



The positive approach to taxing situations!

EMPLOYEE WAGES OR SALARIES: You must provide all W-2 forms with your completed Organizer. We cannot file your tax return without them!

PARTNERSHIPS, ESTATES, TRUSTS, LLC's and S-CORPORATIONS: Please provide all Schedule K-1 forms and associated instructions

INTEREST INCOME: Provide all Form 1099-INT, Interest Income Statement.

DIVIDENDS/CAPITAL GAINS DISTRIBUTION: Provide all Form 1099-DIV, Dividend Income Statement and end of year brokerage statement

IRA, PENSION, or ANNUITY DISTRIBUTION: Please provide all Form 1099-R's.

SALE OF STOCK, MUTUAL FUNDS, and PROPERTY:

Please provide all Form 1099-B's) It's critical that you get the original cost of stocks, mutual funds, real and personal property sold.

OTHER TAXABLE INCOME FORMS: Please provide all income statements.

State & local tax refunds (1099-G)

Unemployment Compensation (1099-G)

Alimony received/Alimony Paid

Commission/Bonus (not on Form W-2)

Social Security received (1099-SSA)

Gambling/prize winnings (Form W-2G). *If possible, provide Casino Win/Loss Statements.*

ADJUSTMENTS TO INCOME:

Mortgage interest statements for all home(s) (1098)

Student loan interest (1098-E)

Tuition and fees deduction (1098-T)

PERSONAL INFORMATION

Your Name:				Your SSN:				Date of Birth:		
Occupation:				Email:						
Home Phone:			Work Phone:				Cell Phone:			
Address:					City:				State:	
Zip Code:			County:				School District:			
Spouse Name:				Spouse SSN:				Date of Birth:		
Occupation:				Email:						
Home Phone:			Work Phone:				Cell Phone:			

DEPENDENT CHILDREN AND OTHER DEPENDENTS

First name:			Middle initial:		Last name:			SSN:		
Relation:			Birthday:			Months in home:		Childcare paid:		
First name:			Middle initial:		Last name:			SSN:		
Relation:			Birthday:			Months in home:		Childcare paid:		
First name:			Middle initial:		Last name:			SSN:		
Relation:			Birthday:			Months in home:		Childcare paid:		
First name:			Middle initial:		Last name:			SSN:		
Relation:			Birthday:			Months in home:		Childcare paid:		

ADDITIONAL 2024 INFORMATION

OTHER TAXABLE INCOME / ADJUSTMENTS TO INCOME

PLEASE PROVIDE ALL PROOF OF INCOME WITH INCOME STATEMENTS.
1099-G, Housing allowance statement, Court decree for alimony

Are you a teacher?	Yes:	No:	Did you receive commission or bonus not reported on your w2?		
Alimony received:			Alimony paid:		
				Name: SSN:	
Date of Divorce:			Student Loan Interest:		
				Jury Duty:	

ESTIMATED PAYMENTS

Estimated tax payments made:	
Amount applied from prior year return:	
Payment with extension to file:	

BRING DOCUMENTATION FOR MEDICAL COVERAGE:
1095-A only required if covered by marketplace insurance

MEDICAL EXPENSES

Medical, vision & Dental Insurance: (<i>Not paid by employer</i>):		Nursing home/private care:	
Long term medical insurance:		Lab MRI & X-ray expenses:	
Medical miles:		Hospital or emergency room:	
Prescription medication:		Ambulance:	
Doctors & Chiropractors:		Medical equip. & supplies:	
Dental expenses:		Travel (<i>airfare, lodging, meals</i>):	
Glasses, Contacts, Solution		Hearing aids & batteries	
Prescribed supplements:		Other healthcare professionals:	

Taxes & Interest Paid

State income tax due paid for last year (not withholdings from W-2):		First mortgage interest:	
City/county taxes paid last year:		Second mortgage interest:	
Home real estate taxes:		Home equity loan interest:	
Real estate taxes on lot/vacation home:		Mortgage interest points:	
Personal property:		Interest paid to an individual:	
Tags for vehicles and motorcycles:		Individual's name:	
Boat/motor/trailer tags:		Address:	
Tags for RV/camper/snow mobile:		SSN:	

CHARITABLE CONTRIBUTIONS

Church:		United Way & Red Cross:	
Church:		Arthritis Foundation, MDA, AMVETS:	
Other:		Easter Seals & DAV:	
Other:		YMCA & YWCA:	
Other:		Police & Firefighters:	
Ministry:		Volunteer school expenses & School Fundraising	
Sunday school material, food, drinks:		Mission trip expenses:	
Boy & Girl Scouts:		Educational TV/Radio	
Travel, Parking & Tolls		Charitable miles:	

NON-CASH CONTRIBUTIONS

NAME OF ORGANIZATION	ITEMS DONATED	DATE	VALUE
			\$
			\$

BUSINESS NAME:

What is your company's classification?	LLC	S CORPORATION	C CORPORATION	PARTNERSHIP	Sole-Proprietor
Business EIN:					
Gross receipts/sales: (Attach any 1099's received)					
Returns and allowances:					
Other income:					

BUSINESS EXPENSES

Accounting:	
Advertisement: <i>(business cards, flyers, brochures, TV, radio, car decals, promotional materials, etc.)</i>	
Bad debt: <i>(BUSINESS loans not collectible, bounced checks previously reported as income)</i>	
Bank charges: <i>(monthly service charge, cost of checks, NSF charges, ATM charges)</i>	
Cell phone: <i>(cost of cellular phone and/or pager, activation fee, & monthly charges)</i>	
Commissions: <i>(fees paid out to others for services rendered)</i>	
Computer	
Consulting	
Contributions	
Credit and collection cost	
Discounts	
Dues and subscriptions: <i>(annual renewal fee, credit card fee, Sam's Club, associations, AAA)</i>	
Education and training	
Employee benefits program	

Equipment rental/lease: <i>(vehicles, machinery, and equipment office equipment, copiers, etc.)</i>	
Freight: <i>(UPS, Fed Ex, Airborne, Express Mail, bus, trucks, train, ship)</i>	
Fuel <i>(equipment)</i>	
Gifts: <i>(gifts for prospects, customers, employees, supervisors, suppliers & associates)</i>	
Independent contractors: <i>(payments made to independent vendors and sub-contractors)</i>	
Building and equipment insurance	
Liability insurance	
Workers compensation insurance	
Other insurance	
Interest expenses: <i>(mortgage on building and land, car & business loans, finance charges from credit cards used for business purposes)</i>	
Internet	
Janitorial	
Laundry and dry cleaning: <i>(cost of cleaning uniforms or clothing on an overnight business trip)</i>	
Legal and professional: <i>(tax prep, accounting, IRS representation, business and financial consulting fees)</i>	
Marketing or sponsorships	
Meals and entertainment 50% limited	
Meals and entertainment 80% limited (For those subject to DOT requirements)	
Meals and entertainment 100% limited (Typically in house meetings)	
Meeting supplies	
Miscellaneous	
Office expense: <i>(paper, pens, pencils, envelopes, staplers, calculators, folders, toners, etc.)</i>	
Outside services and contractors	
Parking fees and tolls	

Payroll processing expenses:	
Pension, profit sharing, and other plans:	
Permits and fees:	
Postage, shipping, delivery:	
Printing:	
Rents: <i>(rent paid for business storefront or land)</i>	
Repairs and maintenance of office areas and business equipment: <i>(NOT VEHICLES IF USING MILEAGE DEDUCTION)</i>	
Salaries and wages: <i>(NOT FOR OWNERS IF SOLE PROPRIETOR)</i>	
Sales tax:	
Security services or equipment:	
Software:	
Supplies:	
Taxes and licenses:	
Telephone: <i>(long distance, 2nd line, call waiting & forwarding, conference calls, answering service)</i>	
Tools: <i>(hand tools, small equipment, books, videos, white board, planner, briefcase, etc. used to build your business)</i>	
Travel: <i>(lodging, meals, airfare, baggage fees, parking,</i>	
Utilities: <i>(electric, gas, and water for business facilities, NOT for a personal residence)</i>	
Uniforms: <i>(buy & clean uniforms, gowns, tuxedos & business clothes laundered at home)</i>	
Waste removal:	
Other expenses not listed:	

COST OF GOODS SOLD

Beginning of the year inventory: which is the same as last years end of the year inventory (if applicable)	
Products purchases for resale purposes: less item withdrawn for personal use	
Labor cost: directly associated with selling of products & services (outside salesman& broker)	
Materials and supplies: used to sell or make products for sale (bags, boxes, lumber, steel, nails)	
Other expenses to sell or manufacture: products or services not included above	
End of the year inventory (you should do a physical count of inventory available to be sold) (if applicable)	

NEW DEPRECIABLE ASSESTS

Description of items used for business	Date purchased or transferred	Cost or FMV of the item	Business use %

RENTAL AND ROYALTY INCOME AND EXPENSES

IF YOU HAVE MORE THAN 4 PROPERTIES OR ROYALTIES MAKE EXTRA COPIES OF THIS WORKSHEET

PROPERTY	TYPE OF PROPERTY	ADDRESS
1		
2		
3		
4		

PROPERTY	1	2	3	4
Rents & deposits received				
Royalties received				
Advertising and printing				
Travel				
Cleaning and maintenance				
Commissions and fees				
Insurance				
Legal and professional fees				
Management fees				
Mortgage interest				
Other interest				
Repairs: carpentry, hardware				
Electrical				
Carpet, tile, wood floors				
Painting and decorating				

A/C				
Other repairs				
Supplies:				
Taxes:				
Utilities:				
Electric				
Gas				
Oil				
Water				
Trash or landfill				
Cable or satellite				
Other:				
Bank charges				
Gardening/Landscaping				
Association dues				
Licenses & permits				
Pest control				
Office & postage expenses				
Telephone service				

AUTO EXPENSES

VEHICLE EXPENSES: MILEAGE RATE versus ACTUAL EXPENSES

***You can keep track of your business miles in your planner, on a calendar, or in an official mileage log, or with an app on a digital device (Mile IQ, Everlance, QBO).**

***You need the date, location, total miles (or beginning and ending odometer reading), and purpose of the business trip. Keep receipts for all vehicle expenses even if claiming mileage.**

***Note: Commuting miles from your residence to your work place and back are not deductible.**

***Bottom line: KEEP BUSINESS MILEAGE LOG or IRS will disallow your car and truck expenses.**

Description	Vehicle #1	Vehicle #2	Vehicle #3
Vehicle year, make, and model			
Date vehicle placed in service			
Cost of vehicle or FMV when placed in service			
A: End of year mileage			
B: Beginning of year mileage			
TOTAL miles for the year			
TOTAL BUSINESS MILES FOR YEAR			
Interest paid on vehicle			

VEHICLE EXPENSES – IF NOT CLAIMING MILEAGE:

Vehicle insurance premiums			
Repairs (engine, transmission, differential)			
Maintenance (shocks-struts, oil, breaks, wipers, tires, etc.)			
Tag and taxes paid			
Fuel			
Total lease payments made this year			

BUSINESS USE OF HOME EXPENSES

Business square footage:		Total home square footage:	
Mortgage interest:		Total rent paid for the year:	
Real estate taxes:		HOA, management or condo fees:	
Home owners insurance:		Renters Insurance	
Utilities: Electric, Water, Gas or Propane, Trash		Improvements & finance charges:	
Repairs & Maintenance:			

EDUCATION EXPENSES – Must have 1098-T to claim

Students name				Number of years enrolled			
Tuition:		Books		Supplies		Lab fees	
Computer/ Printer		Athletics		Registration			
Mobile phone		Test fees		Memberships			

MOVING EXPENSES (Only for Military Moves)

Miles from old home to old job:		Miles from old home to new job:	
Cost to pack household good & personal effects: (<i>boxes, blankets, dolly, tape, pads, labor cost, rope, straps, etc.</i>)			
Cost to ship & store household goods & personal effects: (<i>truck, trailer, van, labor, storage rent, fuel, tolls, parking, freight, shipping, etc.</i>)			
Cost of traveling (<i>fuel, airfare, rental car, bus, lodging, tolls, parking, etc.</i>)			
Other cost, not mentioned above, associated with moving:			
Amount of money reimbursed by the employer for the move:			

FARM INCOME

RESALE INCOME

Column #1: List any livestock & other items which you previously bought & have since resold.

Column #2: Write the price you paid for the item listed on Column #1.

Column #3: Write the price for which you sold the item listed on Column #1.

#1	#2	#3
	\$	\$
	\$	\$
	\$	\$

Production Income

Livestock		Produce	
Grains		Dairy	
Living plants		Wood	
By-products		Other crops	
Other livestock			

CCC Loans, Agricultural Payments, Crop Insurance

Payer:	Amounts:

OTHER INCOME

Custom hire: (machine work)		Federal irrigation subsidies:	
Income from debt cancellation:		Bartering income:	
Income not mentioned above:		Income not mentioned above:	

FARM EXPENSES:

CHEMICALS

Substance:	
Substance:	

CONSERVATION EXPENSES:

Leveling, grading, and contouring:		Channels and irrigation ditches:	
Dams, ponds, and watercourses:		Brush clearing, and windbreaks:	

CUSTOM HIRE

Job:	
Job:	
Job:	

FEED EXPENSES

Type:	
Type:	

FERTILIZERS AND LIME

Type:	
Type:	

FREIGHT, POSTAGE, AND TRUCKING

Freights:	
Postage:	
Trucking:	

FUEL AND OIL

Gasoline:		Diesel:	
Oil:		Other fuels:	

FARM BUSINESS INSURANCE

Insurer:	
Insurer:	
Umbrella:	

INTEREST EXPENSES

1 ST Mortgage		2 nd Mortgage	
Other interest		Other interest	

LABOR HIRED

Name:	
Name:	
Name:	

RENT OR LEASE EXPENSES

Vehicles:		Machinery:	
Equipment:		Land (pasture):	

SEEDS AND PLANT PURCHASED

Seed/Quantity:		Seed/Quantity:	
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STORAGE AND WAREHOUSEING

Type:		Type:	
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SUPPLIES PURCHASED

Type:	
Type:	

UTILITIES:

Gas:		Electric:	
Sewer:		Water:	
Trash or landfill:		Oil:	

VETERINARY, BREEDING, AND MEDICINE

Veterinary:		Breeding/ Stud fees:	
Vaccinations:		Other medicine:	

OTHER EXPENSES

Advertising:		AKA Registration:	
Bad debts:		Legal and professional fees:	
Ferrier services:		Office supplies:	
Shows and races:		Travel, meals and entertainment:	
Cell phone & Internet:		Repairs:	
Business phone:		Maintenance:	

NEW DEPRECIABLE ASSESTS

Description of items used for business	Date purchased or transferred	Cost or FMV of the item	Business use %