

TAX ORGANIZER



YOUR TAX APPOINTMENT

Please complete this organizer prior to your appointment.

Your tax appointment is scheduled for:

Date:

Time:

Please notify this office promptly if you are unable to keep this appointment.

Referrals are Always Appreciated

If you know someone who would like a tax appointment, please have them call this office.

724-676-5899

PERSONAL INFORMATION

Complete all applicable fields

Check One: Single Married Head of Household Married Filing Separate Qualifying Widow/Widower



Number of children: Who lived with you

Who did not live with you due to divorce or separation

You were born before January 2, 1948
Spouse was born before January 2, 1948

Blind
Blind

INCOME

	W-2s	W-2G	1097-BTC	1098	1098-C
Total forms submitted:	1098-E	1098-M	1098-T	1099-A	1099-B
	1099-C	1099-DIV	1099-INT	1099-K	1099-MISC
	1099-OID	1099-PATR	1099-Q	1099-R	1099-S
	1099-SA				

Amounts received:

Check any that apply: Business Income Farm Income Rental Real Estate, Royalties, Partnerships, S Corp, Trust, etc.



To the best of my knowledge, all the information contained within this document is true, correct and complete.

Signature of Taxpayer 1

Date

Signature of Taxpayer 2

Date

This document must be completed & signed by both taxpayers. Bring signed document to appointment.

TAX ORGANIZER

SCHEDULE A EXPENSES

Complete all applicable fields

Out of Pocket Medical Expenses

Do Not Include Medicare Part A & B Premiums
Those are listed on your SS Statement

Taxes Paid

Submit Receipts & Documentation

Charitable Donations

Submit Receipts/Credit Care Statements

Employee Expenses

Unreimbursed Expenses Only

Casualty & Theft Losses

Submit Documentation & Details

Medical Mileage

Complete Mileage Worksheet & Submit

Complete Mileage Worksheet & Submit

Complete Home Office Worksheet (if applicable)

Other Miscellaneous Deductions

ADJUSTMENTS TO GROSS INCOME

Complete all applicable fields

CHILD & DEPENDENT CARE CREDITS

Complete all applicable fields

Child & Dependent Care

RESIDENTIAL ENERGY CREDITS

Complete all applicable fields

Was qualified fuel cell property installed on or in connection with your main home located in the United States?

OTHER

First-Time Home Buyer Credit Repayment?

Sold Primary Home in 2012?

Is Taxpayer 1 Disabled?

Is Taxpayer 2 Disabled?

Please attach a voided check if you would like your refund directly deposited.

TAX ORGANIZER

SCHEDULE C

ASSETS

INCOME

COST OF GOOD SOLD

HOME OFFICE DEDUCTIONS

SCHEDULE C EXPENSES

PENNSYLVANIA INFORMATION

Section 529 Qualified Tuition



EMPLOYEE EXPENSES

