

INCOME TAX DATA-ITEMIZER

Taxpayer's name _____	Soc. Sec. No. _____	
Spouse's name _____	Soc. Sec. No. _____	
Taxpayer's occupation _____	Birthdate _____	Blind? _____
Spouse's occupation _____	Birthdate _____	Blind? _____
Address _____		
Phone _____		
Estimated taxes pd. Federal _____	State _____	Local _____

DEPENDENTS

Name	Soc. Sec. No.	Birthdate	Relationship
1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____
4) _____	_____	_____	_____
<i>Income</i>	<i>Support by you</i>	<i>Support by others</i>	<i>Months in your home</i>
1) \$ _____	\$ _____	\$ _____	_____
2) \$ _____	\$ _____	\$ _____	_____
3) \$ _____	\$ _____	\$ _____	_____
4) \$ _____	\$ _____	\$ _____	_____

NOTE: You must provide a Social Security Number for all dependents.

THINGS TO BRING

____ W-2s	____ 1099-INTs	____ 1099-DIV	____ Other 1099s
____ K-1s	____ Tax forms with labels	____ Property tax bill	____ Last year's tax return

INTEREST INCOME (if not on 1099-INT)			DIVIDEND INCOME (if not on 1099-DIV)		
H/W/Jt	Payer	\$	H/W/Jt	Payer	\$

RENTAL INCOME AND EXPENSE

Total rent received _____	
Expenses – Taxes _____	
Utilities _____	
Interest _____	
Insurance _____	
Auto mileage _____	
Repairs _____	
Supplies _____	
Other _____	

SALE OF STOCK OR OTHER PROPERTY	Cost	Sales Price

Please bring supporting documents

OTHER INCOME

If you have other income, please bring all figures and supporting data. Examples:

Tips _____
Child care _____
Pensions / annuities _____
Jury duty _____
Strike benefits _____
Unemployment (1099-G) _____
Alimony received _____
Prizes (1099-MISC) _____
Farming _____
Self-employment _____
Partnerships and S corporations _____
Estates & trusts _____
Social security benefits _____
Scholarships & fellowships _____
Tax refunds _____
Royalties _____
Nontaxable income _____
Gambling _____
Other _____

