

2009 Tax Worksheet - Please fill out and bring to your appointment!

Taxpayer/Spouse Name _____ **Birthdate** _____ **Social Security # (please verify)** _____ **Occupation** _____

NEW ADDRESS (if any) _____
PHONE NUMBERS Home _____ Work _____ Cell _____ Fax _____
 Email: _____

DEPENDENTS (if new client, list all; otherwise, list changes from last tax year):

Name	Birthdate	Social Security # (please verify)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SOURCES OF INCOME:	Gross	Federal Tax	State Tax
W-2 _____	\$ _____	\$ _____	\$ _____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Total W-2	\$ _____	_____	_____
1099-R _____	_____	_____	_____
Soc. Security _____	_____	_____	_____
1099-MISC _____	_____	_____	_____
_____	_____	_____	_____
Unemployment _____	_____	_____	_____
State Tax Refund _____	_____	_____	_____
Alimony Received _____	_____	_____	_____
Gambling Winnings (1099-G) _____	_____	_____	_____
Other _____	_____	_____	_____
Total Tax Withheld	_____	\$ _____	\$ _____

2009 ESTIMATED TAX PAYMENTS:

	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter
Date Paid:	_____	_____	_____	_____
Amount Paid:	_____	_____	_____	_____
Total Amount: \$	_____			

INTEREST INCOME:	\$ _____	Alimony Paid	\$ _____
_____	\$ _____	Name: _____ SSN: _____	
_____	\$ _____	Educator Out-of-Pocket Expenses	\$ _____
_____	\$ _____	Early Withdrawal Penalties	\$ _____

DIVIDEND INCOME:	\$ _____	EDUCATION DEDUCTIONS/CREDITS:	
_____	\$ _____	Student Loan Interest	\$ _____
_____	\$ _____	Tuition (listed by individual)	\$ _____
		Freshman/Sophomore ^(Hope)	\$ _____
		All other Tuition ^(Lifetime)	\$ _____
		Higher Graduation Deduction	\$ _____

SPECIAL ADJUSTMENTS:

IRA Deposits	\$ _____
Roth IRA Deposits	\$ _____
Keogh/SEP Deposits	\$ _____

ECONOMIC RECOVERY PMT:

Amount Received	\$ _____
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Taxpayer Name: _____	2009
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PICK UP MAIL