

Please fill out this tax organizer and include with the information you drop off.

ONLINE TAX ORGANIZER

Drop off date _____

Preparer's Name _____

Name (Taxpayer)

First Last

Name (Spouse)

First Last

Date of Birth _____

SSN (if new client): _____

Taxpayer's Cell # _____

Best Number to call for Questions _____

Date of Birth _____

SSN (if new client): _____

Spouse's Cell # _____

Email Address _____

Spouse Email Address _____

Did your address change since your last return?

Yes No (If yes, enter your new address)

Street _____ City _____ State _____ Zip _____

What school district do you live in?

Driver's License Info

(this information helps the IRS process your return quicker and prevent identity theft)

Taxpayer State _____ Number _____

Spouse State _____ Number _____

Issue Date _____ Exp Date _____

Issue Date _____ Exp Date _____

Has your Direct Deposit information changed?

Yes No (If yes, please complete information below)

Name of Bank _____

Checking or Savings

Routing Number _____

Account Number _____

Are you claiming any dependents this year?

Yes No

(If yes, please complete information below)

Name Relationship
(Ex.-Son, Daughter, etc.)

Lived with you
over 6 months
of the year?

If **NEW** dependant,
please provide date of birth and SSN
DOB SSN

Name	Relationship (Ex.-Son, Daughter, etc.)	Lived with you over 6 months of the year?	DOB	SSN
_____	_____	Yes No	_____	_____
_____	_____	Yes No	_____	_____
_____	_____	Yes No	_____	_____
_____	_____	Yes No	_____	_____

Please include the following documents (if applicable) when you drop off

- W-2 (wages) SSA-1099 (Social Security)
- 1099-R (IRAs/Pensions) 1099-INT (Interest Income)
- 1099-NEC (Nonemployee compensation) 1099-DIV (Dividend Income)

1099-K (Money received through 3rd Party Payment Platform Ex. - Paypal, Venmo, etc.)

Notes for the tax preparer:

Did you get married or divorced in 2022? YES NO

Are you claimed by anyone else on their tax return? YES NO

Did you receive, sell, exchange, or otherwise dispose of any financial interest in any crypto currency? YES NO

Did you receive unemployment income in 2022? YES NO
If Yes please provide form 1099-G

Did you have your health insurance through the marketplace not through your employer? YES NO
If Yes please provide form 1095-A

Did you buy or sell a personal residence in 2022? If so, please provide a copy of the closing disclosure(s). YES NO

Did you take any money out of retirement accounts (IRA, 401(k), etc) ? YES NO
If Yes please provide form 1099R

Do you have investments in stocks or mutual funds outside your retirement plan? YES NO

Did you have any stock sales? YES NO
If Yes please provide form 1099B

Do you have a dependent in college? YES NO
If Yes please provide their form 1098T
Amount paid for textbooks _____

Did you put any money into a College Savings Plan (529) in 2022? YES NO

Do you have any student loan interest? Yes No YES NO
If yes, please provide form 1098-E or Amount of interest paid _____

Do you or your spouse (or will you) contribute to an Individual Retirement Account (IRA) **outside of your employer?** YES NO

Taxpayer Regular _____ Roth _____

Spouse Regular _____ Roth _____

Did you or your spouse make contributions to an HSA account outside of your work? YES NO

Taxpayer _____ Spouse _____

Alimony Received _____ Alimony Paid _____
Date of Divorce Decree _____

Lottery/Gambling Winnings _____ Gambling Losses _____

Please provide Form W2-G

Medical & Dental

	Amount
Prescription Drugs	_____
Health Ins Premium (not deducted from paycheck)	_____
Supplemental Health Ins Premium	_____
Dental Ins Premium (Not deducted from paycheck)	_____
Long Term Care Premium-Taxpayer	_____
Long Term Care Premium-Spouse	_____
Doctors, Dentist, Hospital, Labs & X-ray	_____
Expenses for long term care	_____
Eyeglasses/Contact Lenses	_____
Hearing Aids/Batteries	_____
Other Medical Expenses	_____
Medical Miles	_____ miles

Taxes Paid

	Amount
Property Tax on Home	_____
Additional Homes or Land	_____

Federal Quarterly Estimated Tax Payments

Date	_____	Amount	_____
Date	_____	Amount	_____
Date	_____	Amount	_____
Date	_____	Amount	_____

State Quarterly Estimated Tax Payments

Date	_____	Amount	_____
Date	_____	Amount	_____
Date	_____	Amount	_____
Date	_____	Amount	_____

Auto Registration-IOWA ONLY

Year	Make/Model	Weight	Registration Fee
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Home Mortgage Interest Paid

Name of Bank/Lender	Amount
_____	_____
_____	_____
_____	_____

Charitable Contributions

	Amount
Church	_____
United Way	_____
Other : _____	_____
Other : _____	_____

Charitable Miles _____

Non-Cash/Non-Check Items:

Clothing or Furniture (bring receipts if over \$500) _____

Did you make energy efficient improvements to your home or purchase any energy-saving property during 2022? If yes, please attach details.

YES NO

If you are a licensed educator (K-12), how much of unreimbursed out-of-pocket expenses have you spent for supplies/materials for your classroom? _____

Child and Dependent Care Expense

Providers Name	Address	SS# or Fed ID#	Amount

Tuition & Textbook Fees for Dependents K-12

Dependent Name	Amount

If you have a separate business (Farm, Schedule C, Rental), you can utilize the following section to itemize your income and expenses for that business. This is for business expenses only and not for personal expenses or expenses incurred through W2 employment.

Schedule C, E, or F (businesses, rentals, or farms):

Please list income and expenses by category

Income		Expenses	
Income	_____	Cell Phone - Business Portion	_____
Rental Income	_____	Insurance	_____
Other Income:	_____	Interest Expense	_____
_____	_____	Office Expense	_____
_____	_____	Rent Expense	_____
_____	_____	Repairs	_____
		Supplies	_____
		Taxes	_____
		Utilities	_____
		Other Expenses:	_____
		_____	_____
		_____	_____
		_____	_____

Business Mileage _____ miles

Miles to and from your place of business are not deductible. Please be sure to keep a log of your business trips in case of an audit.