

Simple Tax Overview Statement

Taxpayer Information

- Name: _____
- Tax ID / SSN: _____
- Tax Year: _____
- Date: _____

Income Summary

Description	Amount
Total Employment Income	_____
Other Income	_____
Total Income	_____

Deductions & Credits

Description	Amount
Standard Deduction	_____
Other Deductions	_____
Tax Credits	_____
Total Deductions & Credits	_____

Tax Liability Summary

Description	Amount
Taxable Income	_____
Total Tax Owed	_____
Taxes Withheld	_____
Refund / Balance Due	_____

Signature: _____ Date: _____