

PRO-P1 Moore Review Guide

Intake Sheet, page 4, Section B:

1: No-All	2: No-All	3: No-All	4: Yes – All	5: Yes – All
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E-file created

AGI: \$60,720

Refund/(Amount owed): \$6,156

Diagnostic:

Warnings :There is a refund on the tax return and no direct deposit information has been filled in. Is this correct? (W49)

Overridden Entries:

[Overridden Entry 'ADDRESS' on 'Wage and Tax Statement'](#)
[Overridden Entry 'ZIPCODE' on 'Wage and Tax Statement'](#)
[Overridden Entry 'CITY' on 'Wage and Tax Statement'](#)
[Overridden Entry 'STATE' on 'Wage and Tax Statement'](#)
[Overridden Entry 'FORADDR' on 'Wage and Tax Statement'](#)
[Overridden Entry 'FORCITY' on 'Wage and Tax Statement'](#)
[Overridden Entry 'FORSTATE' on 'Wage and Tax Statement'](#)
[Overridden Entry 'FORZIP' on 'Wage and Tax Statement'](#)
[Overridden Entry 'FORCODE' on 'Wage and Tax Statement'](#)
[Overridden Entry 'LINE-3' on 'Wage and Tax Statement'](#)
[Overridden Entry 'LINE-4' on 'Wage and Tax Statement'](#)
[Overridden Entry 'LINE-5' on 'Wage and Tax Statement'](#)
[Overridden Entry 'LINE-6' on 'Wage and Tax Statement'](#)
[Overridden Entry 'LINE-16A' on 'Wage and Tax Statement'](#)

Estimated Entries: Dependent on Template used to create return

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TW Screen	Payee/Name/Line	Comment/Reference
Main Info	Address	% line NOT filled in
	Filing Status	Qualifying widow(er)
	Dependents	Best Practice: list in order of age, youngest first (Deloris, Edna, Ronald) Last name of dependent may be omitted if same as primary taxpayer.
1040 Pg 1	Line 21	"GAMBLING WINNINGS"
A Detail	Insurance premiums paid / Taxpayer	1,200 Note: 660 pre-tax should NOT be shown here
Interest Stmt	York Municipal Bonds	NAEOB = E, NAEOB Amount = 450 No entry in Box 1 or 3 & No state adjustments
Sch EIC	All	4a for Ronald is Yes. No other 4a or 4b questions answered.
Sch EIC Wkt	All	Unnecessary questions unanswered e.g. 4b, 9b, 9c, 9d
W-2	Hawthorn General Hospital	Best Practice: Fix address (even if AVE -> AVENUE)
		Take calculations off 3, 4, 5, 6 is CHECKED Lines 3 & 5: 37,622; Line 4: 1,580; Line 6: 543 Take calculations off of line 16 is CHECKED
		Line 13 – Retirement Plan Box Checked
		Line 14: NJSDI 61 NJSUI 129 NJFLI 24
		Line 15: NJ; line 16: 36,625; line 17: 725
W-2G	Gambling losses	2,000
1099-R	OPM Pension	Line 5 = 1,200 No entries in Simplified Method section
1099-R	Northern Financial Services	No entries in Simplified Method section Line 4: 500 Line 12: 100 Line 13: 238XXXXXX
5329 TP 1	Northern Financial Services	Line 2: Code: 08, Amount: 5,000
8863	Univ of Columbus 1098-T amount in box 1	Best Practice: Scratchpad with: Payments: 16,900; Minus scholarship: -10,000; Minus adj for 4,000 limit: -2,900 = 4,000
All	TSJ boxes	Either T or blank

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New Jersey

Form	Payee/Name/Line	Comment/Reference
NJ 1040 Pg1	County/Municipality code	0710
NJ 1040 Pg 2	Line 11 [Dependents attending colleges]	0 Ronald is not under age 22
	Line 13c [Dependent's information]	Check for Ronald in Dependent does not have health insurance. This must be entered on NJ Dep Wkt
	Gubernatorial Fund	Taxpayer: No
	Line 28 [NJ Gross Income]	56,484
	Line 30 [Medical expenses]	730 (660 after-tax ins added via scratch pad)
	Line 37a [Total Property Taxes Paid]	1,728 [From Worksheet F]
NJ 1040 Pg 3	Line 37c [Property Tax Deduction]	0 [From Worksheet F]
	Line 38 [NJ Taxable Income]	50,254
	Line 48 [Total NJ Income Tax Withheld]	825
	Line 49 [Property tax credit]	50 [From Worksheet F]
	Line 66 [Refund]	63
	Worksheet F, Line 1, Rent you paid...	9,600
NJ Dep Wkt	Ronald Moore	Check if Dep does not have health ins
NJ DD Wkt	Direct Deposit and Direct Debit . . .	Check to have check mailed
NJ IRA Wkt	Enter copy number...	1
	Line 1	45,000
	Line 4a	20,000
	Part II	No entries