Tax Organizer

Please complete this Organizer before your appointment.

Your Tax Appointment is scheduled for : ________________________________ at _________________ am / pm

If you are unable to keep this appointment, please contact us to cancel or reschedule your appointment.

☐ New Client ☐ Returning Client

Filing Status

☐ 1-Single ☐ 2-Married filing Joint ☐ 3- Married Filing Separate ☐ 4-Head of Household

Filing Status Guidelines

1 - If you did NOT marry on or before December 31st

2 - If you were married as of December 31st.

3 - If: You were married on or before December 31st and your spouse is filing a tax return using this filing status.

* If MFS, did you live together at ANY time during the tax year? ☐ Yes ☐ No

If yes, did you live together during the final 6 months? ☐ Yes ☐ No

* If MFS, did your spouse itemize his/her deductions? ☐ Yes ☐ No

NOTE: If spouse itemized deductions, taxpayer must also Itemize deductions.

4 - If: You were NOT married as of December 31st.

Your child, foster child, or grandchild lived with your more than 6

Personal Information

	Name	Soc. Sec. No.	Date of Birth	Occupation
Taxpayer				
Spouse				

Mailing Address	City	State	Zip Code

	Work Phone	Home Phone	Cell Phone	Email
Taxpayer				
Spouse				

	Driver's License/ID Number	Issuing State	Issue Date	Expiration Date
Taxpayer				
State				

	Taxpayer	Spouse
Blind	Yes ☐ No ☐	Yes ☐ No ☐
Disabled	Yes ☐ No ☐	Yes ☐ No ☐
Veteran	Yes ☐ No ☐	Yes ☐ No ☐

Status Changes for the year ___________ Check any that apply and enter effective date			
Married		Moved	
Separated		Home Sold	
Divorced		Dependent Adoption	
Retired		Spouse Deceased	

Forms Checklist – Please collect all forms and bring to your appointment			
☐	W-2 Forms	☐	Vehicle property tax
☐	Self-Employment Income (1099-MISC)	☐	Home property tax (if not reported on 1098)
☐	Pension distribution (1099-R)	☐	Health insurance from Marketplace (1095-A)
☐	Social Security Benefits (1099-SSA)	☐	Health insurance coverage (1095-B or 1095-C)
☐	Railroad Retirement Benefits (RRB-1099)	☐	Health or Medical Savings Account Distribution (1099-SA)
☐	Bank interest income (1099-INT)	☐	Mortgage Interest Paid (1098)
☐	Dividend income (1099-DIV)	☐	Tuition Expenses (1098-T)
☐	Sale of Stock (1099-B)	☐	Student Loan Interest Paid (1098-E)
☐	Unemployment Income (1099-G)	☐	IRA contribution, account balance (5498)
☐	Partnership, S-Corp, estate or trust income (Schedule K-1)	☐	Spreadsheets, QuickBooks files, bank statements (if self-employed)
☐	Proceeds from real estate transactions (1099-S)	☐	IRS PIN letters
☐	Debt forgiveness (1099-C)	☐	Gambling Win/Loss Statement
☐	Gambling Winnings (W-2G)	☐	Other:

Additional Information to bring- Check All That Apply	
☐	Copy of Driver's License or State ID for taxpayer and spouse, if applicable
☐	If any of your dependents filed their own tax return, check this box, and provide a copy of the return.
☐	You need us to file a return for one or more of your dependents.
☐	You paid expenses or tuition for yourself, your spouse, or dependents to attend classes beyond high school this past year. If checked, please provide Form 1098-T and fill out the **Education Expense Worksheet** and **American Opportunity Tax Credit (AOTC) Questionnaire**
☐	You were self-employed or received hobby income. If checked, please complete a **Self-Employed Worksheet.**
☐	You received rent from real estate or other property. If checked, please complete the **Rental Property Worksheet**
☐	Your refinanced your home or took out a home equity loan. If checked, please provide your **Final Closing Statement.**
☐	You bought or sold real estate. If checked, please provide a copy of your **Final Closing Statement and Form 1099-S.**
☐	You paid child or dependent care expenses. If checked, please provide a copy of your provider's annual statement and fill out **Child/Dependent Care Worksheet.**
☐	If you are filing Head of Household, please fill out the **Head of Household Questionnaire.**

Bank Information for Direct Deposit and/or ACH Withdrawal				
Bank's Name	Address	Routing Number	Account Number	Account Type
				☐ Checking ☐ Savings

Sources of Income

Wages & Salary Income (Please Attach W-2s)

Interest Income (Please attach 1099-INTs & brokerage statements)

Dividend Income from Mutual Funds & Stocks (Please attach 1099-DIV & brokerage statements)

Partnership, Trust, Estate Income (Please attach K-1 or Income Tax Letter)

Pensions & Annuity Income/IRA Distributions (Attach all 1099-Rs or other documentation)

Other Income		
Source	**Taxpayer**	**Spouse**
Alimony Received		
Scholarship (Grants)		
Prizes, Bonuses, Awards		
Gambling, Lottery Winnings		
Unreported Tips		
Director Executor's Fee		
Commissions		
Jury Duty		
State Income Tax Refund		
Social Security Benefits		
Unemployment Compensation Received		

Job Related Moving Expenses (Military Only)			
Date of Move		Travel in route to new home	
Distance from old home to new workplace		Lodging in route to new home	
Distance From old home to old workplace		Reimbursements not included in W-2s	
Cost to move and/or store household goods			

Other Deductions	
Gambling Losses (up to Gambling Winnings)	
Excess Estate Expenses (from final K-1)	
Student Interest Paid	
Alimony Paid: Name of Recipient: ___________________________ SSN: _____________________________	
Income Tax Preparation Fee	

Estimated Taxes Paid (Do NOT include withholdings from W-2's, 1099-R)				
	1st Installment	2nd Installment	3rd Installment	4th Installment
Federal				
State				