2014 Individual Taxpayer Organizer

Name of Taxpayer					SS#	-	-	
First	M.I.	Last	Email					
Occupation		Date of birth	/ /		Are you r	new to our	firm? 🗆	Yes □ No
Address		City			State		Zip	
County		Home phone ()		Work or c	ell ()	
Name of Spouse		•			SS#	-	-	
First	M.I.	Last	Email		1			
Occupation		Date of birth	/ /		Are you r	new to our	firm? 🗆	Yes □ No
(Enter information below only if different fi	om Taxpayer)				I			
Address		City			State		Zip	
County		Home phone ()		Work or c	ell ()	
If you moved during 2014, enter your previous address.					Date of move / /			
Were you divorced or separated during Have you received any notice from the Same-sex married couples are required where the married couple lives. Same-s Names of dependent children Child's full name	IRS or state rev to file as Marrie ex married coup Social Security	enue department wi ed Filing Jointly or M ples may also want t y # - - -	Married Filing Se o file amended i Date of birth	paratel returns Month home	'es □ No y for feder. for prior ta hs lived in in 2014	al returns, xx years. Relations taxpayer	regardle	College student?
Did any of the children have income ab		•		-			•	Yes □ No
Is it anticipated that a different taxpaye		aim a child listed abo	ove as their depo	endent	for tax year	r 2014? 🗖	Yes □ N	lo
Other dependents or people who lived						1.		
Name	Social Security	y #	Date of birth	Relat	ionship	Income		
	_	_						
	_	_						
If you are due a refund, would you like	it directly depo	osited into your bank	account? Name	of bank		<u> </u>		
Checking □ Savings □ Routing transit number Account number								
Ask your tax preparer for information a	bout depositing	g a refund into an IR	A account or sp	litting t	he deposit	into more	than one	e account.

Questions—All Taxpayers

"Yo	u" refers to bo	th taxpayer and spor	use—enter "	?" if unsure about a question.				
	☐ Yes ☐ No	Are either you or your spouse legally blind?						
	□ Yes □ No	Did you pay or receive alimony in 2014? Paid/Received \$ Recipient's SS#						
	□ Yes □ No	Did you have health insurance for you, your spouse, and all dependents for the entire year?						
	□ Yes □ No	Did you purchase health insurance through a public exchange?						
ES	□ Yes □ No	Will there be any significant changes in income or deductions next year, such as retirement?						
X TAX	□ Yes □ No	Have you paid alternative minimum tax (AMT) in previous years?						
LIFESTYLE & TAXES	□ Yes □ No	Did you pay anyone for domestic services in your home?						
	□ Yes □ No	Did you purchase a new energy-efficient car, truck, or van?						
	□ Yes □ No	Are you involved in bankruptcy, foreclosure, repossession, or had any debt (including credit cards) cancelled?						
	□ Yes □ No	Are you a member of the military?						
	☐ Yes ☐ No	Were you a citizen of or live in a foreign country, or receive income from a foreign investment or bank account?						
	☐ Yes ☐ No	Would you like to allow your tax preparer or another person to discuss your return with the IRS? Designee's name Phone number () PIN (any five digits)						
	□ Yes □ No	Were any children	born or adop	ted in 2014?				
	☐ Yes ☐ No	Were any children	Year in	Paid by you: Tuition \$	Student loan int	erest \$	Books \$	
		attending college?	college	Paid by student: Tuition \$	Student loan int	erest \$	Books \$	
NOI.		Other expenses						
CHILDREN & EDUCATION	☐ Yes ☐ No	Did you pay any tu	iition for a pi	rivate school for a dependent or take of	classes yourself?			
1 & EL		Student				Amount paid \$		
LDREI		Name and address of school						
СНІ	☐ Yes ☐ No	Yes □ No Did you pay for child or dependent care so you could work or go to school?						
		Name of provider EIN or SS #						
		Address			Amount paid \$			
	□ Yes □ No	To Do you have any children who earned more than \$2,000 of investment income?						
	□ Yes □ No	Did you, or will you, contribute any money to an IRA for 2014?						
SINTS	□ Yes □ No	Did you roll over any amounts from a retirement account in 2014?						
INVESTMENTS	□ Yes □ No	Did you sell or transfer any stock or sell rental or investment property?						
INVE	□ Yes □ No	Did you have any investments become worthless or were you a victim of investment theft in 2014?						
	□ Yes □ No	Were you granted, or did you exercise, any employee stock options during 2014?						
SNO	☐ Yes ☐ No	Did you pay any in	iterest on a lo	oan for a boat or RV that has living qu	arters?			
DEDUCTIONS	☐ Yes ☐ No	Did you pay sales t	axes on a ma	ijor purchase in 2014, such as a vehicle	e, boat, or home?	1		
13a	☐ Yes ☐ No	Did you have any ı	uninsured los	ss to your property in 2014?				
SS	☐ Yes ☐ No	Did you work from a home office or use your car for business?						
BUSINESS	□ Yes □ No	Did you receive any income from an installment sale?						
B	□ Yes □ No	Do you own a business or an interest in a partnership, corporation, LLC, farming activities, or other venture?						
	□ Yes □ No	Did you purchase or sell a main home during the year? If yes, provide closing statement.						
Li i	□ Yes □ No	If you sold a home, did you claim the First-Time Homebuyer Credit when it was purchased?						
HOME	□ Yes □ No	Did you refinance a mortgage or take a home equity loan? (Provide closing statement)						
	☐ Yes ☐ No	Did you use any mortgage loan proceeds for purposes other than to buy, build, or substantially improve your home?						
	☐ Yes ☐ No	Did you make any	new energy-	efficient improvements to your home	?			
Sta	ate informatio	n □ Full-year resid	lent 🖵 Part-	year resident Nonresident		· · · · · · · · · · · · · · · · · · ·		
Sta	ites of residence	ce during 2014 and d	ates					
Scl	nool district				Do you rent or	own your home	e?□Rent □Own	

Estimated Tax Payments — Tax Year 2014					
Installment	Date paid	Federal	Date paid	State	
First		\$		\$	
Second		\$		\$	
Third		\$		\$	
Fourth		\$		\$	
Amount applied from 2013 refund?		\$		\$	
Total		\$		\$	

Privacy Policy

The nature of our work requires us to collect certain nonpublic information. 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 a third party without your 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.

Tax Preparation Checklist

Please provide the following documentation:

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), Schedules K-1 from partnerships, S corporations, estates and trusts, and other income reporting statements, including all copies provided from the payer.
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).
If you are a new client, provide copies of last year's tax returns.
The completed Individual Income Tax Organizer. <i>Note:</i> If you choose not to fill out the organizer, you must at least answer the "Yes" or "No" questions under "Questions—All Taxpayers."
Copy of the closing statement if you bought or sold real estate.
Mileage figures for any automobile expenses claimed, including total mileage, commuting mileage, and business mileage.
Detail of estimated tax payments made, if any.

Tax Return Preparation

We will prepare your tax return based on information you provide. In the event your return is audited, you will be responsible for verifying the items reported. It is important that you review the return carefully before signing to make sure the information is correct. Unless otherwise stated, the services for preparation of your return do not include auditing, review, or any other verification or assurance.

☐ List of itemized deductions categorized on a separate sheet for medical, taxes, interest, charitable, and miscellaneous deductions.

Copy of all acknowledgement letters received from charitable organizations for contributions made in 2014.

☐ Income and deductions categorized on a separate sheet for business or rental activities.

Contact Us

There are many events that occur during the year that can affect your tax situation. Preparation of your tax return involves summarizing transactions and events that occurred during the prior year. In most situations, treatment is firmly established at the time the transaction occurs. However, negative tax effects can be avoided by proper planning. Please contact us in advance if you have questions about the tax effects of a transaction or event, including the following:

- Pension or IRA distributions
- Significant change in income or deductions
- Job change
- Marriage
- Attainment of age 591/2 or 701/2
- Sale or purchase of a business

- Sale or purchase of a residence or other real estate
- Retirement
- Notice from IRS or other revenue department
- Divorce or separation
- Self-employment
- Charitable contributions of property in excess of \$5,000