

SwiftFP Example Tax Returns
Exercise Number Two (Itemized Deductions)
Forms Included: 1040, Schedule A, Schedule B, 8867

Client's Social Security Number 257-00-4703
Filing Status Married Filing Joint
Taxpayer's Date of Birth 03/01/1969
Spouse's Date of Birth 06/15/1970
Taxpayer's Occupation Astronaut
Secondary's Occupation Nurse
Neither Taxpayer nor Spouse is Blind or Deceased

Client's First Name, Initial, and Last Name James T. Kirk
Secondary First Name, Initial, and Last Name Sherry S. Kirk
Secondary SSN 258-00-4704
Street Address 389 Davant St
Zip Code 32920 (Cape Canaveral, Florida)

Daytime Telephone 904-868-0985
E-Mail jkirk@yahoo.com

Dependent Information

First Dependent Name Brandon D. Kirk
Dependent's Date of Birth 05/03/2008
Dependent's SSN 345-00-5557 *Relationship* Son
Number of Months Lived in Home 12
No Dependent Care Expenses
Taxpayer has not released claim for Brandon to another person (qualifies for the Child Tax Credit).

Second Dependent Name Andrea D. Kirk
Dependent's Date of Birth 08/01/2006
Dependent's SSN 259-00-5588
Relationship Niece
Number of Months Lived in Home 12
No Dependent Care Expenses
Taxpayer has not released claim for Andrea to another person (qualifies for the Child Tax Credit).

Health Care Coverage Information: Health insurance was NOT purchased through the Health Insurance Marketplace

W-2 Information Taxpayer

Employer Identification Number 58-6987451

Employer Name/Address NASA, 101 Cape Canaveral Way Cape Canaveral, FL 32920

Wages \$94600.00

Federal Withholding \$12100.00

State FL

State ID Number 586987451

State Tax Withheld None

W-2 Information Spouse

Employer Identification Number 58-6412038

Employer Name/Address Georgia Department of Revenue, 610 Ronald Reagan Dr, Evans, GA 30809

Wages \$43500.00

Federal Withholding \$5200.00

State GA State ID Number 28-594178

State Tax Withheld \$740.00

Schedule B Information:***Regular Interest***

Payer's Name Bank of America

Interest Income from 1099 \$2420.00

Regular Dividend

Payer's Name Bank of America

Total Ordinary Dividends \$315.00

Schedule A Information:

Medical and Dental Insurance \$14600.00

Amount Paid to Doctors, Dentists, etc.

Supporting Notes

Dr John Gillespie \$5100.00

Dr Frank Willingham \$2600.00

Prescriptions: \$1425.00

Medical Mileage before July 1st 700 miles

Medical Mileage after June 30th 500 miles

Prior Year State Taxes Paid \$4521.00

Real Estate Taxes on Personal Residence \$2100.00

Personal Property Taxes

Supporting Notes:

Ad Valorem Tax Automobile Tags \$515.00

Interest Paid

Mortgage Interest from Wells Fargo - Form 1098 \$6985.00

Gifts to Charity

Cash and Check Contributions (Church) \$3600.00

Non-Cash Contributions (clothing) \$486.00