

INCOME TAX ORGANIZER

TAXPRO LLC
4414 MACIVER AVE NE
PO BOX 385
ST. MICHAEL, MN 55376
TEL: (763)497-3840 FAX: (763)497-1909
ACCOUNTING AND TAX PREPARATION

Taxpayer Name		Social Security Number			
Spouse's Name		Social Security Number			
Taxpayer Occupation	Date of Birth	Driver License Number & Expiration Date			
Spouse's Occupation	Date of Birth	Driver License Number & Expiration Date			
Address		Email Address			
City	State	Zip	Telephone Number		
DEPENDENT CHILDREN (who lived with your 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

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
- IRA Year-end Statements
- K-1s from Partnerships / Corporations /
- Estates / Trusts
- Statements for Assets held outside the USA
- **Cryptocurrency (Bitcoin) Seals / Earnings**
- Business / Rental / Farm Income & Expenses
- 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 checks 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

RENTAL / SELF-EMPLOYMENT / FARM INCOME

- (see reverse for expenses)
- Landlords (Rents Received) \$ _____
- Self-Employment (Total Received) \$ _____
- Farm Income (Total Received) \$ _____
- **Attach Stock or Others Sales, Item, Cost & Sale Amount**

OTHER INCOME

- Wages (forms W2) \$ _____
- Interest (forms 1099-INT) \$ _____
- Dividends (forms 1099-DIV) \$ _____
- Tips \$ _____
- Child Care \$ _____
- Pension / Annuities / Retirement \$ _____
- Roth Conversions \$ _____
- Jury Duty \$ _____
- Election Judging \$ _____
- Cryptocurrency sales / Earnings \$ _____

OTHER INCOME (continued)

- Gambling Winnings \$ _____
- Unemployment (1099-G) \$ _____
- Alimony Received \$ _____
- Prizes / Awards \$ _____
- Scholarships & fellowships \$ _____
- Debt Cancellation \$ _____
- Estates & Trusts \$ _____
- Social Security / RR Retirement \$ _____
- State Tax Refunds \$ _____
- Royalties \$ _____
- Sick Pay & or Disability \$ _____
- Withdrawals from HSA or MSA \$ _____
- Hobby Income \$ _____
- **MN Frontline Worker Pay** \$ _____
- Research / Survey / Online \$ _____
- Insurance Claims / Lawsuits \$ _____
- Public Assistance \$ _____
- Foreign Income \$ _____

Potential Deductions and Credit Items

ADJUSTMENTS

Payments to an IRA:

TYPES: Traditional, Roth, SEP, SIMPLE

Taxpayer amount: \$ _____ Type: _____

Spouse amount: \$ _____ Type: _____

Penalty for Early Withdrawal - _____

Alimony Paid: \$ _____ SS# _____

Self -Employed Health INS _____

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 \$ _____

Work Reimbursement \$ _____

TAXES

Real Estate Taxes \$ _____

Sales Tax paid: Vehicles, boats, planes \$ _____

Sales Tax paid: (from receipts) \$ _____

Vehicle License Tabs, Pers. Prop Tax \$ _____

State taxes paid for Earlier years \$ _____

State Tax Estimates

Date pd: _____ \$ _____ Date pd: _____ \$ _____

Date pd: _____ \$ _____ Date pd: _____ \$ _____

Federal Tax Estimates

Date pd: _____ \$ _____ Date pd: _____ \$ _____

Date pd: _____ \$ _____ Date pd: _____ \$ _____

INTEREST EXPENSE

Home Mortgage – Paid to Financial institutions (form 1098)

First Mortgage / Refinance \$ _____

Loan Origination Fee / Disc. Fee \$ _____

Second Mortgage \$ _____

Home Equity \$ _____

Equity Loan used only to buy/ build / improve home? Y or N

Mortgage Insurance \$ _____

Second home Interest Payments \$ _____

Home Mortgage – Pd to Individuals \$ _____

Attach name, address, social security number

Investment Interest: Margin Acct \$ _____

Other Investment Interest \$ _____

OTHER MISCELLANEOUS EXPENSES

Gambling Losses \$ _____

Impairment Related Work Expenses \$ _____

HIGHER EDUCATION EXPENSES (form 1098T)

PSEO Tuition / Req Fees paid \$ _____

Date: _____ Year in School: _____

CONTRIBUTIONS

Churches (statement) \$ _____

Other Contributions of money \$ _____

Charitable Auto Mileage _____

Volunteer Expenses (statement) \$ _____

Property Donated (for which you have receipts (FMV) Bring

documentation if over \$500.00 \$ _____

Auto, Boat, Donations (Form 1098C) \$ _____

Qualified Charitable Distribution from IRA? Y or N (Bring details)

CASUALTY & THEFT LOSSES

(In Presidentially declared disaster areas)

Cost of Property Lost \$ _____

Fair Market Value of Property \$ _____

Ins. Reimbursement Received \$ _____

AUTOMOBILE EXPENSE

Total Miles _____

Business Miles _____

Commuting Miles _____

Personal Miles _____

Odometer Reading: Beginning _____

Odometer Reading: Ending _____

documentation if over \$500.00 _____

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 W2's / 941 / 1099's) \$ _____

Contract Labor (1099) \$ _____

Equipment (Bring list with details) \$ _____

Other \$ _____

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

CHILD CARE EXPENSES

Childcare \$ _____

Bring Name, Address, ID number of provider(s) and amount paid

ADOPTION EXPENSES – (bring papers)

Amount Paid: \$ _____ Date Finalized: _____

ENERGY CREDITS

Solar ☐ Wind ☐ Geothermal ☐ Cost: \$ _____