

# Tax Organizer 2024



American Tax & Accounting

(828) 324-4047

**Name:**  
 Primary: \_\_\_\_\_ SS # \_\_\_\_\_ Birthdate: \_\_\_\_\_  
 Spouse: \_\_\_\_\_ SS # \_\_\_\_\_ Birthdate: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
 \_\_\_\_\_ County of Residence: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Occupation: Taxpayer: \_\_\_\_\_ Spouse: \_\_\_\_\_  
 Taxpayer: 65 or over Blind/Disabled Spouse: 65 or over Blind/Disabled

**Dependents:**

Name	Birthdate	SS #	Relationship	Number of Months Live in your Home during 2024?	Full-time College Student?

If you have an IP PIN, List here: Primary: \_\_\_\_\_ Spouse: \_\_\_\_\_

Your **FILING STATUS** is determined on **December 31, 2024**  
 (Place an "X" beside your filing status below)

**SINGLE**

- \_\_\_\_\_ Single
- \_\_\_\_\_ Single, being claimed by someone else
- \_\_\_\_\_ Single with a dependent child
- \_\_\_\_\_ Single with a dependent relative (Child who is **NOT** a qualifying child, parent, grandparent, brother, sister, stepbrother, stepsister, half-brother, half-sister, stepmother, stepfather, mother-in-law, father-in-law, brother-in-law, sister-in-law, son-in-law, uncle, aunt, nephew, or niece)

**First Time Here?**

**Bring a copy of  
your Last Year's  
Tax Returns**

**HEAD OF HOUSEHOLD**

- \_\_\_\_\_ Single with a dependent child (you are custodial parent)
- \_\_\_\_\_ Single with a dependent parent (Parents live with you or their home and you pay over half of the cost of maintaining their home)
- \_\_\_\_\_ Married living apart from spouse for over 6 months of the year **and** paid over half of the cost of keeping up a home **and** that home was the main home of your child, stepchild, or foster child for over 6 months of the year.  
**Spouse must file MFS tax return.**

**MARRIED**

- \_\_\_\_\_ Married filing a joint tax return
- \_\_\_\_\_ Married filing a separate return
- \_\_\_\_\_ Married, check both ways for best advantage

**PLACE A “X” ON ALL ITEMS YOU HAVE FOR 2024**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> W-2 Forms                                  | <input type="checkbox"/> Form 1099-B    | Broker Transactions                      |
| <input type="checkbox"/> Interest / Dividend Income                 | <input type="checkbox"/> Form 1099-C    | Cancellation of Debt                     |
| <input type="checkbox"/> Social Security                            | <input type="checkbox"/> Form 1099-LTC  | Long Term Care                           |
| <input type="checkbox"/> Trust Income                               | <input type="checkbox"/> Form 1099-K    | Payments from goods/services             |
| <input type="checkbox"/> Unemployment (1099-G)                      | <input type="checkbox"/> Form 1099-R    | Retirement Income                        |
| <input type="checkbox"/> Money from IRA/Roth IRA                    | <input type="checkbox"/> Form 1099-NEC  | Nonemployee Compensation                 |
| <input type="checkbox"/> Cash-in US Savings Bonds                   | <input type="checkbox"/> Form 1099-MISC | Income                                   |
| <input type="checkbox"/> Gambling Winnings (W-2G)                   | <input type="checkbox"/> Form 1099-PATR | Co-op Payments                           |
| <input type="checkbox"/> Marketplace Insurance (1095-A)             | <input type="checkbox"/> Form 1099-Q    | 529 College Savings Plan                 |
| <input type="checkbox"/> Sell Land or Home                          | <input type="checkbox"/> Form 1099-S    | Sale of Real Estate                      |
| <input type="checkbox"/> Student Loan Interest                      | <input type="checkbox"/>                | Sell Bitcoin or Cryptocurrency           |
| <input type="checkbox"/> Teacher Classroom Expenses                 | <input type="checkbox"/>                | Sch K-1 from Partnership                 |
| <input type="checkbox"/> Contribute to IRA or Roth IRA              | <input type="checkbox"/>                | Sch K-1 from “S” Corporation             |
| <input type="checkbox"/> Alimony Received<br>Date of Divorce: _____ | <input type="checkbox"/>                | Alimony Paid – SSN of Recipient<br>_____ |
| <input type="checkbox"/> Other Income: _____                        | <input type="checkbox"/>                | Student Loan Forgiveness                 |
| <input type="checkbox"/> Rental                                     | <input type="checkbox"/>                | Clergy                                   |
| <input type="checkbox"/> Vacation/Short-Term Rental                 | <input type="checkbox"/>                | Professional Gambler                     |
| <input type="checkbox"/> Land Rental                                | <input type="checkbox"/>                | Ebay or Online Business                  |
| <input type="checkbox"/> Self Rental                                |   |  |

**Required Minimum Distribution (RMD)**

Yes or No:

\_\_\_\_\_ Were You or Your Spouse (if filing Jointly) Required to Receive a distribution from your IRA in 2024?

\_\_\_\_\_ Did you take this required distribution?

## DEPENDENTS

**\*\*NOTE** – You must provide **proof** that any dependent that you claim is your dependent.

A copy of a school record, report card, child care provider statement, medical bill from a doctor or hospital, social service agency, health insurance document, financial institution statement, etc.

This statement **must** show the child’s name with your address.

*(Yes/No)*

\_\_\_\_\_ Did you have any changes in dependents during the year?

\_\_\_\_\_ Did you pay over half of costs for your dependents that lived with you?

\_\_\_\_\_ Could another person qualify to claim any of your dependents?

\_\_\_\_\_ Do any of your children have income from interest and dividends over \$2,600?

\_\_\_\_\_ Did you pay child care or dependent care expenses so you could work in 2024?

\_\_\_\_\_ Did your dependent receive income from a Trust, Inheritance, Prize, or Gift?

\_\_\_\_\_ Did you have any children under the age of 19 or 19 to 23 year old students with unearned income of more than \$1,250?

## CHILD CARE EXPENSES (or Dependent Care)

Name of provider	Address	SSN or EIN	Amount Paid	Child’s Name

Were the Child Care Expenses paid by You/Spouse \_\_\_\_\_ or Someone Else \_\_\_\_\_ Relationship \_\_\_\_\_

## EDUCATION EXPENSES (provide Form 1098-T and receipts for course materials, if any)

*(Yes or No)*

\_\_\_\_\_ Did you pay tuition and fee expenses that were required for attending a college, university, or vocational school for yourself, your spouse, or a dependent during the year (even if classes were attended in another year)? Provide **Form 1098-T** from the college.

\_\_\_\_\_ Is the student pursuing a degree or certificate or other credential?

\_\_\_\_\_ Did you receive a distribution from a 529 College Savings Plan?  
If yes, send **Form 1099-Q** and all receipts for expenses paid in 2024

\_\_\_\_\_ Did you pay any student loan interest in 2024? How much \_\_\_\_\_ (or send the form)

\_\_\_\_\_ Have you completed 4 years of post-secondary education (at the beginning of the year)?

\_\_\_\_\_ Student Loan Forgiveness (provide documentation)

**GENERAL QUESTIONS**

\_\_\_\_\_ Did your address change since last Year?

\_\_\_\_\_ Did any member of your household have healthcare coverage through the Marketplace **OR** receive a subsidy to reduce your insurance cost? Provide **Form 1095-A**

\_\_\_\_\_ Did you receive a distribution or pay medical costs with a HSA plan?  
You should receive a form for the amount of your distribution. Give me a copy.

\_\_\_\_\_ Did you pay into a HSA outside of your employer or if Self Employed?

**FOREIGN INCOME or ACCOUNTS**

\_\_\_\_\_ During 2024, did you receive as a reward, award, or payment or sell, exchange, give, or otherwise dispose of a digital asset?

\_\_\_\_\_ Did you have any income from, or pay taxes to a foreign country?

\_\_\_\_\_ Do you have signature authority on any foreign Bank/Broker account?

\_\_\_\_\_ Did you receive any funds from a foreign trust, partnership, or inheritance?

\_\_\_\_\_ Did the aggregate value of your foreign accounts exceed \$10,000 at any time during the year?

**NORTH CAROLINA, SOUTH CAROLINA, & OTHER STATES**

\_\_\_\_\_ What is your state of Residence? \_\_\_\_\_ What state issued your Driver’s License? \_\_\_\_\_

\_\_\_\_\_ Did you move in/out of NC in 2024? \_\_\_\_\_ When did you move in/out of NC? \_\_\_\_\_

\_\_\_\_\_ (YES or NO) Did you or any family member make any purchases from out-of-state retailers that did not charge state sales tax?  
If yes, how much was purchased? \_\_\_\_\_

\_\_\_\_\_ (YES or NO) Are you retired US Armed Forces with at least 20 years of service or medically retired (not severance payments) or Survivor Benefit Plan to a beneficiary of a retired member?

**BUSINESS QUESTIONS**

\_\_\_\_\_ Do you have a business? \_\_\_\_\_ What do you do? \_\_\_\_\_

When did your business begin? \_\_\_\_\_ Are you a LLC? \_\_\_\_\_

Do you have employees? \_\_\_\_\_ Or a business partner? \_\_\_\_\_

Do you have a business checking account? \_\_\_\_\_

Did you receive a Form 1099-K? \_\_\_\_\_

**ESTIMATED INCOME TAXES PAYMENTS (not from W-2 or 1099 forms)**

<b>2024 Due Dates</b>	Federal	North Carolina	Other State
1 <sup>st</sup> Quarter – April 15, 2024	_____	_____	_____
2 <sup>nd</sup> Quarter – June 15, 2024	_____	_____	_____
3 <sup>rd</sup> Quarter – September 15, 2024	_____	_____	_____
4 <sup>th</sup> Quarter – January 15, 2025	_____	_____	_____

**Prior Years' Tax Payments (paid in 2024)**

2023	_____	_____	_____
2022 or earlier	_____	_____	_____

**For clients who make ESTIMATED TAX payments**

We can setup your FEDERAL and/or NORTH CAROLINA to automatically be drafted.

Estimated Tax Payment Dates for 2025: April 15, June 16, September 15, & January 15, 2026

NOTE – Auto Draft Estimated Tax Payments can only be setup at the time your 2024 Income Tax Return is electronically filed.

Setup my Federal Estimated Tax payments to Auto Draft

Setup my North Carolina Estimated Tax payments to Auto Draft

**If you Owe**

We can set up your Balance Due payment to draft from your bank account on a date you specify up to April 15.

After April 15, it will draft when the return is process; 2-3 days normally.

**Federal**            ----- Setup my Balance Due to draft on this date: \_\_\_\_\_

**North Carolina**    ----- Setup my Balance Due to draft on this date: \_\_\_\_\_

**(Name of State)** \_\_\_\_\_ Setup my Balance to draft on: \_\_\_\_\_

# REFUNDS

## DIRECT DEPOSIT INFO

Up to 2 accounts are available.

If you want to split into 2 accounts,  
What percentage for each account:

\_\_\_\_\_ Account #1

\_\_\_\_\_ Account #2

### ACCOUNT #1

Owner of account:  Taxpayer  Spouse  Joint

Type of account:  Checking  Traditional Savings  Traditional IRA  
 Treasury Direct  Archer MSA Savings  HSA Savings  SEP IRA

Name of financial institution: \_\_\_\_\_

Financial institution Routing Transit Number: \_\_\_\_\_

Your account number: \_\_\_\_\_

### ACCOUNT #2

Owner of account:  Taxpayer  Spouse  Joint

Type of account:  Checking  Traditional Savings  Traditional IRA  
 Treasury Direct  Archer MSA Savings  HSA Savings  SEP IRA

Name of financial institution: \_\_\_\_\_

Financial institution Routing Transit Number: \_\_\_\_\_

Your account number: \_\_\_\_\_

# American Tax & Accounting

## Agreement for the Preparation of an Income Tax Return

Thank you for choosing American Tax & Accounting to assist you in the preparation of your individual income taxes. This letter confirms the terms of our engagement with you and outlines the nature and extent of the services we will provide.

We will prepare your federal and state income tax returns (if applicable). We will depend on you to provide the information we need to prepare complete and accurate returns. We may ask you to clarify some items but will not audit or otherwise verify data you submit. An Organizer is available to help you collect the data required for your return. The Organizer will help you avoid overlooking important information. By using it, you will contribute to efficient preparation of your returns and help minimize the cost of our services.

We will perform accounting services only as needed to prepare your tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for you to clarify some of the information you submit.

The law imposes penalties when taxpayers underestimate their tax liability.

We will return your original records to you at the end of this engagement. You should securely store these records, along with all supporting documents as these items may be needed to prove accuracy and completeness of a return. We are not required to keep copies of your tax returns.

Our engagement to prepare your income tax returns will conclude with the delivery of your completed returns to you. If you are filing returns that are over 3 years past due, you will be solely responsible to file the returns with appropriate taxing authorities.

Payment for the preparation of income tax returns will be due upon completion or when you pick up your copy of the tax returns. You can choose to have a paper copy of your return, or an electronic copy. For the electronic copies, you must include your email address on the Main Info page. Additional copies are available for \$45 per year for Federal returns, and \$14 per year for State returns.

The client agrees to limit our liability for any claims they may make against us to the fee that they paid us for the return and all claims must be made within 180 days from the date the preparer signs the tax return.

This agreement is for income tax preparation only. If you receive any letter or notices from the government for the tax year(s) indicated below, we will explain the letter or notice to you, free of charge.

Extensions are **not** automatic. You **must request** that we file an Extension for you.

If you want us to file an “extension,” indicate below. An extension of time to file is not an extension of time to pay. If a payment is due or expected to be due, it must be sent in with the extension. Failure to do so may result in penalties and interest being assessed.

**Income Tax Return(s):**

\_\_\_\_\_ **Extension** (2024 only)

\_\_\_\_\_ **Federal 1040**

Select Tax Year(s): **2024**    2023    2022    2021    2020    Other: \_\_\_\_\_

State Income Tax: \_\_\_\_\_ **NC**    \_\_\_\_\_ **SC**    Other State: \_\_\_\_\_

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, please sign the enclosed copy of this letter in the space indicated

We appreciate your confidence in us. Please call if you have questions.

Wayne Kight EA, Accountant  
American Tax & Accounting

\_\_\_\_\_  
Client Signature (print & sign)

\_\_\_\_\_  
Date