

## 12-10. INCOME TAX WORKSHEET

PERSONAL INFORMATION — YOURSELF	PERSONAL INFORMATION — YOUR SPOUSE
Full Name:	Full Name:
Address:	Address (If Not The Same):
Social Security Number:	Social Security Number:
Employer's Name & Address:	Employer's Name & Address:

### EXEMPTIONS FOR INCOME TAX PURPOSES

Yourself: _____	<b>Income Tax Filing Status</b>	Single: _____
Your Spouse: _____		Married, Filing Separately: _____
Dependent Children Who Live With You: _____		Married, Filing Jointly: _____
Other Exemptions As Listed Below: _____		Head of Household: _____
<b>Total Exemptions:</b> _____		Qualifying Widow(er): _____

### OTHER EXEMPTIONS (DEPENDENTS)

Dependent's Name (First, Middle Initial, and Last)	Dependent's Age	List Dependent's Social Security Number	Dependent's Relationship To You

### SALARY & WAGE INCOME

Salary or Wages Paid By (Name of Employer)	Wages of Husband (H) or Wife (W)	Total Wages	Federal Income Tax Withheld	Social Security Tax (FICA) Withheld	State Income Tax Withheld
<b>Totals:</b>					

### INTEREST INCOME

### DIVIDEND INCOME

Interest Income Received From	Amount	Dividend Income Received From	Amount
<b>Total:</b>		<b>Total:</b>	

**12-10. INCOME TAX WORKSHEET (Continued)**

**OTHER ITEMS OF INCOME**

Type or Source of Income	Amount	Type or Source of Income	Amount
Taxable State Income Tax Refund		Royalty and/or Partnership Income	
Taxable Local Income Tax Refund		Estate and/or Trust Income	
Alimony Received		Farm Income	
Business Income		Unemployment Compensation	
Capital Gains & Losses (from below)		Social Security Benefits	
Other Gains & Losses		Awards/Prizes/Bonus Payments	
Capital Gains Distributions		Other Income (explain)	
Taxable IRA Distributions			
Taxable Pensions			
Taxable Annuities		Total Income From This Column:	
Rental Income		Total Income from Column on the Left:	
<b>Total of This Column:</b>		<b>Total Income:</b>	

**CAPITAL GAINS & LOSSES — SHORT TERM (Assets held one year or less)**

Description of Property	Date Acquired (Mo., day, yr.)	Date Sold (Mo., day, yr.)	Sale Price	Cost or Other Basis	Loss	Gain
<b>Totals:</b>						

**CAPITAL GAINS & LOSSES — LONG TERM (Assets held more than one year)**

Description of Property	Date Acquired (Mo., day, yr.)	Date Sold (Mo., day, yr.)	Sales Price	Cost or Other Basis	Loss	Gain
<b>Totals:</b>						