

CODE- 4 TAX SERVICES

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PROFESSIONAL EDUCATOR/TEACHER DEDUCTIONS FOR TAX YEAR: _____

This form is to be used in conjunction with the General Information Worksheet. Please complete all information as thoroughly as possible. If sending supporting documentation, send photocopies only. Keep all receipts and documentation used to prepare this form in a safe location for 5-7 years. Please write legibly. Use separate sheet if needed.

NAME: _____ NEW CLIENT _____ RETURNING CLIENT _____ ADDRESS CHANGED? Y _____ N _____
ADDRESS: _____ PHONE: _____ E-MAIL: _____

PROFESSIONAL DUES

Union dues _____
Professional associations _____
Other associations _____
Prof. license renewals _____
Professional insurance _____

UNIFORMS/SCHOOL SPIRIT WEAR

(Note: this category is only deductible if the clothing items are logo'd or designed such that it is not reasonable to wear them outside of work.)

Boots/shoes _____
Lab jackets/smocks _____
Logo shirts/hats _____
Dry cleaning/laundry _____
(include uniforms/logo wear only)
School Uniforms _____
Tailoring/alterations _____

SUBSCRIPTIONS / PUBLICATIONS

Magazines/subscriptions _____
Teaching journals/resources _____
Reference books _____
Software/downloads _____
Training materials _____
Apps _____

JOB SEEKING EXPENSES

Airfare/auto rental _____
Lodging/parking _____
Resume/transcripts _____
Meals _____

HOME OFFICE

Please use the Home Office Worksheet

CLASSROOM EQUIPMENT / SUPPLIES

Equipment:
Laptop/computer _____
Ipad/Ipod/Tablet _____
Accessories _____
Projector/display equipment _____
Camera & equipment _____
Accessories & supplies _____

Other supplies:
Lab ear/eye protection _____
Gloves/protective wear _____
Carry cart/supply organizers _____
Classroom supplies _____
Classroom organizers/furn. _____
Daytimer/planner _____
Printing/copies/binding _____
Software _____
DVDs/CDs/Tapes _____
Books for classroom _____
Other/miscellaneous _____

Were any of the items above reimbursed or did you receive any stipends, grants or other money used to purchase these items?

Y _____ N _____

If Yes, what amount did you receive? \$ _____

Cell phone purchase _____
Percentage business use _____ %
Cell phone service _____
Cell phone accessories _____
Internet service (total per yr) _____
Percentage business use _____ %

EDUCATION/TRAINING/ CONFERENCE EXPENSES

(Attach any 1098-T Forms received.)

Is education work-related? Y _____ N _____
Books, papers, pens _____
Parking fees _____
Tuition/Registration/fees _____
Hotel/out of pocket _____
Lab fees/supplies _____

(Note: please indicate if education expenses are for spouse or dependent. If more than one person, list costs separately for each person.)

AUTO MILEAGE

(Indicate if miles are by week, month or year)

Commuting _____ per _____
Non-Business/Personal miles _____

Business:

Meetings/other asgnmts _____ per _____
Supplies stores _____ per _____
Job-seeking _____ per _____
Education Miles _____ per _____
Conference Miles _____ per _____

Code-4 Tax Services e-file & payment policy:

Returns will be e-filed at no extra charge. E-files will not be submitted until signed acknowledgment & payment are received. Payment can be made by cash, check, Visa, Mastercard, Discover, American Express or Square Cash transfer. Mail-in Clients: a secure pay link will be sent to you if you prefer to pay by credit card.