2020 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 ______________

Taxpayer Email:______________________ **Spouse 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		$	$

2020 ESTIMATED TAX PAYMENTS:

	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Date Paid:				
Amount Paid:				

Total Amount: $

INTEREST INCOME:

______________ $______
______________ $______
______________ $______

DIVIDEND INCOME:

______________ $______
______________ $______
______________ $______

SPECIAL ADJUSTMENTS:

HSA Contributions (not on W-2) $______
HSA Distributions (Form 1099-SA) $______
IRA Deposits (not on W-2) $______
Roth Deposits (not on W-2) $______
Keogh/SEP Deposits(not on W-2) $______
$______

☐ **ID Verification (for preparer use)**

Alimony Paid $______
Name:______________ SSN:______________
Educator Out-of-Pocket Expenses $______
Early Withdrawal Penalties $______

EDUCATION DEDUCTIONS/CREDITS:

Student Loan Interest $______
Tuition (by individual, per form 1098T) $______
Undergraduate Studies $______
Graduate Studies $______
Required Books & Supplies $______
Other $______

Taxpayer Name: ______________ **2020**

DIGITAL **MAIL** **PICK UP**

(Must request paper copy-$15 addt'l charge applies)