

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)			

Income	Support by you	Support by others	Months in your home
1) \$	\$	\$	
2) \$	\$	\$	
3) \$	\$	\$	
4) \$	\$	\$	

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

THINGS TO BRING

- | | | | |
|-------------------------------|--|--|---|
| <input type="checkbox"/> W-2s | <input type="checkbox"/> 1099-INTs | <input type="checkbox"/> 1099-DIV | <input type="checkbox"/> Other 1099s |
| <input type="checkbox"/> K-1s | <input type="checkbox"/> Tax forms with labels | <input type="checkbox"/> Property tax bill | <input type="checkbox"/> 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 _____	_____
