Income: B1

Interest Income

Please provide all copies of Form 1099-INT or other statements reporting interest income.

T/S/J	Payer Name	Interest Income	Prior Year Information

Income: B3

Seller Financed Mortgage Interest

T, S, J ___ Payer's name _____ Payer's social security number _____

Payer's address, city, state, zip code _____ ___ _____

Amount received in 2026 _____ Amount received in 2025 _____

Income: B2

Dividend Income

Please provide copies of all Form 1099-DIV or other statements reporting dividend income.

T/S/J	Payer Name	Ordinary Dividends	Qualified Dividends	Prior Year Information

Income: D

Sales of Stocks, Securities, and Other Investment Property

Please provide copies of all Forms 1099-B and 1099-S.

T/S/J	Description of Property	Date Acquired	Date Sold	Gross Sales Price (Less expenses of sale)	Cost or Other Basis

Income: Income

Other Income

Please provide copies of all supporting documentation.

	2026 Information	Prior Year Information
State and local income tax refunds		

	T/S	Agreement Date	2026 Information	Prior Year Information
Alimony received				

	Taxpayer	Spouse	Prior Year Information
Unemployment compensation			
Unemployment compensation repaid			
Social security benefits			
Medicare premiums to be reported on Schedule A			
Railroad retirement benefits			

T/S/J		2026 Information	Prior Year Information
	Other Income:		

1040 Adj: IRA

Adjustments to Income - IRA Contributions

Please provide year end statements for each account and any Form 8606 not prepared by this office.

	Taxpayer	Spouse
Traditional IRA Contributions for 2026 -		
If you want to contribute the maximum allowable traditional IRA contribution amount, enter the applicable code: (1 = Deductible only, 2 = Both deductible and nondeductible)		
Enter the total traditional IRA contributions made for use in 2026		
Roth IRA Contributions for 2026 -		
Mark if you want to contribute the maximum Roth IRA contribution	☐	☐
Enter the total Roth IRA contributions made for use in 2026		

Educate: Educate2

Higher Education Deductions and/or Credits

Complete this section if you paid interest on a qualified student loan in 2026 for qualified higher education expenses for you, your spouse, or a person who was your dependent when you took out the loan.

T/S	Qualified student loan interest paid	2026 Information	Prior Year Information

Complete this section if you paid qualified education expenses for higher education costs in 2026.
Qualified education expenses include tuition and fees required for enrollment or attendance at an eligible educational institution.
Please provide all copies of Form 1098-T.

T/S	Ed Exp Code*	Student's SSN	Student's First Name	Student's Last Name	Qualified Expenses	Prior Year Information

***Education Expense Code: 1 = American opportunity credit; 2 = Lifetime learning credit; 3 = Tuition and fees deduction**
The student qualifies for the American opportunity credit when enrolled at least half-time in a program leading to a degree, certificate, or recognized credential; has not completed the first 4 years of post-secondary education; has no felony drug convictions on student's record.

1040 Adj: 3903

Job Related Moving Expenses

Complete this section if you moved to a new home due to service in the armed forces.

Description of move	
Taxpayer/Spouse/Joint (T, S, J)	
Mark if the move was due to service in the armed forces	☐
Number of miles from old home to new workplace	
Number of miles from old home to old workplace	
Mark if move is outside United States or its possessions	☐
Transportation and storage expenses	
Travel and lodging (not including meals)	
Total amount reimbursed for moving expenses	

1040 Adj: OtherAdj

Other Adjustments to Income

Alimony Paid:

T/S	Date*	Recipient name	Recipient SSN	2026 Information	Prior Year Information

Street address

City, State and Zip code

***Enter the divorce/separation agreement date**

	Taxpayer	Spouse	Prior Year Information
Educator expenses:			
Other adjustments:			

Itemized: A1

Medical and Dental Expenses

T/S/J		2026 Information	Prior Year Information
_	Medical and dental expenses		
_	Medical insurance premiums you paid***		
_	Long-term care premiums you paid***		
_	Prescription medicines and drugs		
_	Miles driven for medical items (Jan-Jun 20.5 / Jul-Dec 23.5 cents)		

***Do not include pre-tax amounts paid by an employer-sponsored plan, amounts paid for your self-employed business, or Medicare premiums entered on Form Lite-3

Itemized: A1

Tax Expenses

T/S/J		2026 Information	Prior Year Information
_	State/local income taxes paid		
_	2025 state and local income taxes paid in 2026		
_	Sales tax paid on actual expenses		
_	Real estate taxes paid		
_	Personal property taxes		
_	Other taxes		

Itemized: A2

Interest Expenses

T/S/J		2026 Information	Prior Year Information
_	Home mortgage interest From Form 1098		

Other home mortgage interest paid to individuals:

T/S/J	Payee's Name	SSN or EIN	2026 Information	Prior Year Information
_				

Address	City	State	Zip Code

T/S/J		2026 Information	Prior Year Information
_	Investment interest expense, other than on Sch K-1s:		

Refinancing Information:	Refinance #1	Refinance #2
T/S/J	_	_
Recipient/Lender name		
Total points paid at time of refinance		
Date of refinance		
Term of new loan (in months)		
Reported on Form 1098 in 2026	☐	☐

Itemized: A3

Charitable Contributions

T/S/J		2026 Information	Prior Year Information
_	Contributions made by cash or check		
_	Volunteer miles driven		
_	Noncash items, such as: Goodwill, Salvation Army		

Itemized: A3, A-St

Miscellaneous Deductions

T/S/J		2026 Information	Prior Year Information
_	Other expenses		
_	Gambling losses (enter only if you have gambling income)		

*****STATE USE ONLY - Complete the following fields only if you file a state return in AL, AR, CA, HI, MN, NY or PA**

T/S/J		2026 Information	Prior Year Information
_	Unreimbursed expenses***		
_	Union dues, other than amounts reported on Form W-2***		
_	Tax preparation fees***		
	Other expenses, subject to 2% AGI limitation***:		
_			
_			
_	Safe deposit box rental***		
_	Investment expenses, other than on Schedule(s) K-1 or Form(s) 1099-DIV/INT***		

General: Bank

Direct Deposit/Electronic Funds Withdrawal Information

Per IRS Security Summit requirements, verify the name of financial institution, routing transit number, account number , and type of account below. If you would like to have a refund direct deposited into or a balance due debited from your bank account(s), please enter information in the fields below. Note that electronic funds will be withdrawn only from the primary account listed below. In accordance with Executive Order 14247, the IRS has phased out paper checks for refunds and payments as of September 30, 2025. Failure to provide bank information will delay IRS processing of refunds.

Mark to verify all accounts listed below have been reviewed, updated as needed, and are correct. ☐

Primary account:

- Financial institution routing transit number
- Name of financial institution
- Your account number
- Type of account (1 = Savings, 2 = Checking, 3 = IRA*)
- Mark if married filing jointly and this is a joint account (Both taxpayer and spouse names are on the account) ☐
- Mark if financial institution is foreign based (Not located in the territorial jurisdiction of the United States) ☐
- Enter the maximum dollar amount, or percentage of total refund — Dollar _____ **or** Percent (xxx.xx) _____

Secondary account #1:

- Financial institution routing transit number
- Name of financial institution
- Your account number
- Type of account (1 = Savings, 2 = Checking, 3 = IRA*)
- Mark if married filing jointly and this is a joint account (Both taxpayer and spouse names are on the account) ☐
- Mark if financial institution is foreign based (Not located in the territorial jurisdiction of the United States) ☐
- Enter the maximum dollar amount, or percentage of total refund — Dollar _____ **or** Percent (xxx.xx) _____

Secondary account #2:

- Financial institution routing transit number
- Name of financial institution
- Your account number
- Type of account (1 = Savings, 2 = Checking, 3 = IRA*)
- Mark if married filing jointly and this is a joint account (Both taxpayer and spouse names are on the account) ☐
- Mark if financial institution is foreign based (Not located in the territorial jurisdiction of the United States) ☐
- Enter the maximum dollar amount, or percentage of total refund — Dollar _____ **or** Percent (xxx.xx) _____

*Refunds may only be direct deposited to established traditional, Roth or SEP-IRA accounts. Make sure direct deposits will be accepted by the bank or financial institution.

Electronic Filing: ID Auth

Identity Authentication

Taxpayer -

- Form of identification (1 = Driver's license, 2 = State issued identification card, 3 = No applicable identification, 4 = Identification not provided)
- Identification number
- Issue date
- Expiration date
- Location of issuance
- Document number (New York only)

Spouse -

- Form of identification (1 = Driver's license, 2 = State issued identification card, 3 = No applicable identification, 4 = Identification not provided)
- Identification number
- Issue date
- Expiration date
- Location of issuance
- Document number (New York only)

NOTES/QUESTIONS:

Estimated Taxes

If you have an overpayment of 2026 taxes, do you want the excess:

Refunded ___[53]

Applied to 2027 estimated tax liability ___[54]

Do you expect a considerable change in your 2027 income? (Y, N) ___[55]

If yes, please explain any differences:

_____[56]

_____[57]

_____[58]

_____[59]

Do you expect a considerable change in your deductions for 2027? (Y, N) ___[60]

If yes, please explain any differences:

_____[61]

_____[62]

_____[63]

_____[64]

Do you expect a considerable change in the amount of your 2027 withholding? (Y, N) ___[65]

If yes, please explain any differences:

_____[66]

_____[67]

_____[68]

_____[69]

Do you expect a change in the number of dependents claimed for 2027? (Y, N) ___[70]

If yes, please explain any differences:

_____[71]

_____[72]

_____[73]

_____[74]

Payment method used to pay your estimated taxes (1=Electronic Federal Tax Payment System (EFTPS); 2=Direct Pay) ___[75]

2026 Federal Estimated Tax Payments

2025 overpayment applied to 2026 estimates + _____[1]

Mark if you paid the calculated amounts on the dates due indicated below. Skip the remaining fields. ___[5]

If your estimated payments were not made on the date due or were for an amount other than the calculated amount below, please enter the actual date and amount paid.

	Date Due	Date Paid if After Date Due		Amount Paid	Calculated Amount	Method*
1st quarter payment	04/15/26	_____[6]	+	_____[7]		
2nd quarter payment	06/15/26	_____[8]	+	_____[9]		
3rd quarter payment	09/15/26	_____[10]	+	_____[11]		
4th quarter payment	01/15/27	_____[12]	+	_____[13]		
Additional payment		_____[14]	+	_____[15]		

***Method of payment indicated in prior year**

EFW = Electronic funds withdrawal **EFTPS = Electronic Federal Tax Payment System**

Voucher = Form 1040-ES estimated tax payment voucher

NOTES/QUESTIONS:

2026 State Estimated Tax Payments

Taxpayer/Spouse/Joint (T, S, J) [1]

State postal code [2]

Amount paid with 2025 return + [3]

2025 overpayment applied to ’26 estimates + [4]

Treat calculated amounts as paid [8]

	Date Paid		Amount Paid	Calculated Amount
1st quarter payment	[9]	+	[10]	
2nd quarter payment	[11]	+	[12]	
3rd quarter payment	[13]	+	[14]	
4th quarter payment	[15]	+	[16]	
Additional payment	[17]	+	[18]	

2026 City Estimated Tax Payments

City #1

City name [28]

Amount paid with 2025 return + [31]

2025 overpayment applied to ’26 estimates + [32]

Treat calculated amounts as paid [36]

	Date Paid		Amount Paid
1st quarter payment	[37]	+	[38]
2nd quarter payment	[39]	+	[40]
3rd quarter payment	[41]	+	[42]
4th quarter payment	[43]	+	[44]

Calculated Amount

1st quarter payment	
2nd quarter payment	
3rd quarter payment	
4th quarter payment	

City #2

City name [50]

Amount paid with 2025 return + [53]

2025 overpayment applied to ’26 estimates + [54]

Treat calculated amounts as paid [58]

	Date Paid		Amount Paid
1st quarter payment	[59]	+	[60]
2nd quarter payment	[61]	+	[62]
3rd quarter payment	[63]	+	[64]
4th quarter payment	[65]	+	[66]

Calculated Amount

1st quarter payment	
2nd quarter payment	
3rd quarter payment	
4th quarter payment	

City #3

City name [72]

Amount paid with 2025 return + [75]

2025 overpayment applied to ’26 estimates + [76]

Treat calculated amounts as paid [80]

	Date Paid		Amount Paid
1st quarter payment	[81]	+	[82]
2nd quarter payment	[83]	+	[84]
3rd quarter payment	[85]	+	[86]
4th quarter payment	[87]	+	[88]

Calculated Amount

1st quarter payment	
2nd quarter payment	
3rd quarter payment	
4th quarter payment	

City #4

City name [94]

Amount paid with 2025 return + [97]

2025 overpayment applied to ’26 estimates + [98]

Treat calculated amounts as paid [102]

	Date Paid		Amount Paid
1st quarter payment	[103]	+	[104]
2nd quarter payment	[105]	+	[106]
3rd quarter payment	[107]	+	[108]
4th quarter payment	[109]	+	[110]

Calculated Amount

1st quarter payment	
2nd quarter payment	
3rd quarter payment	
4th quarter payment	