

TAX RETURN DATA

Check box if your name, address, or occupation has changed since last year.

Taxpayer's Name		Soc. Sec. No.
Spouse's Name		Soc. Sec. No.
Taxpayer's Occupation	Age as of Dec. 31st	Blind?
Spouse's Occupation	Age as of Dec. 31st	Blind?
Address		
City	State	Zip Phone
QUARTERLY ESTIMATED TAX PAID (Bring cancelled checks)		Federal \$ State \$

DEPENDENT CHILDREN

NAME (FIRST, INITIAL, LAST)	AGE	SOCIAL SECURITY NUMBER	RELATIONSHIP	# of months lived in your home during year

OTHER DEPENDENTS

NAME	SOCIAL SECURITY #	MONTHS IN YOUR HOME	RELATIONSHIP	INCOME	SUPPORT BY YOU	SUPPORT BY DEPT. & OTHERS

NOTE: You MUST provide a social security number for dependents who are age 1 or older as of December 31.

H = Husband
W = Wife
J = Jointly Owned

INCOME

Please bring last year's tax return if new client, and W-2 forms, tax forms with labels, 1099's for interest, dividends, and other income.

H - W - J	PAYER OF INTEREST INCOME	AMOUNT	

H - W - J	PAYER OF DIVIDEND INCOME	AMOUNT	

RENTAL INCOME & EXPENSE

Total Rent Received \$ _____
 Expenses - Auto \$ _____
 Insurance \$ _____
 Interest \$ _____
 Repairs \$ _____
 Supplies \$ _____
 Taxes \$ _____
 Utilities \$ _____

List Other: _____

OTHER INCOME

If you have other income, please check the appropriate box and bring all figures and supporting data.

- | | |
|---|--|
| <input type="checkbox"/> Alimony Received | <input type="checkbox"/> Prizes/Awards |
| <input type="checkbox"/> Child Care | <input type="checkbox"/> 1099 Misc. |
| <input type="checkbox"/> Estates & Trusts | <input type="checkbox"/> Royalties |
| <input type="checkbox"/> Farming | <input type="checkbox"/> Scholarships |
| <input type="checkbox"/> Fellowships | <input type="checkbox"/> Self-Employed |
| <input type="checkbox"/> Gambling Winnings | <input type="checkbox"/> Social Security |
| <input type="checkbox"/> Jury Duty | <input type="checkbox"/> Strike Benefits |
| <input type="checkbox"/> Non-Taxable Interest | <input type="checkbox"/> Tips |
| <input type="checkbox"/> Partnerships & "S" Corp. | <input type="checkbox"/> Unemployment - 1099-G |
| <input type="checkbox"/> Pensions & Annuities | <input type="checkbox"/> _____ |

■ **SALE OF STOCK OR OTHER PROPERTY - Please bring supporting documents.**