

**AMERICA'S TAX TABLE  
TAX CLIENT DATA SHEET  
1999 TAX SEASON**

**PLEASE CHECK APPROPRIATE ITEM:**    ☐ **Prior Client**    ☐ **New client**    ☐ **Client before 1998**  
**If new, how did you hear about us?**

PRIMARY NAME: \_\_\_\_\_ SSN \_\_\_\_\_  
OCCUPATION: \_\_\_\_\_ BIRTHDATE \_\_\_\_\_  
SPOUSE NAME: \_\_\_\_\_ SSN \_\_\_\_\_  
OCCUPATION: \_\_\_\_\_ BIRTHDATE \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIPCODE \_\_\_\_\_  
TELEPHONE NUMBERS:    HOME \_\_\_\_\_ WORK \_\_\_\_\_ PAGER \_\_\_\_\_

DEPENDENTS (YOUNGEST FIRST) FIRST, LAST NAME	DATE OF BIRTH MM/DD/YY	SSN	RELATIONSHIP	MONTHS LIVED IN YOUR HOME

**NOTE: USE THE BACK OF THIS FORM IF ADDITIONAL SPACE IS NEEDED FOR DEPENDENTS**

IF YOUR CHILD DID NOT LIVE WITH YOU BUT IS CLAIMED AS A DEPENDENT UNDER A PRE-1985 AGREEMENT, CHECK HERE \_\_\_\_\_  
IF SOMEONE ELSE CAN CLAIM YOU AS A DEPENDENT, CHECK HERE \_\_\_\_\_

IRA CONTRIBUTION: \_\_\_\_\_ ALIMONY PAID: \_\_\_\_\_  
KEOGH RETIREMENT: \_\_\_\_\_ SOCIAL SECURITY BENEFITS: \_\_\_\_\_  
UNEMPLOYMENT COMPENSATION: \_\_\_\_\_ OWN HOME? \_\_\_\_\_

**CHECK ITEMS WHICH PERTAIN TO YOU:**

_____ DID YOU PAY ESTIMATED FEDERAL (1040ES)/STATE TAXES? IF SO HOW MUCH? _____	_____ FORM 1099 INCOME
_____ STATE TAX REFUND _____ PENSION, RETIREMENT INCOME _____	_____ SOCIAL SECURITY
_____ WAGE STATEMENTS W2's _____ INCOME FROM RENTALS _____	_____ MUNICIPAL BONDS
_____ INTEREST \$ _____ PARTNERSHIP/S CORPORATIONS (K-1) _____	_____ TIPS/OTHER INCOME
_____ DIVIDENDS _____ ESTATES/TRUSTS _____	_____ SCHOLARSHIPS
_____ ALIMONY RECEIVED _____ FARM INCOME _____	

**CHILD CARE INFORMATION: (THIS INFORMATION IS NEEDED FOR EACH PROVIDER)**

PROVIDER'S NAME \_\_\_\_\_ PROVIDER'S EIN/SSN \_\_\_\_\_  
PROVIDER'S ADDRESS \_\_\_\_\_ AMOUNT PAID TO PROVIDER \_\_\_\_\_  
\_\_\_\_\_

PROVIDER'S NAME \_\_\_\_\_ PROVIDER'S EIN/SSN \_\_\_\_\_  
PROVIDER'S ADDRESS \_\_\_\_\_ AMOUNT PAID TO PROVIDER \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ ARE YOU INTERESTED IN HAVING YOUR RETURN FILED ELECTRONICALLY?  
\_\_\_\_\_ ARE YOU INTERESTED IN RECEIVING A RAPID TAX REFUND?

**WE NEED COPIES OF THE FOLLOWING DOCUMENTS:**

SOCIAL SECURITY CARDS OF ALL IN THE HOUSEHOLD  
DRIVER'S LICENSES OR PICTURE ID FOR YOU AND YOUR SPOUSE

**NOTE: IF THERE ARE ANY UNPAID BALANCES FINANCE CHARGES WILL ACCRUE AFTER 90 DAYS \_\_\_\_\_ INITIAL**