

## 2022 Tax Organizer

Name	Social Security Number	Date of Birth	Occupation
Taxpayer:			
Spouse:			
Address:			
Email:		Phone:	Cell:

**Marital Status**

- Married (If yes, will you file jointly?  Yes  No)  
 Single  
 Head of Household  
 Widow(er), Date of Spouse's Death \_\_\_\_\_

Blind?   
 Disabled?

**Taxpayer**

**Spouse**

**Dependents**

Name	Social Security Number	Date of Birth	Relationship

**Document Checklist**

<input type="checkbox"/> Last year's tax return	<input type="checkbox"/> Form(s) 1095-A (Marketplace health insurance)
<input type="checkbox"/> W-2 (Wages)	<input type="checkbox"/> Form 1098-E (Student loan interest paid)
<input type="checkbox"/> 1099-Int, 1099-Div, 1099-B – Investment income statements	<input type="checkbox"/> Form 1098-T (Tuition paid for post-secondary education)
<input type="checkbox"/> 1099-R (Retirement distributions)	<input type="checkbox"/> Medical expenses
<input type="checkbox"/> SSA-1099 (Social security income)	<input type="checkbox"/> Form 1098 (Mortgage interest)
<input type="checkbox"/> 1099-G (Unemployment income and state tax refunds)	<input type="checkbox"/> Property tax statements
<input type="checkbox"/> Schedule K-1 from Partnership, S Corporation, or Trust	<input type="checkbox"/> Charitable donations (cash and non-cash)
<input type="checkbox"/> Self-employment income (include all 1099-Misc) and expenses	<input type="checkbox"/> 5498-SA / 1099-SA (HSA contributions/distributions)
<input type="checkbox"/> Rental income and expenses	<input type="checkbox"/> Any notices received from IRS in the past year
<input type="checkbox"/> Form W-2G (Gambling income)	<input type="checkbox"/> Voided check for direct deposit of refund

**Questions** (If answer yes to any of the following, please provide supporting documentation.)

<b>Yes</b>	<b>No</b>	Did you give a gift of more than \$15,000 to one or more people?
<b>Yes</b>	<b>No</b>	Did you receive, sell, send, exchange, or otherwise acquire any financial interest in virtual currency (e.g., bitcoin)?
<b>Yes</b>	<b>No</b>	Did you own or have financial interest in a foreign bank or financial account?
<b>Yes</b>	<b>No</b>	Did you pay or receive any alimony payments? <i>If yes, provide amount, recipient SSN, date of divorce or separation.</i>
<b>Yes</b>	<b>No</b>	Can anyone else claim any of the dependents you listed on the first page of this form?
<b>Yes</b>	<b>No</b>	Did you purchase or sell a main home or rental/investment property during the year? <i>If yes, provide closing statement.</i>
<b>Yes</b>	<b>No</b>	Did you refinance or modify a mortgage or take out a home equity loan? <i>If yes, provide closing statement.</i>
<b>Yes</b>	<b>No</b>	Did you make any new energy-efficient improvements to your home?
<b>Yes</b>	<b>No</b>	Did you, or will you, contribute any money to an IRA for 2021? (Traditional or ROTH?)
<b>Yes</b>	<b>No</b>	Did you pay for dependent care so you could work or go to school? <i>Name of provider, address, EIN/SSN, amount paid.</i>
<b>Yes</b>	<b>No</b>	Will there be any significant changes in income or deductions next year, such as retirement?

**Estimated Tax Payments – Tax Year 2022**

Date Paid	Federal	Date Paid	State
	\$		\$
	\$		\$
	\$		\$
	\$		\$

**Deductions and Credits**

Medical/Dental Expenses		Taxes Paid	
Medical Insurance Premiums (paid by you)	\$	Property Taxes	\$
Prescriptions	\$	Personal Property Taxes (vehicle tabs)	\$
Doctors / Dentists / Hospitals	\$	Sales Tax Paid (e.g. vehicle, boat, RV)	\$
Other:	\$	State Income Tax Paid	\$
Medical Miles (# of miles)	#	Other:	\$

Charitable Contributions		Other	
Churches	\$	Adoption Expenses	\$
Volunteer Expenses (unreimbursed)	\$	Post-secondary Tuition and Expenses	\$
Other:	\$	Self-Employed Health Insurance	\$
Non-Cash (include receipts)	\$	Gambling Losses (to extent of winnings)	\$
Volunteer Miles (# of miles)	#	Other:	\$