

# Tax Organizer

## 2019

American Tax & Accounting  
(828) 324-4047

Name: Taxpayer \_\_\_\_\_ SS No. \_\_\_\_\_ Birthdate \_\_\_\_\_  
 Spouse \_\_\_\_\_ SS No. \_\_\_\_\_ Birthdate \_\_\_\_\_  
 Address: \_\_\_\_\_ Telephone (Day) \_\_\_\_\_  
 \_\_\_\_\_ Telephone (Evening) \_\_\_\_\_  
 Email Address: Taxpayer: \_\_\_\_\_ Spouse: \_\_\_\_\_  
 Occupation: Taxpayer: \_\_\_\_\_ Spouse: \_\_\_\_\_  
 Taxpayer: 65 or over Blind/Disabled Spouse: 65 or over Blind/Disabled

**Dependents:**

Name	Birthdate	Social Security Number	Relationship	Number of Months Lived in your Home during 2019?

Your FILING STATUS is determined on December 31, 2019

**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)

**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 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

Ver 3/030220

## 2019 INCOME TAX CHECKLIST

### GENERAL QUESTIONS                      Y= Yes N=No                      Please Provide Documentation

- \_\_\_\_\_ Did your address change since you filed your 2018 income tax return?
- \_\_\_\_\_ Were there any births, deaths, marriages, or divorce in your immediate family during 2019?
- \_\_\_\_\_ Did you or your spouse receive any tips not reported to your (or spouse's) employer?
- \_\_\_\_\_ Did you pay student loan interest during 2019?
- \_\_\_\_\_ If you are an educator, did you have un-reimbursed work-related expenses? Amount \_\_\_\_\_
- \_\_\_\_\_ Did you have any debt that was cancelled or settled for less than amount owed in 2019? Provide Form 1099-A or a Form 1099-C.
- \_\_\_\_\_ Did you have (or expect to get) a Schedule K-1 from a S Corporation, partnership, or trust?
- \_\_\_\_\_ Did you apply an overpayment of your 2018 taxes to your 2019 taxes?
- \_\_\_\_\_ Did you make any estimated payments toward your 2019 taxes? (Not from W-2 or 1099)

### **DEPENDENTS**

- \_\_\_\_\_ Did you have any changes in dependents during the year?
- \_\_\_\_\_ Can another person qualify to claim any of your dependents?
- \_\_\_\_\_ Did all of your dependents live with you all year?
- \_\_\_\_\_ Did you have any childcare expenses during the year?
- \_\_\_\_\_ Does your child have income of \$2200 or more from interest, dividends, trust, etc.?

**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, medical bill from a doctor or dentist,  
social service agency, health insurance document, etc.  
The child's name and address must be the same as your address

### **HEALTH INSURANCE**

- \_\_\_\_\_ Did any member of your household have healthcare coverage through the Marketplace? If yes, provide copies of Form 1095-A
- \_\_\_\_\_ Did you receive any distributions from a Health Savings Account (HSA), Archer MSA, or Medicare Advantage MSA during the year?

## **INCOME, PURCHASES, SALES, and DEBT INFORMATION**

\_\_\_\_\_ Did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currencies?

\_\_\_\_\_ Did you rent out your home or use it for business?

\_\_\_\_\_ Did you sell property, rental property, or a business or business interest during the year?

\_\_\_\_\_ Did you start a business or purchase rental property during the year?

\_\_\_\_\_ Did you buy or sell stocks, bonds, or other investments during the year?

\_\_\_\_\_ Did you sell a personal residence during 2019? If yes, provide purchase and sale closing documents

\_\_\_\_\_ Do you sell products and get paid by PayPal? Provide Form 1099-K

## **FOREIGN FINANCIAL INFORMATION**

\_\_\_\_\_ Did you have a financial interest in or signature authority over a financial account or asset located in a foreign country?

\_\_\_\_\_ Were you a grantor of or transferor to a foreign trust?

\_\_\_\_\_ Did you earn interest from, or are you an authorized signature holder on, a foreign bank account?

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

\_\_\_\_\_ Did you sell, exchange, or send any Bitcoin, Litecoin, Zcash, Dash, or any other Crypto Currency?

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

## **TAX CREDITS For Homeowners**

\_\_\_\_\_ Exterior windows, including skylights

\_\_\_\_\_ Exterior doors, insulation and/or systems which reduce heat gain or loss

\_\_\_\_\_ Heat pumps, water heaters, and central a/c units

\_\_\_\_\_ Natural gas, propane, or oil furnaces or hot water boilers

\_\_\_\_\_ Solar water heaters, solar electric power, small wind systems, geothermal heat pumps, or fuel cells

(Tax Law 12/20/19 made these credits retroactive from 1/01/2018)

\_\_\_\_\_ Have you qualified for any energy tax credit from 2006 - 2017? How Much? \_\_\_\_\_

**ITEMIZED DEDUCTIONS (NC allows a lesser amount than the Federal return)**

**Medical – Out of pocket, not reimbursed**

Health Insurance	Doctors, Dentists	Long-term Care Insurance
Prescription Drugs	Hospitals, Labs	Eyeglasses, Contacts
Orthopedic Shoes, Braces	Hearing Aids	Mileage

**Taxes – paid during 2019 only**

Real Estate	Cars/Trucks	RV	Boat	Jet Ski	Trailers	Motorcycles
State Income Taxes		2019 Estimated Income Taxes				Foreign Taxes

**Home Mortgage Interest**

Personal Residence	Second/Vacation Home	Home Equity
--------------------	----------------------	-------------

Mortgage Insurance Premiums	Investment Interest
-----------------------------	---------------------

**Donations**

Cash, check, or credit card (send acknowledgement from Organization if \$250 and over)

NON-cash contributions (clothes, furniture, household items, etc)? Attach charity receipt and list of items donated. For daily non-cash donations of \$500 or more include a value to each item.

Non-cash donations of \$5000 or more, copy of appraisal from a qualified appraisal

Volunteer mileage \_\_\_\_\_ miles

**RETIREMENT PLANS**

\_\_\_\_\_ Did you contribute to an IRA for 2019? Amount: \_\_\_\_\_ Spouse amount: \_\_\_\_\_

\_\_\_\_\_ Did you contribute to a Roth IRA for 2019? Amount: \_\_\_\_\_ Spouse amount: \_\_\_\_\_

\_\_\_\_\_ Did you recharacterize any IRA's this year?

\_\_\_\_\_ Did you receive a distribution from a retirement plan this year? You will get a Form 1099-R

\_\_\_\_\_ Did you get an early distribution to pay for medical expenses, higher education expenses, health insurance premiums while unemployed, or to an alternative payee under a domestic relations order? Please circle which applies to your situation, if any.

**EDUCATION**

\_\_\_\_\_ Do you pay tuition expenses that were required for attending 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

\_\_\_\_\_ Did you purchase any course materials that were required for study? Send receipts

\_\_\_\_\_ Do you have student loan interest paid in 2019?

**NORTH CAROLINA**

\_\_\_\_\_ What is your state of Residence? What state issued your driver's license? \_\_\_\_\_

\_\_\_\_\_ Do you have income from more than one state? List States: \_\_\_\_\_

\_\_\_\_\_ Did you, your spouse, and/or your dependents make any purchases from out-of-state retailers that did not charge state sales tax? If yes, how much was purchased \$ \_\_\_\_\_ Over \$1000? \_\_\_\_\_

**Estimated Income Tax Payments**

	<u>Federal</u>	<u>North Carolina</u>	<u>Other State</u>
<b>2019 and Due Dates</b>			
1st Quarter - April 15, 2019	_____	_____	_____
2nd Quarter - June 15, 2019	_____	_____	_____
3rd Quarter - September 15, 2019	_____	_____	_____
4th Quarter - January 15, 2020	_____	_____	_____

**Concerns to discuss with accountant:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Will you be bringing additional information to prepare your 2019 Income Tax returns?**

List: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## REFUNDS

### DIRECT DEPOSIT INFO

Account #1 Name of Bank: \_\_\_\_\_

Routing Number (9 digits) \_\_\_\_\_ or attach a Voided Check

Account Number \_\_\_\_\_

Type of Account: \_\_\_\_\_ Checking \_\_\_\_\_ Savings \_\_\_\_\_ IRA

**If you owe a**

### **BALANCE DUE (from Bank Account listed above)**

We can setup your Balance Due Payment to draft from your bank account on a date you specify. This can be done for Federal & State tax return balances.

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

\_\_\_\_\_ North Carolina – Setup my Balance Due to be draft on: \_\_\_\_\_

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

### **For clients who make ESTIMATED TAX payments**

We can setup your FEDERAL Estimated Tax payments to automatically be drafted

\_\_\_\_\_ Setup my 2020 Estimated Income Tax payments to be drafted from my Bank Account listed above

Estimated Tax Payment Dates: April 15, June 15, September 15, and January 15

# RENTAL INCOME / EXPENSE

<b>NAME</b>	<b>SS#</b>
-------------	------------

T= Taxpayer  
S= Spouse  
J= Joint

If you do not take an active part in the operation of the property.

Number of days rented during year? \_\_\_\_\_

Number of days you or your family member resided at location? \_\_\_\_\_

T S J	Property Code	Date Acq.		Description of Property	Location		
	A						
	B						
	C						
	D						

INCOME	A	B	C	D
Rents Received				
Deposits Received				
Other:				

EXPENSES		A	B	C	D
Real Estate Taxes					
Mortgage Interest					
Other Interest					
Insurance					
Cleaning/Maintenance					
Yard/Snow Removal					
Rubbish Hauling/Trash					
Supplies					
Fuel					
Electricity					
Water/Sewer					
Wages/Labor					
Management Fees (Commissions)					
Homeowners Assoc. Dues					
Travel Expense (Detail)					
Total Miles Driven	#	#	#	#	#
Auto Travel Mileage	Jan. – June	#	#	#	#
	July – Dec.	#	#	#	#
Telephone					
Advertising					
Legal & Professional					
Repairs - Painting					
- Plumbing					
- Electrical					
- Appliances					
-					
Refunds					
Other:					
Personal Use (Percent or Amount)	%	%	%	%	%

Comments/Questions

List on back, purchases of furniture, appliances, equipment and major property improvements.

# 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. We will, of course, inform you of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Please call us if you have concerns about such penalties.

You will be responsible for providing accurate information pertaining to the provisions of the Affordable Care Act (Obamacare) such as Health Insurance coverage for you, spouse (if married), and your dependents (if any), including the exact months of coverage.

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, canceled checks, etc., as these items may later be needed to prove accuracy and completeness of a return. We will retain copies of your records and our work papers for your engagement for three years, after which these documents will be destroyed.

Our engagement to prepare your income tax returns will conclude with the delivery of the completed returns to you. If you have not selected to e-file your returns with our office, you will be solely responsible to file the returns with the appropriate taxing authorities. Review all tax-return documents carefully before signing them.

Payment for the preparation of income tax returns will be due upon completion or when you pick up your copy of the tax returns. Additional copies are available for \$40 federal (if we have your email address we can send you a copy), State copies are \$15 per year.

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.

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** (2019 only)

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

Select Tax Year(s): **2019** 2018 2017 2016 2015 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 and return to us. You may request a copy for your records.

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

Wayne Kight EA, Accountant  
American Tax & Accounting

\_\_\_\_\_  
Client

\_\_\_\_\_  
Date