2019 Tax Organizer Personal and Dependent Information

Personal Information								
Name					SSN	Date	Date of birth	
Taxpayer	xpayer							
Spouse								
ADDRESS:								
	Occupation		Daytime phone	Evening phone		Cell p	Cell phone	
Taxpayer	ayer							
Spouse	ouse							
Taxpayer email								
Spouse email								
Marital Status at end of 2019	Marital Status at end of 2019		Other information		<u>Taxpayer</u>		<u>Spouse</u>	
Married			Are you blind?		s No	Yes	=	
Married filing separately		-	Are you disabled?		s No	∐ Yes	=	
	Single Widow(er) If spouse died in 2019		Are you a full-time student? Do you want \$3 to go to the		s No	∐ Yes	_	
enter the date of death			Presidential Election Campaign Fund?		s 🗌 No	∐ Yes	i ∐ No	
Dependent Information								
First and I	ast name	SSN	Relationship	Months in home	Date of birtl	h Disabled	Full- time student	
List dependents required to file	a retum					I		
YOUR NOTES TO OUR	OFFICE							
Account for Refunds or Payments - If bank account is same as previous year, please note this below.								
	Bank		Bank	Type of account l		Use this ac	Use this account for	
Name of b	ank	routing number	account number	Checking	Savings	Deposits	Withdrawals	

PLEASE PROVIDE FORM 1095-A TO COMPLETE YOUR TAX RETURN IF YOU HAD MARKETPLACE INSURANCE

	Questionnaire
Name:	
Questionnaire	
Personal Inform	nation
Yes No	Did your marital status change during the year?
[][]	Did your marital status change during the year? If "Yes," explain
[][]	Can you or your spouse be claimed as a dependent by someone else?
[][]	Did your address change during the year?
	Provide proof of identity to be eligible to e-file your tax return (driver's license or
	state-issued photo ID)
ependent Info	rmation
Yes No	
[][]	Did you have any changes in dependents during the year?
	If "Yes," explain
[][]	Can another person qualify to claim any of your dependents?
[][]	Did you have any childcare expenses during the year?
[][]	Did you have any adoption expenses during the year?
[][]	Did you have any children under age 19 or a full-time student under age 24 with more than \$2200 of
	unearned income?
	Provide documentation for proof of dependent related credits (school records, medical records, daycare records, etc.)
ealth Care Info	armatian
Yes No	mation
[][]!	Did any member of your household have healthcare coverage through the Marketplace?
	If "Yes," provide copies of Form 1095-A.
[][]!	Did you receive any distributions from a Health Savings Account (HSA), Archer MSA, or Medicare Advantage MSA during the year?
come. Purcha	ses, Sales, and Debt Information
Yes No	,,
[][]	Did you receive any tips not reported to your employer?
[][]	Did you receive any disability income during the year?
[][]	Did you cash any U.S. savings bonds during the year?
[][]	Did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual
	currencies?
[][]	Did you receive any other income not provided with this organizer? If "Yes," explain
[][]	Did you start a new business or purchase any rental property during the year?
[][]	Did you sell an existing business, rental property, or other property during the year?
[][]	Did you purchase any business assets or convert any assets to business use?
	If "Yes," provide the cost of the asset, the date it was placed in service, and business use
	percentage.
[][]	Did you purchase any gasoline, diesel, or special fuels for non-highway business use?
[][]	Did you buy or sell any stocks, bonds, or other investments during the year?
[][]	Did you sell a principal residence during the year?
	If "Yes," provide closing documentation for the purchase and sale of the home
[][]	Did you have a principal residence or a piece of real property foreclosed on during the year?
[][]	Did you abandon a principal residence or a piece of real property during the year?
[][]	Did you refinance your principal home or second home or take out a home equity loan during the year?
	If "Yes," provide all escrow, closing, and other pertinent documentation and information.
[][]	Did you receive any principal or interest during this year from property sold in prior years?

Did you rent out your home or use it for business?

Did you sell, exchange, or purchase any real estate during the year?

[][]

[][]

Questionnaire

	Questionnaile
ame:	
Questionnaire	
[][]	Did you acquire a new or additional interest in a partnership or S corporation?
[][]	Did you have any debts canceled or forgiven this year?
[][]	Does anyone owe you money that has become uncollectible?
[][]	Did you purchase a new hybrid, alternative motor, or electric motor energy-efficient vehicle during the
	year?
	If "Yes," provide the year, make, model, VIN, and date the vehicle was placed in service.
emized Deduc	tion Information
Yes No	
[][]	Did you pay out-of-pocket medical or dental expenses (premiums, prescriptions, mileage, etc.) during the
	year?
[][]	Did you pay any long-term care premiums for yourself, your spouse, or a dependent during the year?
[][]	Did you receive any state or local income tax refunds from prior years?
[][]	Did you make any major purchases (vehicle, boat, etc.) during the year?
[][]	Did you pay any real estate property taxes or personal taxes during the year?
[][]	Did you pay mortgage interest during the year?
[][]	Did you make cash donations to charity during the year?
[][]	Did you make noncash donations to charity (clothes, furniture, etc.) during the year?
[][]	Did you donate a boat or vehicle during the year?
	If "Yes," attach Form 1098-C.
[][]	Did you have gambling winnings or losses during the year?
[][]	Did you have any job-related expenses that were not reimbursed by your employer (uniforms, safety
	equipment, etc.)?
[][]	Did you use your vehicle on the job other than for commuting to work?
[][]	Did you work out of town at any time during the year?
etirement Info	rmation
Yes No	
[][]	Did you receive any payments from a pension, profit sharing, or 401(k) plan during the year?
[][]	Did you make any withdrawals from or contributions to an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), myRA, or
	other qualified retirement plan during the year?
[][]	Did you receive any Social Security benefits during the year?
ducation Infor Yes No	mation
[][]	Did you pay tuition expenses that were required for attending college, university, or vocational school
[][]	for yourself, your spouse, or a dependent during the year (even if classes were attended in another
	year)?
[][]	Did anyone in your household attend a post-secondary school during the year?
[][]	Did you make a contribution to or receive a distribution from an Education Savings Account or Qualified
[][]	Tuition Program during the year?
[][]	Did you pay student loan interest for yourself, your spouse, or your dependent(s) during the year?
1111	Did you pay student loan interest for yourself, your spouse, or your dependent(s) during the year?
iscellaneous I	nformation
Yes No	
[][]	Did you incur a gain or loss due to damaged or stolen property?
	If "Yes," provide the incident date, value of the property, and amount of insurance reimbursements.
[][]	Did you pay wages to any household employees (babysitter, nanny, housekeeper, etc.)?
[][]	Did you make gifts to any one person in excess of \$15,000 during the year?
	If "Yes,"
	Yes No
	[] [] Are you splitting the gift with your spouse?
[][]	Did you incur moving expenses during the year?
[][]	Did you make any energy-efficient improvements to your main home during the year?

Questionnaire

Name:	
Questionn	aire
	 Did you apply an overpayment of your 2018 taxes to your 2019 estimated taxes? If you have an overpayment of 2019 taxes, do you want the refund applied to your 2020 estimated taxes? Did you make any estimated payments toward your 2019 taxes? Do you want to have any refund or balance due directly deposited or withdrawn? <pre>If "Yes," provide a canceled checking or savings slip.</pre> Did you receive any notices from the IRS or state taxing authority? <pre>If "Yes," explain</pre>
	count Information
Yes	
[]	Did you have a financial interest in or signature authority over a financial account or asset located in a foreign country?
[] [] []	 Did you receive a distribution from, or were you a grantor of, or transferor to, a foreign trust? Did you have any income from, or pay taxes to, a foreign country? Did you own property in a foreign country?
Additional (Questions
Yes	No
[]	Did you receive income or incur expenses associated with a fantasy sport league? If yes, provide documentation.
[]	Did you receive income or incur expenses associated with car sharing (e.g., Lyft or Uber)? If yes, attach Form 1099-MISC and Form 1099-K.
[]	·
[]	·
[]	·
[]	Did you receive income or incur expenses associated with a short-term rental (e.g., Airbnb or HomeAway)? If yes, provide documentation.
[]	·
Preparer No	otes