

INCOME TAX ORGANIZER

Taxpayer & Spouse (if applicable):

Taxpayer's Name: _____ SS#: _____

Spouse's Name: _____ SS#: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Taxpayer's E-mail Address: _____

Spouse's E-mail Address: _____

Telephone: Home: () _____

Taxpayer's Work: () _____ Cell: () _____

Spouse's Work: () _____ Cell: () _____

Filing Status: Single

(check one) Married – please indicate if you are: Filing jointly or Filing separately

Head of Household (with qualifying person)

Qualifying Widow(er) with dependent child

Dependents:

Name

Date of Birth

Social Security Number

Estimated Income Taxes Paid:

Installment	Federal		State		Other: _____	
	Amount	Date Paid	Amount	Date Paid	Amount	Date Paid
1 st Quarter	\$ _____	/ /	\$ _____	/ /	\$ _____	/ /
2 nd Quarter	\$ _____	/ /	\$ _____	/ /	\$ _____	/ /
3 rd Quarter	\$ _____	/ /	\$ _____	/ /	\$ _____	/ /
4 th Quarter	\$ _____	/ /	\$ _____	/ /	\$ _____	/ /

Health Insurance Information:

Check here if you had “minimum essential coverage” health insurance for all of 2015.

NOTE: Most insurance plans meet minimum essential coverage. If you are not certain, you must inquire with your insurer if your plan is ACA compliant.

If you did not have insurance coverage for the full year, please complete the following:

of Months you had coverage: _____ (0 – 11)

Insurance Company name: _____

In addition to a copy of last year's tax return (new clients only), please gather the following documentation to bring to your appointment or to mail to us.

Income:

- W-2 for Salary, Wages, and Tips
- W-2G for all Gambling winnings
- Forms 1095-A, B, and/or C Health Insurance Marketplace Statements
- 1099-DIV for Dividends Received
- 1099-INT for Interest Received (taxable and tax-exempt)
- 1099-G for Certain Government Payments (e.g., Unemployment Compensation)
- 1099-MISC for Miscellaneous Income (e.g., Non-Employee Compensation, Rents, Royalties)
- 1099-R for Distributions from Pensions, Annuities or IRAs
(NOTE: If you rolled over a lump sum distribution from a qualified plan or IRA, please include proper substantiation.)
- 1099-Q for Payments from Qualified Education Programs under Sections 529 and 530
- 1099-S for Proceeds from Real Estate Transactions (and closing statements)
- SSA-1099 for Social Security Benefits
- K-1s for income/loss from Partnerships, Estates, Trusts, and S-Corporations
- Sale/Exchange of Property (cost, sales prices & dates of transactions)
- Brokerage Statements for Securities (including cost basis of securities and purchase dates)
- Taxable Value of Insurance From Pension/Profit Sharing
- State & Local Income Tax Refunds
- Alimony Received
- Child Support
- Disability Income (may qualify for exclusion)
- Worker's Compensation
- Veteran's Pension
- Director/Executor's Fee
- Commissions
- Bonuses, Prizes and Awards
- Scholarships (Grants)
- Jury Duty Pay
- Profit/Loss from Business (if applicable, see page 4 for a list of deductible expenses)
- Profit/Loss from Rental Property (if applicable, see page 4 for a list of deductible expenses)

Adjustments to Income:

- IRA Contributions - Deductible (annual statements for taxpayer/spouse)
- IRA Contributions - Nondeductible and/or Roth IRA (annual statements for taxpayer/spouse)
- SEP Contributions (annual statements)
- Keogh Contributions (annual statements)
- Penalty on Early Withdrawal on Savings
- Alimony Paid (recipient's Social Security number, and copy of divorce decree or separation agreement)
- Health Savings Account Information

Credits:

- Child Tax Credit
- Child & Dependent Care Credit
 - Name, address and Tax ID number of organization providing care, or
 - Name, address and Social Security number of individual providing care
- Credit for the Elderly or Disabled
- Foreign Tax Credit
- Rehabilitation Tax Credit (for costs incurred in rehabilitation / reconstruction of certain buildings)
- Residential Energy Credits (e.g., solar electric, solar water heating, small wind energy, etc.)
- Education Credits

Itemized Deductions:

1. Medical

- Medical Insurance
- Medical & Dental Expenses
- Medical Travel
- Medicine & Drugs
- Wheelchair/specialized equipment
- Eyeglasses/Contact Lenses
- Therapy, X-Ray/Similar Services
- Nursing Services/Including Board
- Payment For Acupuncture
- Purchase or Rental of Equipment
- Support/Corrective Devices
- Treatment at Center
- Artificial Teeth/Limbs
- Hearing Aids/Batteries
- Crutches
- Birth Control Surgery
- Special Schooling
- Ambulance Services
- Lab tests

2. Taxes Paid

- State and Local Estimated Taxes Paid (as itemizes on page 1)
- State and Local Income Tax Withheld
- State and Local Income Taxes Paid - Prior Year
- Sales tax paid (if applicable – no State income tax deduction)
- Real Estate
- Personal Property
- Other Taxes

3. Interest Paid

- Mortgage Interest
 - Paid to financial institution (Form 1098; Tenant Shareholder letter for Cooperative Apartment owners)
 - Paid to an individual (name, address, and Social Security number of individual)
- Points
- Investment Interest (limited to portfolio income)
- Margin Accounts
- Other

4. Contributions

- Donations by cash, check or credit card to charitable organizations
- Other than cash contributions – documentation should include:
 - Date acquired by donor
 - Donor's cost
- Donated articles – documentation should include:
 - Name & Address of Donee Organization
 - Date of Contribution
 - Description of donated articles
 - Fair market value of donated articles
- Travel costs for services contributed (NOTE: Value of services contributed is not deductible.)

5. Casualty/Theft Loss - for property damaged by storm, water, fire, accident, or stolen, provide:

- Location of property
- Description of property
- Amount of damage
- Insurance reimbursement
- Repair costs
- Federal grants received

6. Job-Related Moving Expenses (minimum distance = 50 miles)

- Move household goods
- Lodging during move
- Travel to new home

7. Miscellaneous Deductions

- Unreimbursed employee business expenses (see page 5)
- Investment expenses
- Tax preparation fee

Other deductible expenses (if applicable):

A. Business Expenses

- Furniture and equipment
 - Accounting and auditing services
 - Advertising
 - Amortization
 - Equipment rental
 - Repairs and maintenance
 - Storage and warehousing
 - Subcontractors
 - Supplies
 - Dues, licensing, and publications
 - Telephone
 - Travel
 - Seminars and conventions
 - Interest on business indebtedness
 - Wages
 - Entertainment
 - Renovations
 - Office supplies
 - Postage
 - Rental of business property
 - Home office (square footage used)
 - Bank charges
 - Car and truck expenses (see below for details)
 - Commissions
 - Depreciation
 - Taxes
 - Employee benefits
 - Insurance
 - Utilities
 - Laundry and cleaning
 - Legal services
- NOTE: Club dues are no longer deductible

B. Rental Property Expenses

- Advertising and commissions
- Carpentry
- Landscaping work
- Snow removal
- Upkeep and cleaning
- Insurance
- Repair work
- Electrical
- Painting and decorating
- Plumbing
- Trash Removal
- Equipment
- Improvements
- Furniture
- Utilities
- Pest Control
- Taxes
- Furnace and air conditioning
- Interest
- Other

C. Business auto expenses

- Motor club dues
- Gas, oil and lubrication
- Repairs and maintenance
- Tires and accessories
- Lease payments
- Licenses and fees
- State and local taxes
- Insurance
- Parking, towing, and tolls
- Garage rental
- Interest on auto loan
- Other

D. Unreimbursed Employee Business Expenses

- Fares for airplane, taxi, etc.
- Meals
- Lodging
- Dues-professional assoc. or union (not club)
- Educational
- Entertainment
- Office
- Postage
- Other