

SILBEREICH AND ASSOCIATES, INC.
4444 W. Riverside Drive, Suite 200
Burbank, CA 91505

2025 INCOME TAX ORGANIZER

**It is important to provide our office with all tax documents
including any correspondence from the Government.**

**Information received less than 10 days prior to any deadlines will require an extension to be filed.
Extensions and vouchers will be provided for any taxes due.**

Standard Deductions - now
\$23,625 (Head of Household)
\$31,500 (MFJ) \$15,750 (Single)

FBAR - Statements due for Electronic
filing by April 15, 2026, Foreign bank
accounts totaling over \$10,000.

Retirement Plan Distribution - Required
minimum distribution starts at 73.

IRA - \$7,000, Over 50 - \$8,000,
60-63 \$10,000.

Mortgage Interest - is limited on loans
over \$750,000.

Medical Exclusions - will be 7.5% for
all taxpayers.

Home Equity Loans - interest
deductible only for remodeling.

New Car Loan Interest - up to 10K can
be deducted for cars assembled in the
US (MAGI under \$500K for MFJ)

Electric Vehicle Credit - Up to \$7,500
(New) \$4,000 (Used) 30% of sale price.
Purchased by 9/30/25.

1099K will be issued - for sales over
\$20K to Venmo, Paypal etc.

Child Care - The name of the provider,
the Tax ID number, address and phone
numbers are necessary.

Gambling Income - can only be offset
by up to 90% of losses.

Foreign Income - up to \$130K can be
excluded if out of the US for 330 days.

Itemize Deductions - for state, local &
property taxes limited to \$40,000 (All
property taxes for rentals have no
limitations)

Gifts - \$19,000 per year are allowable.
No tax consequences.

Charitable Donations up to 50% of
AGI, must itemize. Contributions must
be photographed, receipted and verified
in good condition. Any check over \$250
must have a letter from the charity
indicating no value received in return.

Bonus Depreciation - up to 100% of
cost.

The IRS does NOT send e-mail
messages. So do not reply to emails with
confidential information.

Solar Credit - 30% in 2025.

Energy - Credit up to \$1,200.

Distributions for Personal Emergencies -
up to \$1,000 with no penalty.

IRS Identity PIN - If you received an IRS
PIN we need that information.

Covered California 1095A - Please
provide to our office with tax documents.

Business Miles - 67 cents/mile.

Business Meals - 50% Deductible.

Qualified Office in home - can use \$5 per
square foot, up to \$1,500 as a deduction.

**Partnerships & S-Corp Returns are due
3/16/2026**

Reminder Extensions are for extending
the time to file your tax returns, **NOT** an
extension to pay your taxes and are
invalid if the money for the tax liability is
not paid by April 15, 2026. There is a \$30
filing fee.

**Tax Results: Please do not call the office
for your tax results. We do not give this
information out over the phone or by fax**

**IRS refunds are only processed through Direct Deposit.
Please supply bank account and routing number.**

If you have 1099 income & file a Schedule C
business expenses are still deductible.

If you live in the city of LA and have a business
license, the form is due by Feb. 28, 2026

**Please Note: In completion of your tax preparation, you will receive 8879 forms which
must be signed and returned to our office, before we are able to electronically file your return.**

PLEASE MAKE YOUR APPOINTMENT EARLY

PHONE: (818) 841-5775

FAX: (818) 841-5949

EMAIL: Al@ourtaxman.pro

**THE FRIENDSHIP OF THOSE WE SERVE IS THE FOUNDATION OF OUR PROGRESS.
PAYMENT IS REQUIRED WHEN RETURNS ARE COMPLETED
PAYMENTS ACCEPTED IN CASH OR CHECK ONLY.**

THE FOLLOWING CHECKLIST COULD LEAD TO HELPFUL DEDUCTIONS
PLEASE CHECK AND PROVIDE SUPPORTING INFORMATION.

<input type="checkbox"/>	<input type="checkbox"/>	Did any of your children have any income? Please provide income statements.
<input type="checkbox"/>	<input type="checkbox"/>	Did you forfeit any interest from closing a time deposit account?
<input type="checkbox"/>	<input type="checkbox"/>	Does anyone owe you money which has become a bad debt? It become8s a bad debt if bankruptcy is declared or you obtain a legal Judgment against them.
<input type="checkbox"/>	<input type="checkbox"/>	Did you sell any securities or property or have any become worthless? (see section H)
<input type="checkbox"/>	<input type="checkbox"/>	Did you have child or dependent care or household expenses to enable you to work or attend school full time? (Complete Section C)
<input type="checkbox"/>	<input type="checkbox"/>	Did you have any income or loss from pensions, annuities, estates, partnerships or any other sources? Please have statements available. (Complete Section G.)
<input type="checkbox"/>	<input type="checkbox"/>	Did you pay estimated tax? (See Section D)
<input type="checkbox"/>	<input type="checkbox"/>	Did you pay additional State Tax last April 15 th ? Amount \$
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive a distribution from a pension or profit sharing plan?
<input type="checkbox"/>	<input type="checkbox"/>	Do you have a foreign bank account? Bring Year End Statement
<input type="checkbox"/>	<input type="checkbox"/>	Are you or your spouse permanently or totally disabled?
<input type="checkbox"/>	<input type="checkbox"/>	Did you refinance your home? (See Section J)
<input type="checkbox"/>	<input type="checkbox"/>	Did you pay court ordered alimony? If yes, amount paid: \$ _____ Final Date Paid to whom: _____ Social Security # _____
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive overtime income?

A. PERSONAL * Only PINS sent from the IRS should be listed & provided	
Your Name _____	
Occupation: _____	*IRS PIN _____
SS No _____	DOB _____
Email _____	
Spouse Name _____	
Occupation: _____	*IRS PIN _____
SSN _____	DOB _____
Email _____	
Street: _____	
City: _____	State: ____ Zip: _____
Phone (____) _____	Work (____) _____

B. CHILDREN & DEPENDENTS List all unmarried children supported by you.			
Name	SS #	Age	DOB

PLEASE HAVE THE FOLLOWING AVAILABLE FOR YOUR APPOINTMENT
LAST YEAR'S TAX RETURN (IF YOU ARE A NEW CLIENT)
RECORDS OF ALL OTHER INCOME
BUSINESS OR RENTAL INCOME AND EXPENSES
ESCROW STATEMENT FOR PROPERTY BOUGHT OR SOLD
MEDICAL CARDS & HEALTH PREMIUMS
ALL W-2's AND 1099's

C. CHILD & DEVELOPMENT CARE				
Paid person (name & Address) SS# Fed. ID #	Relation - ship	Dates From	To	Amount paid

D. ESTIMATED TAXES PAID FOR THIS YEAR			
	Date	Federal	State
Prior Year Credit			
First Quarter			
Second Quarter			
Third Quarter			
Fourth Quarter			

E. INTEREST INCOME	
SOURCE (Please have statements available)	AMOUNT

F. DIVIDENDS RECEIVED	
SOURCE (Please have statements available)	AMOUNT

G. OTHER INCOME (LIST ALL SOURCES)	
SOURCE (Please have statements available)	AMOUNT
State Income Tax Refunds Received	
Alimony Received	
Unemployment Compensation	
Workman's Comp. or SDI (non taxable)	
Social Security	
Non Reported Tips	

How do you want to receive a copy of your return?	
PICK ONLY ONE	PDF Hard Copy

All information submitted herewith is supported by my records

SIGNATURE

H. SECURITIES & PROPERTY SOLD				
Bring in Brokerage Year End Statements				
DESCRIPTION	DATE AQUIRED	DATE SOLD	SELLING PRICE	ORIGINAL PRICE

IRA CONTRIBUTION \$ _____
 KEOGH PLAN \$ _____
 ROTH IRA CONTRIBUTION \$ _____
 SEP/IRA \$ _____

I. MEDICAL EXPENSES	AMOUNT
Hospital & Medical/Dental Insurance Premiums	
Medicare Insurance Premiums (w/h from S.S.)	
Prescription Drugs	
Other Medicines (for specific illnesses)	
DRS Total	
Travel for Medical Purposes _____ Miles	
Parking Fees (for medical reasons)	
Taxi _____ Bus _____ Plane _____	
Ambulance	
Phone Calls to Dr, Hospitals, Etc. (Toll)	
Medical Equipment	
X-Ray	
Lab (Not included with Dr. & Hosp.)	
Glasses _____	
Hearing Aids _____ Batteries _____	
Special Therapy _____	
Insurance Reimbursement	

J. TAXES PAID	AMOUNT
Real Estate Home _____	
Other _____	
Auto License Fees (incl.trailer,cycle etc)	
(1)_____ (2)_____ (3)_____	
(4)_____ (5)_____ (6)_____	
Personal Property Tax (Boat, Plane, Etc...)	
Sales tax can be used instead of State W/H	

Your January statement will indicate total interest paid for the year.

K. INTEREST PAID – PERSONAL	AMOUNT
If interest is unstated on an installment purchase, please have the original contract available.	
Home Mortgage	
2 nd Mortgage	
Points paid on new home loan	
Points paid on refinancing	
(Term of Loan _____ Years) Bring in statement.	

L. CONTRIBUTIONS	Cash (receipted)	Cash (non receipted)	Value (of gross)
Church			
Cash Contributions			
Non Cash Contributions			
Other			
Expenses with charitable organization Explain			
Travel for charitable work			

M. SELF EMPLOYED INCOME (schedule C)		AMOUNT	
Gross Income			
Returns and Refunds			
Cost of Inventory at Beginning of the Year			
Cost of Merchandise Purchased			
Cost of Items for Personal Use			
Cost of Inventory at End of Year			
EXPENSE	AMOUNT	EXPENSE	AMOUNT
Accounting		Payroll Taxes	
Advertising		Postage	
Bank Charges		Property Taxes	
Capital Purch		Bus. Meals	
Commissions		Rent	
Dues		Repairs	
Education		Sales Tax	
Entertainment		Supplies	
Freight		Telephone	
Insurance		Utilities	
Interest		Wages	
Janitorial		Other _____	
Legal		Auto Expenses	
Licenses		Office Supplies	
Maintenance		Travel	

N. TRAVEL & BUSINESS EXPENSES (Schedule C)			
Total Business Miles Driven (see Note 1)			
Total Miles Driven, Personal & Business			
Parking Fees & Tolls			
AUTOMOBILE EXPENSES (If using actual expenses)			
Gasoline, Oil, Lubrication			
Insurance			
Interest or Lease Payments			
License & Tax			
Repairs, Tires, Batteries, Etc.			
Wash & Wax			
OTHER TRAVEL EXPENSES (See note 2)			
Air Fair		Auto Rental	
Lodging & Tips		Local Trans	
Meals & Tips		Other _____	
HOME OFFICE EXPENSES (If qualified) (See Note 3)			
Square Footage Office			
Total Square Footage of Home			
Utilities		Rent	
Insurance		Other _____	

O. RENTAL INCOME & EXPENSE

If property was purchased or converted this year have escrow statement & county tax bill available.

Property	ADDRESS		
1			
2			
3			
Property	1	2	3
Income			
Advertising			
Auto Travel			
Cleaning			
Gardening & Landscaping			
Insurance			
Interest (1)			
Interest (2)			
Condo or Mgmt. Fees			
Repairs – Carpentry			
Electrical			
Paint & Decoration			
Plumbing			
Roofing			
Misc. Repairs			
Supplies			
Property Taxes			
Telephone			
Utilities			
Other			
REPLACEMENTS: Furniture, Appliances, Carpets, Drapes, Major Repairs or Improvements		LIST IN SECTION (P) BELOW	

**P. BUILDINGS, VEHICLES, EQUIPMENT ETC.
PURCHASED FOR BUSINESS**

DESCRIPTION	DATE PURCH	COST

O. MISCELLANEOUS

AMOUNT

Meal Penalties	
Union Dues	
Tools used in Trade or Business	
Safety Equipment	
Uniform (purchase cost)	
Uniform Upkeep (Cleaning and Repairs)	
Professional Dues, Fees, Etc	
Business Journals, Books , Etc	
Travel to Professional Meetings	
Travel between 1 st . & 2 nd . job	
Telephone (business toll calls only)	
Employment Related Schooling:	
Tuition_____ Parking_____ Supplies_____	
Books_____ Miles from job to school_____	
Job Seeking Expenses (in same field):	
Travel _____(mi) Employment Fees _____	
Resume _____ Toll Calls _____ Air Fare _____	
Food/Lodging (away f/home)(2) _____ Other _____	
Last Years Tax Preparation Fee	
Safe Deposit Box	
Investment Expense	
Automobile Expense	
Business Meals	
Other _____	
Other _____	

QUESTIONS YOU MAY HAVE

[illegible]