted data is accurate. If you have items that did not convert, manually enter them in the TaxWorks program. Double click on the desired client file; or, highlight the desired client and click *Open* located in the left column.
26. Verify that client data stated in the manual converted correctly.
27. If you have any questions or suggestions concerning the conversion process please contact us at support@taxworks.com or call (800) 843-1139.
28. Occasionally we will upgrade items in the conversion program. We will post upgrade changes on the web. You may reconvert clients affected by these changes.  
CAUTION: Entries made in TaxWorks to previously converted clients will be lost.

# TaxWise® to TaxWorks®

## Automated Individual Conversion Items (1040)

The **underlined and bold titles** are the titles that correspond with the Forms Pane of the TaxWorks tax program. The underlined Italicized titles are the sub-titles within the input screen.

### **GI - General Information - Advanced**

#### General Information

Taxpayer First Name and Initial

Taxpayer Last Name

Taxpayer Title / Suffix

Taxpayer Social Security Number

Taxpayer Occupation

Taxpayer Date of Birth

Taxpayer Blind =1

Taxpayer Date of Death

Taxpayer Home Phone Daytime / Evening

Taxpayer Work Phone Daytime / Evening

Taxpayer Cell Phone Daytime / Evening

Taxpayer Fax Number

Taxpayer Pres. Elect Campaign =1

Taxpayer Education Expense

Taxpayer Education Credit Type

Spouse First Name and Initial

Spouse Last Name

Spouse Title / Suffix

Spouse Social Security Number

Spouse Occupation

Spouse Date of Birth

Spouse Blind =1

Spouse Date of Death

Spouse Home Phone Daytime / Evening

Spouse Work Phone Daytime / Evening

Spouse Fax Number

Spouse Pres. Elect Campaign =1

Spouse Education Expense

Spouse Education Credit Type

#### Address, County and School

In care of

Street address

Apartment Number

Zip, City, State

County

Taxpayer E-mail Address

Spouse E-mail Address

#### Foreign address

Foreign street address

City, State / Province, Postal code

Country

#### Filing Status

Single

? Taxpayer is claimed on someone else's return

? Taxpayer is dependent of another but qualifies for Ed credit

Joint

? Check if spouse is claimed on someone else's return

? Spouse is dependent of another but qualifies for Ed credit

Married filing Separate

? Dual Status Alien

? Itemize

? Standard Deduction

? Claim Spousal Deduction

? Didn't live with Spouse all year

Head of household

Qualifying Widow(er)

? Year Spouse died

### **DI - Dependent Information**

Dependent Information

First Name	Months Lived at Home
Last Name	Disabled
Date of Birth	College Student
Social Security Number	Child Care Expense
Relationship	Education Expense
	Education Credit Type

**W2 – Wage W2**

Wages and Tax information

Taxpayer = T	Medicare tax withheld
Spouse = S	Social security tips
Employee Name (if different)	Allocated tips
Employee Address (if different)	Advanced EIC payment
Employee City, State, Zip (if different)	Dependent care benefits
Employer's ID number	Nonqualified plans
Employer's Address	Box 12a
Employer's Zip	Box 12b
Employer's City	Box 12c
Employer's State	Box 12d
Foreign address	Statutory employee - To Sch. C#
Corrected Form W2	Retirement plan
Control Number	Third-party Sick Pay
Non-standard indicator	1 <sup>st</sup> and 2 <sup>nd</sup> State name
Prepare Substitute W2 (4852)	1 <sup>st</sup> and 2 <sup>nd</sup> State ID number
Wages, tips, other Compensation	1 <sup>st</sup> and 2 <sup>nd</sup> State Wages
Federal income tax withheld	1 <sup>st</sup> and 2 <sup>nd</sup> State tax withheld
Social security wages	1 <sup>st</sup> and 2 <sup>nd</sup> Local wages
Social security tax withheld	1 <sup>st</sup> and 2 <sup>nd</sup> Local tax
Medicare wages and tips	1 <sup>st</sup> and 2 <sup>nd</sup> Locality Name

**W2G – Gambling Wages**

Certain Gambling Winnings

Taxpayer = T	Winner's Address (if different)
Spouse = S	Winner's City, State, Zip (if different)
Winner's Name (if different)	Payer's Federal ID number
	Payer's Address

Payer's Zip	Winnings from identical wagers
Payer's City	Cashier
Payer's State	Window
Foreign address	First ID number
Nonstandard Indicator	Second ID number
Gross winnings	Two-letter state code
Federal income Tax withheld	Payer's State ID number
Type of wager	Locality name
Date won	State income tax withheld
Transaction	Locality withholding
Race	

### **1099R – Pensions**

#### *Distributions from Pensions, Annuities, Retirements, Etc*

Taxpayer or Spouse Indicator	Federal income tax withheld
Payee's Name (if different)	Employee contributions or Insurance Premiums
Payee's Address (if different)	Net unrealized appreciation in employer's securities
Payee's City, State, Zip (if different)	Distribution Code
Payer's Federal ID number	IRA/ SEP/ SIMPLE
Payer's Name	Other
Payer's Address	Percent
Payer's Zip	Percent total distribution
Payer's City	Total employee contribution
Payer's State	1 <sup>st</sup> State Tax withheld
Foreign address	1 <sup>st</sup> and 2 <sup>nd</sup> State
Account Number	1 <sup>st</sup> and 2 <sup>nd</sup> State payer number
Distribution Rollover 1= IRA, 2= Roth	1 <sup>st</sup> and 2 <sup>nd</sup> State distribution
Prepare substitute 1099R (4852)	1 <sup>st</sup> State Local Tax withheld
Nonstandard indicator	1 <sup>st</sup> and 2 <sup>nd</sup> State Name of locality
Gross distribution	1 <sup>st</sup> and 2 <sup>nd</sup> State Local distribution
Taxable amount	Cost in plan at starting date
Taxable amount not determined	Age at starting date
Total distribution	Amount received tax free after 1986
Capital Gains included in line 2a	Annuity starting date

### **1099G – Government Payments**

Government Payments

Taxpayer = T	Amount repaid
Spouse = S	State or local income tax refunds, credits or offsets
Recipient's Name (if different)	Box 2 amount is for tax year
Recipient's Address (if different)	Federal income tax withheld
Recipient's City, State, Zip (if different)	Taxable grants
Income Reported on Form	Agricultural payments
Payer's Federal ID number	Amount in box 2 applies to income from a trade or business
Payer's Address	1 <sup>st</sup> and 2 <sup>nd</sup> State tax withheld
Payer's Zip	1 <sup>st</sup> and 2 <sup>nd</sup> State
Payer's City	1 <sup>st</sup> and 2 <sup>nd</sup> State payer number
Payer's State	1 <sup>st</sup> and 2 <sup>nd</sup> State income
Payer's telephone number	
Account number	
Unemployment compensation	

**1-1040 PG 1**

1040 U.S. Individual Income Tax Return Pg 1

Household employee income not reported on W2	Self-Employed Insurance Deduction from S-Corp Taxpayer
Taxable graduate scholarship-fellowship amount	Self-Employed Insurance Deduction from S-Corp Spouse
Alimony received Taxpayer	Self-Employed KEOGH, SEP, & SIMPLE
Alimony received Spouse	Total contributions allowed
Other income	Alimony Paid 1 <sup>st</sup> recipient amount
<u>Adjustments to income</u>	1 <sup>st</sup> Recipients SSN
Educator expense	2 <sup>nd</sup> Recipients SSN
IRA contribution Taxpayer	Alimony paid 2 <sup>nd</sup> recipient amount
IRA contribution Spouse	<u>Other adjustments</u>
Covered by employer plan	Clean fuel
Student Loan interest deduction	Other adjustments
Self-Employed Health insurance deduction Taxpayer	
Self-Employed Health insurance deduction Spouse	

## **2-1040 PG 2**

### 1040 U.S. individual Income Tax Return Pg 2

Force Itemized Deductions

Force Standard Deduction

DC First-time home buyer

Alcohol fuel credit

Enhanced oil recovery credit

Renewable electricity production credit

Empowerment zone employment credit

Indian employment credit

Contribution to community development Corp.

Non-Conventional source fuel credit

### Recapture Taxes

Investment credit

Low-income housing credit

Qualified electric vehicle credit

Indian employment

Fed mortgage subsidy

New market credit

Uncollected tax on reported tips

Golden parachute

### Refund

Preparer is Third Party Designee

Third Party Designee Name

Third Party Designee Phone Number

Third Party Designee Personal ID Number

## **SSA - Social Security Benefits**

### Social Security and Tier 1 Railroad Benefits

Taxpayer Total Social Security Benefits received

Taxpayer Total Medicare premiums paid

Taxpayer Total Tier 1 Railroad benefits received

Taxpayer Federal income tax withheld on benefits received

Spouse Total Social Security Benefits received

Spouse Total Medicare premiums paid

Spouse Total Tier 1 Railroad benefits received

Spouse Federal income tax withheld on benefits received

## **A - Schedule A**

### Schedule A – Itemized Deductions

Medicine and Drugs  
Total Medical Mileage  
Long-Term Care Premiums  
Other Medical Expenses  
Real Estate Taxes  
Personal Property Tax  
Other Taxes  
Home Mortgage interest and points reported on form 1098  
Home Mortgage interest not reported on form 1098

Points not reported on 1098  
Investment interest  
Contributions by Cash or Check  
Total Charitable Mileage  
Contributions other than Cash or Check  
Union and Professional Dues  
Other Un-reimbursed Expenses  
Tax Preparation Fees  
Safe deposit box  
Other Limited Expenses  
Gambling Losses to the Extent of Winning

## **B – Schedule B**

### Interest Income

Name of payer  
Interest income (Not US Gov't)  
Early Withdrawal  
US Gov't Savings Bond  
Total Muni Bonds  
Post 8/7/86 Privacy Act Incl.  
Adjustment amount  
Federal Withholdings  
Foreign Tax Paid  
Foreign Country or US Possession  
State withholding

### Income From Seller-Financed Mortgages

Name  
Address  
Social Security Number  
Federal ID Number  
Taxpayer = T  
Spouse = S  
Amount

### Dividend Income

Dividend income description  
Taxpayer = T  
Spouse = S  
Ordinary Dividends  
Qualified Dividends  
US Gov't Bond  
Total Muni Bonds  
Capital Gains  
Non Taxable Distributions  
Adjustment Amount  
Investment Expense  
Foreign Tax Paid  
Foreign Country or US Possession  
Federal Withholding  
State Withholding  
State  
Foreign Trust  
State

## **C – Schedule C**

### Schedule C – Profit or Loss from Business

Spouse =1  
Suppress Schedule SE  
Principal Business or Service  
Principal Business Code  
Business Name  
Employer Identification Number  
Street address (if different)  
City, State, and Zip (if different)  
Accounting Method (cash, accrual, other, specify)  
Materially Participates 1 = No  
First Schedule C filed for this business 1 = Yes

### Part I Income

Gross Receipts or Sales  
Statutory Employee =1  
Returns and Allowances  
Cost of Goods Sold  
Other income (including fuel tax credit or refund)

### Part II Expenses

Advertising  
Car / truck expense  
Commissions  
Contract labor  
Employee benefit program  
Insurance  
Interest  
    ? Mortgage  
    ? Other

Legal / Professional Services  
Office Expense  
Pension / Profit Sharing  
Rent or Lease Vehicles, Machinery, equip  
Rent or Lease Other Business property  
Repairs / Maintenance  
Supplies  
Taxes and Licenses  
Travel  
Meals and Entertainment (Limited 50%)  
Utilities  
Wages

### Part III Cost of Goods Sold

Inventory methods used (cost, lower cost of market, other, specify)  
Beginning inventory  
Purchases  
Less cost of personal use items  
Cost of labor (not paid to self)  
Materials and Supplies  
Other costs  
Inventory at end of year

### Part V Other Expenses

Miscellaneous  
Postage  
Telephone (business only)  
Other Expenses

## **D – Schedule D – Capital Gains and Losses**

### Short & Long Term Capital Gains and Losses

Description  
Taxpayer or Spouse Indicator  
Acquired Date

Sold Date  
Term  
Sales Price  
Cost or Basis / State Cost

## **E – Schedule E pg 1**

### Rental Real Estate and Royalties

Property Kind	Cleaning and Maintenance
Location	Commissions
Entity ownership Taxpayer = T, Spouse = S, Joint =J	Insurance
Real estate professional	Legal and other professional fees
Passive activity	Management fees
Percentage of ownership (if not 100%)	Mortgage interest paid to banks etc.
Rents Received	Other interest
Royalties Received	Repairs
Advertising	Supplies
Other Travel Expense	Taxes
	Utilities
	Other

## **ES – Estimates**

### Estimated Tax Payments

Prior year Overpayment applied	4 <sup>th</sup> Quarter Payment amount
1 <sup>st</sup> Quarter Voucher payment date	<u>Rounding Method</u>
2 <sup>nd</sup> Quarter Voucher payment date	Round tax to nearest 1= \$10, 2=\$100, 3=\$1000
3 <sup>rd</sup> Quarter Voucher payment date	<u>Override Estimate Amounts</u>
4 <sup>th</sup> Quarter Voucher payment date	Override Voucher #1 amount
1 <sup>st</sup> Quarter Payment amount	Override Voucher #2 amount
2 <sup>nd</sup> Quarter Payment amount	Override Voucher #3 amount
3 <sup>rd</sup> Quarter Payment amount	Override Voucher #4 amount

## **PTK1 - Partnership K1 Received**

### Partnership Schedule K1 Received

Entity Code Taxpayer = T, Spouse = S, Joint = J	Real estate professional =1
Entity identification number	Materially participated in trade or business activity =1
Entity name	Active rental real estate =1
Tax Shelter Registration Number	Foreign Entity =1
Publicly traded partnership =1	Final disposition =1

## **CSK1 – S Corporation K1 Received**

### S-Corporation Schedule K1 Received

Entity Code Taxpayer = T, Spouse = S, Joint = J	Real estate professional =1
Entity identification number	Materially participated in trade or business activity =1
Entity name	Active rental real estate =1
Tax Shelter Registration Number	Final disposition =1

## **FDK1 - Fiduciary K1 Received**

### Fiduciary Schedule K1 Received

Entity Code Taxpayer = T, Spouse = S, Joint = J	Real estate professional =1
Entity identification number	Materially participated in trade or business activity =1
Entity name	Active rental real estate =1
Tax Shelter Registration Number	Final disposition =1

## **F – Farm Income and Expenses**

### Schedule F Farm Income and Expense

Spouse =1	Commodity credit corporation (CCC) loans:
Suppress Schedule SE	? CCC loans reported under election
Principal Product	? CCC loans forfeited
Agricultural Activity Code	? Taxable amount
Employer ID number	Crop insurance proceeds and certain disaster payments:
Taxpayer materially participates	? Amount received in current year
<u>Part I Farm Income (Cash Method)</u>	? Taxable Amount
Sale of livestock and other items bought for resale	? Elect to defer
Cost of livestock and other items reported on Ln 1	? Amount deferred from prior year
Sales of livestock, produce, grains and other products raised	Custom hire (machine work) income
Total cooperative distributions amount (1099-PATR)	Other income
Taxable cooperative distributions amount	<u>Part II Farm Expense Cash and Accrual</u>
? Taxable amount	Car / Truck expenses
Agricultural program payments	Chemicals
? Taxable amount	Conservation expense

Custom hire  
 Employee Benefit program  
 Feed purchase  
 Fertilizers and lime  
 Freight and trucking  
 Gasoline fuel and oil  
 Insurance (not health)  
 Interest:  
     ? Mortgage paid to banks etc.  
     ? Other  
 Labor hired less:  
     ? Employment credits  
 Pension / Profit Sharing  
 Rent or Lease:  
     ? Machinery and Equipment  
     ? Other (land, animals)  
 Repairs and maintenance  
 Seeds / plants purchased  
 Storage / warehousing  
 Supplies purchased

Taxes  
 Utilities  
 Vet, breeding, medicine  
 Miscellaneous  
Part III Farm Income Accrual Method  
 Sales of livestock, produce, grains and other products raised  
 Total cooperative distributions amount (1099-PATR)  
     ? Taxable amount  
 Agricultural program payments  
     ? Taxable amount  
 Commodity credit corporation (CCC) loans:  
     ? CCC loans reported under election  
     ? CCC loans forfeited  
     ? Taxable amount  
 Crop insurance proceeds  
 Custom hire (machine work) income  
 Inventory of Livestock etc at beginning of year  
 Cost of Livestock, produce, etc during year  
 Inventory of Livestock, etc at end of year

### **SE – Schedule SE**

Social Security Self-Employment Tax

Spouse Filed Form 4029 =1

Section B Long Schedule SE

Spouse Filed Form 4361 =1

Taxpayer Filed Form 4029 =1

Taxpayer Filed Form 4361 =1

### **1116 - Foreign Tax Credit**

Foreign Tax Credit

Type of income

Taxes withheld on Dividends

Part I Taxable income from Foreign Sources

Taxes withheld on Interest

Name of Country or US possession

In US Dollars – Taxes withheld on Dividends

Gross Foreign Source income

In US Dollars – Taxes withheld on Interest

Part II Foreign Taxes Paid or Accrued

Total foreign AMT taxes paid / accrued

## H – Schedule H

### Household Employment Tax

Spouse =1

Federal EIN

Paid \$1400 or more to any one household employee in current year =1

Withheld federal income tax in current year for any household employee =1

Paid total cash wage of \$1000 or more in any calendar quarter of prior year or current year =1

### Part I Social Security, Medicare, and Income Tax

Total cash wages subject to social security taxes

Total cash wages subject to Medicare Taxes

Federal income tax withheld if any

Advanced earned income credit payments if any

### Part II Federal Unemployment Tax

Paid unemployment contributions to only one state =1

Paid all state unemployment contributions for current year by 05-15-05 =1

All FUTA tax wages also taxable for state unemployment =1

### Section A

State where unemployment contributions were paid

State reporting number

Contributions paid to state unemployment fund

Total cash wages subject to FUTA tax

### Section B

Primary and Secondary State Name

Primary and Secondary Reporting number on State unemployment tax return

Primary and Secondary Taxable wages

Primary and Secondary State experienced rate period From and To

Primary and Secondary State experience rate

Primary and Secondary Contribution paid to State Unemployment Fund

## 2441 – Child Care Credit

### Part I Persons or Organizations who provided the Care

Name

Street address

City State and Zip Code

Social Security Number

Employer Identification Number

Amount Paid

### Part II Credit for Child and Dependent care expense

First Name

Last Name

Date of Birth

Social Security Number

## 6252 - Form 6252

### Form 6252 Installment Sale Income

Description

## **2106 Employee Business Expense**

### Employee Business Expenses

Occupation  
Spouse = 1  
Qualified Performing Artist =1  
Handicapped employee =1  
Fee basis State / Local Gov't Employee =1  
Dept. of Transportation subject to limitations =1

### Step 1 Expenses

Parking fees, tolls, transportation, including trains etc.  
Travel expense away from home - Lodging  
Travel expense away from home – Car rental  
Travel expense away from home – Other  
Business Expenses not included above (not Meals & Entertainment)  
Meals & Entertainment Expenses

### Step 2 Reimbursements from Employer for Expenses in Step 1

Amounts employer paid that were not reported on Form W2, box 12 - Not Meals and entertainment  
Amounts employer paid that were not reported on Form W2, box 12 - Meals and entertainment

### Part II Vehicle Expenses

#### Section A

Date Vehicle was placed in service  
Total Vehicle miles driven during current year  
Total business miles during the year  
Average daily round trip commuting distance  
Is another vehicle available for personal use 1= Yes  
Employer provided, off duty use permitted 1= Yes  
Evidence to support deduction 1=No  
If Yes, is the evidence written 1= No

#### Section C

Gas  
Oil  
Repairs  
Auto Insurance  
Other Maintenance exp  
Vehicle rentals (lease)  
Value of employer-provided vehicle

## **8283 –Form 8283**

### Part I Information on Donated Property

Donee Organization Name	How Acquired
Donee Organization Address	Donor Basis
Donated Property Description	Fair Market Value
Date Contributed	Method Used to determine FMV
Date Acquired	

## **8379 – Form 8379**

### 8379 – Injured Spouse Claim and Allocation

Injured Spouse is Taxpayer or Spouse	Divorced or separated from spouse on joint return and want refund issued in this name only
Current Street address	
Current City, State, Zip code	Two Letter State Code if a community property state

## **8615 – Form 8615**

### Tax for children under age 14 with investment income of more than \$1,500

Parent's Name

Parent's Last Name

Parent's Social Security Number

## **8814 – Form 8814**

### Parents Election to Report Child's Interest and Dividends

Child's First Name

Child's Social Security Number

Child's Interest Income

Child's Last Name

Child's Ordinary Dividends

Child's Capital Gains Distribution

## **8829 – Form 8829**

### 8829 Business Use of Home

Form

? Utilities

#### Part I Part of your home used for business

? Other expenses

Multiple Form Number

Indirect Expenses

Area used exclusively for business

? Casualty losses

Total area of home

? Deductible mortgage interest

Total hours facility used (day care)

? Real estate taxes

Total hours available (if started or stopped day care in current year)

? Excess Mortgage interest

#### Part II Allowable Deductions

Direct Expenses

? Insurance

? Repairs and maintenance

? Casualty losses

? Utilities

? Deductible mortgage interest

? Other expenses

? Real estate taxes

#### Part III Depreciation of Home

? Excess Mortgage interest

Smaller of home's adjusted basis or its fair marked value

? Insurance

Value of land

? Repairs and maintenance

## **8839 – Form 8839**

### Qualified Adoption Expenses

#### Part 1

Child's First & Last Name

Child's Year of Birth

Born before 1986 and disabled =1

Special Needs Child =1

Foreign Child =1

Child's Social Security Number

Qualifying Expenses

#### Part III Employer-Provided Adoption Benefits

Total employer-provided adoption benefits received

## **8853 – Form 8853**

### Section A- Archer MSA

Taxpayer's Health plan is for Self-only

Taxpayer's Health plan is for Family

Spouse's Health Plan is for Self-only

Spouse's Health Plan is for Family

Spouse is policyholder

First Name of insured

Last Name of insured

Social security number of insured

Insured was terminally ill =1

### Section C- Long-term Care (LTC) Insurance Contracts

Accelerated death benefits received this year

## **2555 – Foreign Earned Income**

### Foreign Earned Income

Spouse =1

Post of Duty Code

Foreign Address (including country)

Name of Employer

Employer Address United States

Employer Address Foreign

Employer Type

Employer Type if Other, Specify

Last year (after 1981) Form 2555 was filed

Type of exclusion and tax year for which it was effective

Citizen of which country

Maintained a separate home for family because of adverse conditions - City and Country

Number of days maintained

Tax home location during the year

Date home was established

#### Part II Taxpayer Qualifying Under Bona Fide Residence Test

Date bona fide residence began

Date bona fide residence ended

Type of living quarters

Relationship of family member living abroad with taxpayer

Period of time family member lived abroad with taxpayer

Statement submitted to foreign country that Taxpayer is not a resident of that country 1= Yes

Taxpayer required to pay income tax to foreign country 1= No

If present in US or it's Possessions on Business during tax year

? Date Entered US

? Date Left US

? Days in US

? Earned income

Contractual terms relating to the length of employment abroad

Type of Visa which Taxpayer entered Foreign Country

Visa limited length of stay or employment in foreign country = 1

Address of US home maintained while living abroad

US home Rented =1

Name of occupants of US home

Relationship of occupants in US home

Part III Taxpayers Qualifying Under Physical Presence Test

Physical Presence test From

Physical Presence test Through

Principal country of employment

Name of Country

Date Arrived

Date Left

Days in Country

Business Days in US

Income Earned

Part IV All Taxpayers

Total wages, salaries, bonuses, commissions, etc.

Allowable share of income for services performed in a business

Allowable share of income for services performed in a Partnership

Partnership name, address, nature of income

Non-cash Income

? Home

? Meals

? Car

? Other properties or facilities- list

Allowances / Reimbursements

? Cost of living and overseas differential

? Family

? Education

? Home Leave

? Quarters

? Any other purpose - Specify

Other foreign Earned Income amount

Other foreign Earned Income specify

Total excludable meals and lodging

Part V Claiming Housing Exclusion and/or Deduction

Qualified housing expenses for the tax year

Number of days in qualifying period that fall within the current year tax year

Employer provided amounts

Part VII Claiming Foreign Earned Income Exclusion

Number of days in qualifying period that fall within the current year tax year

Part VII Claiming Housing Excl., Foreign Income Exclusion or Both

Deductions allowed that are allocable to excluded income

Part IX Claiming Housing Deduction

Housing deduction carryover from prior year

**8863 – Form 8863**

8863 Education Credits

First Name

Last Name

Social Security Number

Hope Credit =1

Lifetime Learning Credit =2

## **4562 – Assets – Asset Manager**

Force Options	Commuting Miles
Other Listed property	Vehicle Available for Personal Use
No Evidence to Support	Vehicle Used by More Than 5% Owner
No Written Evidence to Support Business Use	No Other Vehicle Available for Personal Use
Form #	Prohibit Employee Personal Use
Multiple Form Number	Prohibit Employee Personal Use Except Comm.
Federal Cost	Treat All Use of Vehicle as Personal Use
Federal Current Section 179	Provide More Than 5 Vehicles
Federal Prior Section 179	Meet Qualified Auto Demo Require
Basis Reduction (land other)	Provide Vehicle for Employee Use
Salvage Value	1=Increase Deduction Limits for Elec. Vehicle 1=No Limits
Federal Depreciation Method	Qualified Special Depreciation Allowances
Federal Convention	Asset Description
Fed prior Depreciation	Date Placed in Service
Override Current Depreciation	Sale Date of Disposition
Portion Attributable to Sec 263A	Business Use Percent
State Cost	Amortization Code Section
State Current Sec 179	Federal Useful Life
State Prior Sec 179	State Life or Class
State Salvage Value	AMT Class Life
State Method	Book Life or Class
State Prior Depreciation	Type
State Override Current Depreciation	TSJ Indicator
AMT Basis	Prior Special Depreciation
AMT Prior Depreciation	Number of Months in Short
AMT Override Current	Number of Deemed Months
Book Cost	Qualified Indian Reservation
Book Salvage Value	1=Qual. Enterprise Zone 2=Renewal Comm. Business
Book Method	1=IRS Tables, 2=DB/SSL
Book Prior Depreciation	1=150%DB, 2=200%DB(%MACRS)
Book Override Current Depreciation	Alternative Depreciation System
Business Miles	Delete This Asset
Total Vehicle Miles	

