

AMR Tax Services, Inc.

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www.amrtax.com
January 01, 2015

Dear Friends,

Thank you all so much for a successful tax season last year. Each year brings new growth and possibilities. This is another exciting year and we look forward to seeing you.

AMR would like to congratulate Vickie Briscoe for passing the IRS Special Enrollment Exam. Adam and Vickie are both an **Enrolled Agent**. Being an Enrolled Agent, they can represent anyone for any reason before the IRS.

The 2014 tax year has the most changes of any recent year. Chief among these are the requirements of the Affordable Care Act. We will need proof of insurance for each person listed on your return. **Your insurance card is NOT proof.**

The word from IRS, is tax filing will begin on January 20, 2015. We sure hope so...We believe with all the changes this year, significant delays in processing are bound to happen. In addition.....IRS is conducting extensive identity theft checks this year. We believe this will result in further delays in processing. The IRS Commissioner is on record saying we will have a “miserable” tax filing season.

We (AMR) have many additional compliance requirements and may need to make additional copies of your records. We will need to make a copy of your ID. Be sure to bring a copy of your spouse’s ID if they are not coming to the appointment. Please help us by taking the time to fill out a worksheet even if you have not in the past.

We have online booking available through our website. For those we served last year, you are already registered. You can log in using your last name as the user name and your house number as the password or you may use the user name and password you have created. When you book online you will receive a confirmation e-mail and a reminder the day before your appointment. Please refer your friends to our web site: www.amrtax.com .

AMR Tax Services, Inc. is an Authorized E File Provider and we are **REQUIRED** to E-File all our returns. Please be sure to verify the names and social security numbers on your return. The IRS verifies these on all returns. If these items are wrong, there could be a delay in the amount of time it takes you to receive your refund. **EARNED INCOME CREDIT RECIPIENTS SHOULD BE AWARE THE IRS IS EXPANDING THE EIC VERIFICATION CHECKS. THIS COULD RESULT IN A DELAY IN THE REFUND FOR EARNED INCOME CREDIT.** If you owe any amounts to the IRS or Oklahoma Tax Commission, you have until April 15, 2014 to pay even though your return has already been filed.

We look forward to seeing you during this filing season. Please book your appointments in advance whenever possible. Use our online scheduling at www.amrtax.com .

Respectfully,

Adam W Roberts

Adam Roberts EA
President

| DEPENDENTS | | | | |
|------------|-----|--------------|------------|-----------------|
| Name | SS# | Relationship | Birth-date | College Tuition |
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DON'T FORGET AMR'S REFERRAL PROGRAM. **CASH BACK** TO YOU FOR YOUR REFERRALS
NO COUPON REQUIRED.

List **INTEREST** and/or **DIVIDEND** income by source and amount (Please Bring The 1099 Forms):

_____ \$ _____ \$ _____ \$ _____

List **Other Income:** _____ \$ _____

List **UNEMPLOYMENT COMPENSATION RECEIVED**.....Husband or Single \$ _____ Wife..... \$ _____

List **SOCIAL SECURITY BENEFITS RECEIVED**..... Husband or Single \$ _____ Wife.....\$ _____

List amounts **contributed** to **IRA ACCOUNTS** Husband or Single \$ _____ Wife.....\$ _____

Check Box if you **Itemized Your Deductions** last year..... ☐

Student Loan Interest Paid.....\$ _____

MEDICAL EXPENSES: Please **DO NOT** include amounts paid by **PRE-TAX PAYROLL DEDUCTION**. (Cafeteria Plan)
Did you have Medical Insurance? We will need proof of coverage. Your insurance card is NOT proof of coverage.

PRESCRIPTION DRUGS \$ _____ HOSPITALIZATION INS. \$ _____ DENTAL \$ _____
EYE GLASSES..... \$ _____ HOSPITALS \$ _____ DR. _____ \$ _____
MISCELLANEOUS..... \$ _____ DR. _____ \$ _____ MEDICAL EQUIPMENT \$ _____

TAXES PAID:

REAL ESTATE TAX..... \$ _____ EXCISE TAX \$ _____ \$ _____
ADDITIONAL STATE TAX PAID WITH LAST YEARS RETURN \$ _____ \$ _____

HOME MORTGAGE INTEREST (List Mortgage Company or individual and amount)

_____ \$ _____ \$ _____ \$ _____

CHARITABLE DONATIONS (List Non-Profit Organization and amount)

CHURCH..... \$ _____ \$ _____ \$ _____
UNITED WAY/CFC.....\$ _____ \$ _____ \$ _____

MISCELLANEOUS EXPENSES

UNION DUES..... \$ _____ PROF. BOOKS..... \$ _____ TOOLS FOR JOB..... \$ _____
SAFETY SHOES \$ _____ GLOVES..... \$ _____ UNIFORM EXPENSES.... \$ _____
PROF. EDUCATION..... \$ _____ SAFE DEPOSIT BOX..... \$ _____ TAX SERVICE FEE..... \$ _____

TRAVEL OR AUTO EXPENSES INCURRED ON YOUR JOB

MOTELS & AIRFARE.....\$ _____ CAR RENTAL.....\$ _____ TOTAL MILEAGE..... _____
MEALS (ACTUAL AMOUNT OR NUMBER OF DAYS AWAY)..... \$ _____ BUSINESS MILEAGE.... _____
LONG DIST/CELLULAR...\$ _____ INSURANCE, REPAIRS, GAS, OIL, ETC..... _____
PARKING & TOLLS \$ _____ LOCAL TRANSPORTATION (Taxi, Bus, Train, etc).....\$ _____

ENERGY EFFICIENT HOME IMPROVEMENTS:

WINDOWS.....\$ _____ STORM DOORS.....\$ _____ HIGH EFFICIENCY HVAC SYSTEM (16 SEER OR BETTER).....\$ _____
INSULATION.\$ _____ OTHER.....\$ _____ HIGH EFFICIENCY WATER HEATER (16 SEER OR BETTER)..\$ _____

CHILD CARE EXPENSESLIST NAME, ADDRESS, SOCIAL SECURITY NO. OR FEDERAL ID NO. OF PROVIDER AND AMOUNT PAID

LIST AMOUNTS PAID THROUGH **PRE-TAX PAYROLL DEDUCTION**...(CAFETERIA PLAN)\$ _____

| NAME | ADDRESS | ID NUMBER | AMOUNT PAID |
|------|---------|-----------|-------------|
| | | | |
| | | | |
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RENTAL INCOME AND EXPENSES (Worksheet available if more than one property)

INCOME COLLECTED...\$ _____ LEGAL EXPENSE\$ _____ REAL ESTATE TAXES..... \$ _____
ADVERTISING..... \$ _____ UTILITIES..... \$ _____ MORTGAGE INTEREST \$ _____
TRAVEL EXPENSES..... \$ _____ REPAIRS..... \$ _____ CLEANING & MAINT.... \$ _____
INSURANCE..... \$ _____ SUPPLIES..... \$ _____ _____ \$ _____