



Tax Pro | 2020 Tax Organizer

This Tax Organizer is designed to help you collect and report the information needed to prepare your 2020 income tax return. The attached worksheets cover your income, deductions, and credits, and will help in the preparation of your tax return by focusing attention on your special needs.

TAX PREPARATION CHECKLIST

Please provide the following documentation:

- o If you are a new client, please provide copies of last 2 year's tax returns.
- o Completed the attached 2020 General Questions "

*Note: The "General Questions" include a variety of questions designed to assist in completing your tax return. If you answer **yes** to any of the questions, be sure to provide the applicable details.

- o All Forms W-2 (wages), 1099-INT (interest), 1099-DIV (dividends), 1099-B (proceeds from broker or barter transactions), 1099-R (pensions and IRA distributions), Schedule K-1 from partnerships, S corporations, estates and trusts, and other income reporting statements, including all copies provided from the payer.
- o Form 1095-A (for health insurance purchased through a public exchange), Form 1095-B (for health insurance purchased outside of a public exchange), or Form 1095-C (for employer-provided health insurance coverage).
- o Copy of the closing statement if you bought or sold real estate.
- o Mileage figures for any automobile expenses claimed, including total mileage, commuting mileage, and business mileage.
- o Details of estimated tax payments made, if any.
- o Income and deductions categorized on a separate sheet for business or rental activities.
- o List of itemized deductions categorized on a separate sheet of medical, taxes, interest, charitable, and miscellaneous deductions.
- o Copy of all acknowledgement letters received from charitable organizations for contributions made in 2020.

TAXPAYER RESPONSIBILITIES

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records (in some cases, we will ask to review your documentation).
- You must be able to provide written records of all items included on your return if audited by either the IRS or state taxing authority. We can provide guidance concerning what evidence is acceptable.
- You must review the return carefully before signing to make sure the information is correct.
- Fees must be paid before your tax return is delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer is required for all new clients.
- You should keep a copy of your tax return and any related tax documents. You may be assessed a fee if you request a copy in the future.

Privacy Policy

The nature of our work requires us to collect certain nonpublic personal information about you from various sources. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to any third party without your express permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access. Please contact us with any questions regarding our privacy policy.

We will retain copies of records you supplied to us along with our work papers for your engagement for a period of five years. After five years, our work papers and engagement files will be destroyed. All your original records will be returned to you at the end of this engagement.

TAXPAYER INFORMATION**SPOUSE INFORMATION**

LAST NAME _____ LAST NAME _____
 FIRST NAME _____ FIRST NAME _____
 MIDDLE INITIAL _____ MIDDLE INITIAL _____
 SUFFIX _____ SUFFIX _____
 SSN _____ SSN _____
 DATE OF BIRTH _____ DATE OF BIRTH _____
 OCCUPATION _____ OCCUPATION _____
 TELEPHONE NUMBER _____ TELEPHONE NUMBER _____
 CELL PHONE NUMBER _____ CELL PHONE NUMBER _____
 EMAIL ADDRESS _____ EMAIL ADDRESS _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP CODE _____

FILING STATUS

- SINGLE
 MARRIED FILING JOINTLY
 MARRIED FILING SEPARATELY
 CHECK BOX IF YOU DID NOT LIVE WITH SPOUSE AT ANY TIME DURING THE YEAR
 CHECK BOX IF YOU ARE ELIGIBLE TO CLAIM SPOUSE'S EXEMPTION
 CHECK BOX IF YOUR SPOUSE ITEMIZED DEDUCTIONS
 HEAD OF HOUSEHOLD
 IF THE QUALIFYING PERSON IS A CHILD BUT NOT YOUR DEPENDENT, ENTER:
 CHILD'S NAME: _____ CHILD'S SSN: _____
 QUALIFYING WIDOW(ER)
 CHECK BOX FOR THE YEAR IN WHICH YOUR SPOUSE PAST AWAY

DEPENDENT INFORMATION

FIRST, MIDDLE, AND LAST NAME	SUFFIX	SSN	DATE OF BIRTH	RELATIONSHIP	MONTHS LIVED WITH TAXPAYER

CHILD AND DEPENDENT CARE PROVIDER EXPENSES

PROVIDER NAME	PROVIDER ADDRESS	FEDERAL ID OR SSN	AMOUNT PAID	DEPENDENT'S NAME

MEDICAL AND DENTAL EXPENSES

2020 AMOUNT

PRESCRIPTION MEDICATIONS: _____

HEALTH INSURANCE PREMIUMS: _____

DOCTORS, DENTISTS, ETC: _____

HOSPITAL, CLINICS, ETC: _____

EYEGASSES AND CONTACT LENSES: _____

MILES DRIVEN FOR MEDICAL PURPOSES: _____

OTHER MEDICAL AND DENTAL EXPENSES: _____

TAXES

REAL ESTATE TAXES PAID ON PRINCIPAL RESIDENCE _____

REAL ESTATE TAXES PAID ON ADDITIONAL HOMES/LAND: _____

PERSONAL PROPERTY TAXES: _____

SALES TAX PAID ON VEHICLE PURCHASES: _____

MORTGAGE INTEREST

ATTACH FORMS(S) 1098 FOR YOUR HOME MORTGAGE INTEREST PAID:

CASH/CHECK/CREDIT CONTRIBUTIONS

NONCASH CHARITABLE CONTRIBUTIONS

ATTACH ALL RECEIPTS WITH THE FOLLOWING INFORMATION: DONEE, DONEE'S ADDRESS, DESCRIPTION OF DONATION, DATE ACQUIRED, DATE CONTRIBUTED, YOUR COST, VALUE AT TIME OF DONATION, AND HOW YOU ACQUIRED THE PROPERTY.

MISCELLANEOUS DEDUCTIONS

GAMBLING LOSSES (TO THE EXTENT OF GAMBLING INCOME) _____

TAXPAYER EDUCATOR EXPENSES _____

SPOUSE EDUCATOR EXPENSES _____

ATTACH FORM(S) W-2 (WAGES, SALARIES, TIPS AND OTHER COMPENSATION)

ATTACH FORM(S) 1099-R (DISTRIBUTIONS FROM PENSIONS, ANNUITIES, RETIREMENT, PROFIT SHARING, IRA'S, ETC.)

ATTACH FORM(S) SSA-1099/RRB1099 (SOCIAL SECURITY/RAILROAD BENEFITS)

SSA-1099	TP _____	SP _____
RRB-1099	TP _____	SP _____

ATTACH FORM(S) 1099-MISC (MISCELLANEOUS INCOME) AND 1099-NEC (NON-EMPLOYEE COMPENSATION)

ATTACH FORM(S) 1099-INT (INTEREST INCOME)

ATTACH FORM(S) 1099-DIV (DIVIDEND INCOME)

ATTACH FORM(S) 1099-B OR 1099-S (SALE OF STOCKS, BONDS, REAL ESTATE, ETC.)

ATTACH ALL STOCK SALE TRANSACTION INFORMATION, INCLUDING INITIAL COST INFORMATION.

ATTACH ALL SETTLEMENT STATEMENTS FROM THE SALE OF REAL ESTATE, INCLUDING THE SETTLEMENT STATEMENT FROM THE INITIAL PURCHASE OF THAT PROPERTY.

ATTACH FORM(S) 1098-T (EDUCATION TUITION AND FEES)

ATTACH ALL 1098-T FORMS AND A LIST OF YOUR QUALIFIED EDUCATION EXPENSES.

ATTACH FORM(S) 1098-E (STUDENT LOAN INTEREST PAID)

ATTACH ALL 1098-E FORMS THAT SHOW YOUR QUALIFIED STUDENT LOAN INTEREST PAID DURING THE YEAR.

ATTACH OTHER GOVERNMENT FORMS

FORM(S) 1099-G (CERTAIN GOVERNMENT PAYMENTS); SCHEDULE K-1S (PARTNERSHIP, S-CORPORATION, TRUST OR ESTATE INCOME); FORM(S) W-2G (GAMBLING OR LOTTERY WINNINGS); 1099-Q (PAYMENTS FROM QUALIFIED EDUCATION PROGRAMS).

ATTACH ANY FORMS THAT SHOW OTHER INCOME

ALIMONY, JURY DUTY, UNREPORTED TIPS, DISABILITY INCOME, ETC.

ATTACH INCOME AND EXPENSES FOR ANY BUSINESS, RENTALS, OR FARM ACTIVITIES

INCLUDE A LIST OF NEW EQUIPMENT ACQUIRED DURING THIS TAX YEAR (INCLUDING PURCHASE DATE AND PURCHASE COST).

INCLUDE A LIST OF EQUIPMENT SOLD DURING THIS TAX YEAR (INCLUDING DATE OF SALE AND SALE PRICE).

RETIREMENT PLAN CONTRIBUTIONS

TAXPAYER

SPOUSE

TRADITIONAL IRA CONTRIBUTIONS

ROTH IRA CONTRIBUTIONS

SEP-IRA CONTRIBUTIONS

KEOGH CONTRIBUTIONS

INDIVIDUAL 401(K) CONTRIBUTIONS

SIMPLE-IRA DEFERRAL CONTRIBUTIONS

SIMPLE-IRA MATCH CONTRIBUTIONS

Taxpayer and Spouse Name: _____

Name of person providing information: _____

Interviewer's Initials: _____ Date Provided: _____

1	Are you eligible to be claimed as a dependent on another person's return?	Y	N
2	Did your marital status change during 2020?	Y	N
3	Were you or your spouse considered 100% disabled during the tax year? Taxpayer Spouse	Y	N
4	Were you or your spouse legally blind during the tax year? Taxpayer Spouse	Y	N
5	Do you (or spouse, if married) plan to retire in 2021?	Y	N
6	Were there any births, deaths, or adoptions in your immediate family? *Enter date of death for taxpayer or spouse if during 2020 or 2021: _____	Y	N
7	Did you incur any adoption expenses during 2020?	Y	N
8	Were you (or spouse, if married) a member of the U.S. Armed Forces, National Guard or Reserves during 2020? *Are both spouses from the same state? *If not, what state are they from? _____	Y	N
9.	Did you receive income from Inactive Duty Training, National Guard Annual Training, or Reserve Components of the Armed Forces? (LES)	Y	N
10	Did you (or spouse, if married) receive "Active Duty Military Pay" in 2020? (LES)	Y	N
11	Did you incur any job-related moving expenses, only if military?	Y	N
12	Are any of your dependents not U.S. citizens or residents?	Y	N
13	Do you have dependents who must file?	Y	N
14	Do you have children under the age of 19 OR a full-time student under the age of 24, with INVESTMENT INCOME greater than \$2,200.00?	Y	N
15	Did you pay expenses for yourself, spouse, or dependent to attend college? (Form 1098T)	Y	N
16	Did you contribute to a Coverdell Education Savings Account or any section 529 Plan? Beneficiary's Name and Social: _____ Owner of Account: _____ Amount Contributed: _____	Y	N
17	Did you receive money from a Coverdell Education Saving Account or section 529 plan? (Form 1099-Q)	Y	N
18	Did you pay student loan interest for yourself, spouse, or dependent(s)? (Form 1098E)	Y	N
19	Did you provide over half the support for any other person during 2020?	Y	N
20	Did you change employment during the year?	Y	N
21	Did you make any charitable contributions?	Y	N
22	Are you (or spouse, if married) self-employed or receive hobby income?	Y	N

23	Did you receive any rental income from real estate or other property?	Y	N
24	Did you start a business, purchase a rental property or farm, or acquire interest in partnerships or S corps?	Y	N
25	Did you receive any income from raising animals or crops?	Y	N
26	Did you do any "like-kind" exchange of Real Estate in 2020?	Y	N
27	Did you receive payment on property or equipment sold in a prior year?	Y	N
28	Did you trade in any business assets when buying new business assets? (Purchase Documents)	Y	N
29	Did you sell property or equipment on installment in 2020?	Y	N
30	Did you purchase special fuels for non-highway use? *Type of use & Number of Gallons: _____	Y	N
31	Do you own an interest in any partnerships or S-Corporations? (Form K-1)	Y	N
32	Are you the beneficiary of a trust or estate? (Form K-1)	Y	N
33	Do you have any investments for which you are not personally "at risk" for?	Y	N
34	Did you pay any individual for domestic services in 2020?	Y	N
35	Did you make a loan at an interest rate below market rate?	Y	N
36	Did you receive tip income NOT reported to your employer?	Y	N
37	Did you (or spouse, if married) make a gift of cash, real property, or other assets worth more than \$15,000.00 to any individual or contribute to a prepaid tuition plan?	Y	N
38	Did you donate a vehicle in 2020 to a qualified charity? (Form 1098C)	Y	N
39	Did you purchase a motor vehicle, boat, trailer, motorcycle, RV, or other vehicle during 2020? Was vehicle purchased a hybrid or electric vehicle? Y____ N____ If yes, enter year, make, and model as well as date purchased	Y	N
40	Did you make energy efficient improvements to your home or purchase energy-saving property during 2020? (geo-thermal heat pumps, small wind turbines, and fuel cells)	Y	N
41	Did you buy, sell, refinance, foreclose, or abandon a principal residence or other real property? (Settlement Statement, 1099-C or 1099-A)	Y	N
42	Are you planning to purchase a home soon?	Y	N
43	Did you pay Real Estate Tax?	Y	N
44	Did you pay any Personal Property Tax?	Y	N
45	Did you pay any mortgage interest on a principal residence or second home? (Form 1098)	Y	N
46	Are you paying mortgage interest on any loans where the proceeds were NOT used to buy, build, or improve your main home or second home?	Y	N
47	If over 65 or 100% disabled, did you pay rent or Real Estate Tax on your principal residence?	Y	N
48	Did you own an interest in a Real Estate Mortgage Investment Conduit (REMIC) in 2020?	Y	N
49	Did you realize a gain or loss during 2020 on property that was taken from you by destruction, theft, seizure, or condemnation in a presidentially declared disaster area?	Y	N
50	Did you receive payments from a retirement plan, pension, IRA, or profit-sharing plan?	Y	N
51	Did you rollover any IRA or other qualified plan into another plan within 60 days of receiving the money?	Y	N

52	Did you make a total distribution from an IRA or other qualified plan?	Y	N
53	Did you take a distribution from an IRA or other qualified plan because of an event or hardship related to the Covid-19 epidemic?	Y	N
54	Have you made contributions to a traditional IRA or ROTH IRA?	Y	N
55	Did you convert all or part of a regular IRA into a ROTH IRA?	Y	N
56	Did you receive stock from a stock bonus plan with your employer NOT reported on your W2?	Y	N
57	Did you sell any stocks or bonds in 2020? (Form 1099-B or Annual Broker Statement)	Y	N
58	Did you invest any capital gains into a Qualified Opportunity Fund (QOF) within 180 days of realizing the capital gain? To be a QOF, at least 90% of the funds' assets must consist of Qualified Opportunity Zone business property.	Y	N
59	Did you surrender any U.S. savings bonds during 2020?	Y	N
60	Did you use the proceeds from Series EE or I U.S. savings bonds purchased after 1989 to pay for higher education expenses?	Y	N
61	At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?	Y	N
62	Did you have foreign income or pay any foreign taxes in 2020?	Y	N
63	At any time in 2020, did you have an ownership interest or signature authority over any bank or financial account in a foreign country? (Do not have to be owner of account)	Y	N
64	Were you the grantor of or transferor to a foreign trust which existed during another tax year?	Y	N
65	At any time in the year 2020, did you have an interest in or authority over any foreign financial institutions that exceeded \$50,000?	Y	N
66	Did you and your dependents have health care coverage for the full year? *Was it through the Market Place (Obamacare) (Form 1095-A) *If you or your dependents did not have health insurance during the year, were you part of a Health Sharing Ministry? (Amount paid to Ministry = \$ _____)	Y	N
67	Did you (or spouse, if married) have self-employed health insurance?	Y	N
68	Did your employer pay premiums on life insurance in excess of \$50,000.00, where the proceeds are payable to beneficiaries named by you?	Y	N
69	Do you have any medical expenses paid out of pocket there were not reimbursed by insurance?	Y	N
70	Did you contribute to or receive distributions from a Health Savings Account (HSA)? Self Family *Were all distributions used for Medical expenses (Form 1099-SA)	Y	N
71	Were any health insurance premiums paid with after tax dollars (check or withdrawal from bank) * Example: Supplemental insurance, Marketplace insurance; * NOT cancer, disability or most AFLAC	Y	N
72	Did you (or spouse, if married) participate in a medical savings account in 2020?	Y	N
73	Did you pay for Long-term care insurance out of your own pocket all year?	Y	N
74	Did you make gifts to a trust?	Y	N
75	Did you send in estimated tax payments for Federal or for State?	Y	N
76	Did you go through any bankruptcy proceedings in 2020? (Court documents of discharged items)	Y	N
77	Has any lender, bank, or credit card company cancelled any of your debt in 2020? (1099-C)	Y	N

78	Were you notified by the IRS or State taxing authority at any time during the year?	Y	N
79	Are you aware of any corrections that would require changes to a prior year's return?	Y	N
80	Did you pay or receive any alimony as ordered by an original or revised divorce decree dated prior to 2019? *Recipient's name & SSN: _____ Amount paid \$ _____	Y	N
81	Did you receive any disability payments in 2020?	Y	N
82	Did you receive any jury duty pay in 2020?	Y	N
83	Did you receive any gambling winnings in 2020?	Y	N
84	Did you receive any unemployment compensation in 2020?	Y	N
85	Did you receive the stimulus checks? How much did you receive? First Check: _____ Second Check: _____	Y	N
86	Did you receive any PPP loan proceeds for your business? If yes, was this loan forgiven, or do you expect it to be forgiven? Y____ N____ If forgiven or expected to be forgiven, have you included this amount as income in your business records? Y____ N____	Y	N
87	Did you receive any EIDL grant funds for your business or rental property? If yes, have you included this amount as income in your business records? Y____ N____	Y	N
88	Did you incur any expenses for daycare of a dependent while you, and your spouse, were working or attending school?	Y	N
89	Did you receive any other income or have any other expenses not included in this organizer?	Y	N
90	Do you have records/receipts to support ALL expenses being claimed for 2020?	Y	N
91	Would you like to file electronically?	Y	N
92	If you owe federal tax, would you like an automatic withdrawal from your account?	Y	N
93	If you receive a refund, would you like direct deposit?	Y	N
	If yes for question 84 or 85, please provide a voided check, a deposit slip WILL NOT be accepted Routing Number: _____ Account Number: _____ Type of account: _____ Name of Bank: _____		

