

2021 Tax Organizer

Personal Information

Personal Information			
	Name	SSN	ID PIN
Taxpayer			
Spouse			
Street Address, City, State & Zip (Please fill out if you are a current client that has moved.)			
	Occupation	Cell Phone	Email
Taxpayer			
Spouse			
Marital Status at the end of 2021	Other Information	Taxpayer	Spouse
<input type="checkbox"/> Married	Are you blind?	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Married filing separately	Are you disabled?	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Single	Are you a full-time student?	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Head of household - Please fill out Head of Household section	Are you a full-time student?	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Widow (er) if spouse died in 2021 enter date of death:	Do you want \$3 to go to the Presidential		<input type="checkbox"/>

Dependent Information - Current clients, please be sure to enter any new additions to the family!

Full Name	SSN	ID PIN	Birthdate	Disabled?	Full-time Student?

Estimated Tax Payments

Federal	Amount	State	Amount	Local	Amount
Quarter 1		Quarter 1		Quarter 1	
Quarter 2		Quarter 2		Quarter 2	
Quarter 3		Quarter 3		Quarter 3	
Quarter 4		Quarter 4		Quarter 4	

Bank Account Information for Deposits or Withdrawals

Name of Bank	Routing Number	Account Number	Account Type	
			Checking	Savings

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Identification Information

	Driver's License/State ID	State	Date of issue	Expiration
Taxpayer				
Spouse				

COVID-19 Implications

___Y ___N	Did you receive Economic Impact Payments (Stimulus Payments) in 2021?		
If yes:	<u>Date of Payment</u>	<u>Amount</u>	
___Y ___N	Did you receive Advanced Payments of the Child Tax Credit?		
If yes:	<u>Date of Payment</u>	<u>Amount</u>	
___Y ___N	Did you receive unemployment compensation in 2020?		
___Y ___N	Did you receive a distribution from a retirement plan due to COVID?		

Forms Checklist

___	Notice 1444 - Possibly received for EIP/Stimulus payments
___	W2 (s)
___	1099s (Retirement, Interest, Dividends, Sales of stocks, Social Security Income, HSAs, etc.)
___	1098s (Mortgage interest, Student Interest, Tuition)
___	Sales of assets (need purchase info and sale info)
___	Child Care statements (Must have EINs/SSNs, address, amount for each child)
___	K1s (Income statements from businesses owned)
___	Notice CP01A - Identity Protection Pin (if issued by the IRS)
___	1095A (Healthcare coverage provide through the Marketplace)
___	Previous years' tax returns (new clients only)
___	Receipts for donations of property (Must include a \$ value)

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Questionnaire	
Personal Information	
___Y ___N	Did your marital status change? Please explain: _____
___Y ___N	Can either you or your spouse be claimed as a dependent on someone else's taxes?
___Y ___N	Was anyone in your house a victim of Identity Theft?
	If yes, please explain _____
Dependent Information	
___Y ___N	Did you have any changes in dependents in 2021 (new baby, foster children, adoption, etc.)?
___Y ___N	Can another person qualify to claim any of your dependents?
___Y ___N	Did you have adoption expenses during the year?
___Y ___N	Did you have any children over under the age of 19 or a full-time student under the age of 24 with more than \$2400 in unearned income (interest, etc.)?
Other Income	
___Y ___N	Did you receive any tips not reported to your employer?
___Y ___N	Did you receive any disability income during the year? VA Disability not included.
___Y ___N	Did you cash any savings bonds during the year?
___Y ___N	Did you start a new business or purchase any investment property during the year?
___Y ___N	Did you sell your primary residence during the year?
___Y ___N	Was your primary residence foreclosed on during the year?
___Y ___N	Did you refinance your primary residence or investment properties during the year?
___Y ___N	Did you rent all or part of your home this year?
___Y ___N	Did you have any debts cancelled this year?
___Y ___N	Did you purchase a new hybrid, alternative motor, or electric motor, energy-efficient vehicle during the year?
	If yes, provide Make, Model, Year and VIN _____
Head of Household	
Marital Status	
___	Never Married
___	Spouse Deceased
___	Divorced or separated
___	Married, but living apart
If divorced or legally separated, can you provide the IRS with any of the following documents?	
___	Divorce Decree
___	Separation Agreement
If you are married but did not reside with your spouse for the last 6 months of the tax year, can you provide the IRS with any of the supporting documents that your spouse did not live with you?	
___	Lease Agreement
___	Utility Bills
___	Letter from a clergy member
___	Letter from social services
___	Other Supporting Documentation
___	If so, what time of documentation _____

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Head of household (cont)

Can you Provide the IRS with receipts and bills substantiating the cost of maintaining more than half of the cost of the home? Documentation that the IRS requires to substantiate the cost of maintaining the home includes:

---	Utility Bills	---	Rent receipts or mortgage interest statement
---	Property Tax Bills	---	Maintenance and repair bills
---	Grocery Receipts	---	Other household bills

Did you receive any non-taxable support/income?

---	Family Support	---	Childcare Assistance
---	Food Stamps	---	Other -----
---	Housing Assistance		

Virtual Currency

---	Y	---	N	Did you buy/sell any virtual currency in 2021?
-----	---	-----	---	--

Foreign Accounts

---	Y	---	N	Did you have a financial interest in or signature authority over a financial account or asset located in a foreign country?
-----	---	-----	---	---

Other Questions

---	Y	---	N	Educator expenses? If yes, how much -----
---	Y	---	N	Did you make any contributions to an HSA?
---	Y	---	N	Did you make any contributions to an IRS (Traditional or Roth) or SEP?
---	Y	---	N	Did you have any household employees (nannies, housekeepers, etc.)

Vehicle

Vehicle Year		Personal Miles	
Vehicle Make		Business Miles	
Vehicle Model			

Schedule A - Itemized Deductions

Medical & Dental Expenses		Charitable Contributions	
Health Insurance Premiums		Cash Contributions	
Long-term care premiums (taxpayer)		Property Contributions	
Long-term care premiums (spouse)		Miles driven for charitable purposes	
Long-term care premiums (dependents)			
Mileage driven for medical purposes			
Other medical & dental expenses			
Taxes Paid			
Personal Property Taxes			
Sales taxes			

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Profit or Loss from Business - Schedule C			
General Business Information			
Business Name		EIN	
Product or service			
Business Address			
___Y ___N	Started/Acquired in 2021?	___Y ___N	Did you pay contractors or commissions?
___Y ___N	Disposed of/Sold in 2021?	___Y ___N	Did you file 1099s?

Income			
Gross Receipts		Other	
Refunds/Discounts			

Expenses			
Advertising.....		Travel.....	
Auto Expenses.....		Business Meals(not from restaurant)	
Commissions.....		Business meals (from restaurant)....	
Contract Labor.....		Utilities.....	
Employee Benefits.....		Wages.....	
Insurance (other than health).....		Other expenses (list below)	
Interest.....			
Legal & Professional Services.....			
Office expenses.....			
Equipment/Vehicle Rent/Leases.....			
Rent - Other.....			
Repairs & Maintenance (not auto).....			

Cost of Goods Sold			
Materials and Supplies.....			
Cost of Labor (subcontractors, etc).....			
Other Costs.....			

Home Office - used exclusively for business			
Residence # 1		Residence # 2	
Square footage of the house		Square footage of the house	
Square footage of the office		Square footage of the office	
Date placed into service		Date placed into service	
Utilities (water, electricity, trash, etc.)		Utilities (water, electricity, t	
Internet		Internet	
% used for business		% used for business	

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Income or Loss from Rental Real Estate and Royalties - Schedule E					
General Property Information					
Property Address					
Property Type	Single Family Home	---		Vacation Rental	---
	Multi-family residence	---		Commercial	---
	Land	---		Royalties	---
	Self-rental	---		Other	---

Days rented.....				Days used for personal	
------------------	--	--	--	------------------------	--

___Y ___N	Is this property your main home or secondary residence?
___Y ___N	Was this property dis posed of in 2021?
___Y ___N	Did you pay any subcontractors for services on this rental?
___Y ___N	Did you file 1099s for subcontractors?

Income	
Rental Income.....	

Expenses			
Advertising		HOA Fees	
Auto & Travel		Other Expenses (list)	
Cleaning			
Maintenance			
Commissions			
Insurance			
Legal & Professional fees			
Management Fees			
Mortgage Interest			
Other Interest			
Repairs			
Supplies			
Taxes			
Utilities			