

2022 INCOME TAX ORGANIZER

Taxpayer's Name				Social Security Number	
Spouse's Name				Social Security Number	
Taxpayer's Occupation		Date of Birth (D.O.B.)		Blind?	
Spouse's Occupation		Date of Birth (D.O.B.)		Blind?	
Address				e-mail address	
City	State	Zip	Home Phone	Work Phone	

DEPENDENT CHILDREN (who lived with you more than 6 months)

1) Name	Social Security No.	D.O.B.	2) Name	Social Security No.	D.O.B.
3) Name	Social Security No.	D.O.B.	4) Name	Social Security No.	D.O.B.

OTHER DEPENDENTS

1) Name	Social Security	Time at home	Relationship	Income	Support by you	Support by dependent & others
2) Name	Social Security	Time at home	Relationship	Income	Support by you	Support by dependent & others

THINGS TO BRING

(if applicable):



- ☐ Last Year's Tax Return (if new client)
- ☐ W-2 Form(s) for Wages
- ☐ 1099 Form(s) for Interest, Dividends, Retirement, Social Security, Unemployment, & Other Income
- ☐ Amount of EIP (aka "stimulus") Received
- ☐ IRA Year-end Statements
- ☐ K-1s from Partnerships, Corporations or Estates
- ☐ Statements for Assets Held Outside the USA
- ☐ Cryptocurrency (e.g. Bitcoin) Sales/Earnings
- ☐ Business/Rental/Farm Income & Expenses
- ☐ Records of Estimated Taxes Paid
- ☐ HSA forms (1099-SA & 5498-SA)
- ☐ Childcare Provider Information
- ☐ Property Tax Statements
- ☐ 1098 Form(s) - Mortgage Interest, Tuition, Student Loans, Vehicle/Boat Donations
- ☐ Closing Papers for Purchases & Sales (including purchase and sale dates & amounts)
- ☐ All Other Statements Showing Income
- ☐ Charitable Contribution Details
- ☐ Last Pay Stub of the Year
- ☐ Voided Check for Direct Deposit
- ☐ Form(s) 1095 - Health Insurance
- ☐ Copy of Driver's License for Taxpayer & Spouse
- ☐ Copy of Social Security Card for New Family Members
- ☐ Pandemic Related Business Loans/Credits (bring details)

RENTAL/SELF-EMPLOYMENT/FARM INCOME

(see reverse for expenses)

Landlords (rents received) \$ _____
 Self-employment (total received) \$ _____
 Farm income (total received) \$ _____

PANDEMIC RELATED BUSINESS LOANS/CREDITS

Amount of PPP Loan Forgiven \$ _____
 EIDL Loan Advance Payment \$ _____
 Employee Retention Credits \$ _____

SALE OF STOCK OR OTHER PROPERTY

<u>Item:</u>	<u>Cost:</u>	<u>Sale:</u>
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

OTHER INCOME

Wages (forms W2) \$ _____
 Interest (forms 1099-INT) \$ _____
 Dividends (forms 1099-DIV) \$ _____
 Tips \$ _____
 Child Care \$ _____
 Retirement (forms 1099-R) \$ _____
 Roth Conversions \$ _____
 Jury Duty \$ _____
 Election Judging \$ _____

OTHER INCOME (cont.)

Census Work \$ _____
 EIP ("stimulus") Received \$ _____
 Gambling Winnings \$ _____
 Unemployment (1099-G) \$ _____
 Alimony Received \$ _____
 Prizes/Awards \$ _____
 Scholarships & Fellowships \$ _____
 Debt Cancellation \$ _____
 Partnerships & S-Corporations \$ _____
 Estates & Trusts \$ _____
 Social Security/RR Retirement \$ _____
 State Tax Refunds \$ _____
 Royalties (music/writing/other) \$ _____
 Sick Pay &/or Disability \$ _____
 Veteran's Payments \$ _____
 Withdrawals from HSA/MSA \$ _____
 Hobby Income \$ _____
 Odd Jobs/Side Jobs \$ _____
 Research/Survey/Online \$ _____
 Insurance Claims/Lawsuits \$ _____
 Public Assistance \$ _____
 Barter \$ _____
 Foreign Income \$ _____
 Cryptocurrency sales/earnings \$ _____
 All Other Income \$ _____

★ Bring statements if available. Double-check 'online' accounts that don't send paper statements (e.g. brokerage, HSA, tuition, etc.).

Potential Deductions and Credit Items

ADJUSTMENTS

Payments to an IRA

Traditional ☐ Roth ☐

Taxpayer Amount \$

SEP ☐ SIMPLE ☐

Spouse Amount \$

Penalty for Early Withdrawal

Alimony Paid \$: SS#: - -

Self-Employed Health Insurance

Student Loan Interest

Payments to HSA/MSA: Taxpayer Spouse

Classroom Materials for Educators

MEDICAL EXPENSES

Insurance & Medicare (not pretax)
Long Term Care Insurance
Prescriptions
Eyeglasses, Hearing Aids & Batteries
Doctors
Dentists
Hospital / Ambulance
Auto Mileage miles
Other Medical Expenses, Travel
Reimbursement
Did you receive reimbursement at work?

TAXES

Real Estate Taxes
State taxes paid in '21 for '20 or earlier
Sales tax paid on vehicles, boats, planes
Sales tax paid (from receipts)

2022 State Tax Estimates

date pd. \$ date pd. \$
date pd. \$ date pd. \$

2022 Federal Tax Estimates

date pd. \$ date pd. \$
date pd. \$ date pd. \$

Vehicle License Tabs, Pers. Prop. Tax

INTEREST EXPENSE

Home Mortgage—Paid to Financial Institutions (Form 1098)

First Mortgage/Refinance

Loan Origination Fee/Discount Fee

Second Mortgage

Home Equity

Equity loan used only to buy/build/improve home? Y ☐ N ☐

Mortgage Insurance

Second Home Interest Payments

Home Mortgage—Pd. to Individuals

(name, address, Social Security number)

Investment Interest: Margin Account

Other Investment Interest

OTHER MISCELLANEOUS EXPENSES

Gambling Losses
Impairment Related Work Expenses

HIGHER EDUCATION EXPENSES

Post Secondary Tuition/Req. Fees Paid
Date: Year in School

CONTRIBUTIONS

Churches (received)
Other Contributions of Money (received)
Charitable Auto Mileage
Volunteer Expenses (received)
Property Donated (for which you have receipts)
Fair market value (bring
documentation if over \$500)
Auto, Boat Donations (Form 1098C)
Qualified Charitable Distribution from IRA? Y ☐ N ☐ (bring details)

CASUALTY & THEFT LOSSES

Cost of Property Lost
Fair Market Value of Property
Insurance Reimbursement Received
Federally Declared Disaster Area? Y ☐ N ☐ (bring details)

AUTOMOBILE EXPENSE

Total Miles
Business Miles
Commuting Miles
Personal Miles
Jan. 1, 2022 Odometer Beginning:
Dec. 31 2022 Odometer Ending:
Gas & Oil
Interest
Tolls & Local Transportation
Lease Payments
Parking
Other:

BUSINESS EXPENSES

Taxes
Utilities
Insurance
Repairs
Supplies
Business Meals
Business Travel
Advertising
Professional Dues/Memberships
Legal/Professional Fees
Wages (bring copies of W2s/941s if they have been filed)
Contract Labor
Equipment (bring a list with details)
Other:

Is your primary place of business in your home? If yes, bring all home related expenses, total square footage and square footage of space that is exclusively and regularly used for business.

CHILD CARE EXPENSES

Names, addresses, and ID#s of provider(s), amount paid.

Do you have a dependent care benefit plan at work?

ADOPTION EXPENSES

Amount Paid: Date Finalized: (bring papers)

ENERGY CREDITS / PLUG-IN VEHICLE

(BRING RECEIPTS AND DETAILS)

Solar ☐ Wind ☐ Geothermal ☐ Plug-in Vehicle ☐

Please sign here _____ date _____