

# Barton-Ross

## A Financial Services Firm

### *Tax · Investments · Insurance*

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The filing of a tax extension **DOES NOT** provide taxpayers with an extension of time to pay their taxes. **IT ONLY** provides an extension of time to file the tax returns. The purpose of the extension worksheet is to determine if you have any potential tax liabilities due on April 18. Keep in mind that the accuracy of the extension estimates are dependant on the accuracy of the information that you provide on this form. At the time your tax returns are filed, if it is determined that there is additional tax due, interest and penalties will apply to your subsequent payment.

## **Worksheet For Extensions: PLEASE SEND ALL COPIES OF W-2's AND 1099's**

Name: \_\_\_\_\_ S.S.#: \_\_\_\_\_ Address: \_\_\_\_\_  
 Spouse: \_\_\_\_\_ S.S.#: \_\_\_\_\_  
 Home T: \_\_\_\_\_ Office T: \_\_\_\_\_ Mobile: \_\_\_\_\_  
 # 1 E-mail: \_\_\_\_\_ Spouse O T: \_\_\_\_\_ Spouse M T: \_\_\_\_\_  
 Additional E-mail Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Dependents Name:	Birth Date	S.S. #	Relation	Months @ Home	F/T Student
_____	_____	_____	_____	_____	Y ___ N ___
_____	_____	_____	_____	_____	Y ___ N ___

### **Employee's Wages (W-2's):**

	Self	Spouse
Wages	_____	_____
Federal Tax	_____	_____
State Tax	_____	_____

### **Self Employment/Business Income (1099's):**

	Self	Spouse
Gross Income	_____	_____
Est. Expenses	_____	_____

### **Estimated Tax Payments:**

	Federal	State
4/18/2022	_____	_____
6/15/2022	_____	_____
9/15/2022	_____	_____
1/17/2023	_____	_____

### **Ministers:**

Parsonage	Yes ___ No ___
Housing Allowance	_____
Est. Housing Expense	_____
Est. Ministry Expense*	_____
(Excluding Mileage)	
Est. Ministry Mileage*	_____
<i>*Unreimbursed</i>	

### **Deductions:**

Real Estate Taxes	_____
Mortgage Interest	_____
Medical	_____
Contributions	_____

### **Other Income:**

Interest	_____
Ordinary Dividends	_____
Capital Gains	_____

Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_

### **Notes:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## **AFFORDABILITY CARE ACT (ACA)**

The penalty for failure to comply with the ACA was eliminated in 2019. However, any taxpayer that received financial assistance through a government health insurance exchange must still include the 1095-A (Health Insurance Marketplace Statement) figures on their personal tax return.

Did you or anyone in your household purchase health insurance through Covered California or any other government exchange? Yes  If Yes, please provide form 1095-A.

If you or anyone in your household purchased health insurance through Covered California please provide form 3895.

**Taxpayers can view their online account** . . . allowing them to access the latest information available about their federal tax account and most recently filed tax return through a secure and convenient tool on IRS.gov. This can help taxpayers if they need information from last year's return.

In the coming weeks, individuals with an account on IRS.gov/account will be able to view the latest information available about their federal tax account.

Visit "Secure Access: How to Register for Certain Online Self-Help Tools\*" for more information about how to create an account or how to reset the username or password.

\*(<https://www.irs.gov/individuals/secure-access-how-to-register-for-certain-online-self-help-tools>)