2020 Individual Taxpayer Organizer

FRIENDS DOIN TAXES LLC

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*Did you receive any unemployment?*

Did you either taxpayer or spouse at any time during 2020, receive, sell, send or exchange any financial interest in any virtual currency?

|  |  |
| --- | --- |
| **Taxpayer** | SSN |
| *First M.I. Last* | Email | IP PIN |
| Occupation | Date of birth | Are you new to our firm? Yes No |
| Address | City | State | Zip |
| County | Home phone | Work or cell |

Driver’s License *No. State Issue Date Exp. Date*

|  |  |
| --- | --- |
| **Spouse** | SSN |
| *First M.I. Last* | Email | IP PIN |
| Occupation | Date of birth | Are you new to our firm? Yes No |
| Address*(If different from Taxpayer)* | City | State | Zip |
| County | Home phone | Work or cell |

Driver’s License *No. State Issue Date Exp. Date*

If you moved during 2020, enter your previous address.

Date of move

Marital status at 12/31/20: Single Married Separated Widow(er) Registered Domestic Partnership (RDP) Unsure

Were you divorced or separated during the year? Yes No Were there any deaths in the family? Yes No Individuals who are in registered domestic partnerships (RDPs) and civil unions are not considered married for federal tax purposes. Have you received any notice from the IRS or state revenue department within the past year? Yes No

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| --- | --- | --- | --- | --- | --- | --- |
| **Names of dependent children***Child’s full name* | *Social Security #* | *IP PIN* | *Date of birth* | *Months lived in home in 2020* | *Relationship to taxpayer* | *College student?* |
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|  |  |  |  |  |  |  |

Did any of the children have unearned income above $1,100 for the year? Yes No Do any of the children have a disability? Yes No Is it anticipated that a different taxpayer will seek to claim a child listed above as their dependent for tax year 2020? Yes No

**Other dependents or people who lived with you**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| *Name* | *Social Security #* | *IP PIN* | *Date of birth* | *Months lived in home in 2020* | *Relationship* | *Income* |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Bank information: Use for Direct deposit of refund Direct debit of balance due *Name of bank*

|  |  |  |
| --- | --- | --- |
| *Checking Savings* | *Routing transit number* | *Account number* |

Ask your tax preparer for information about depositing a refund into an IRA account or splitting the deposit into more than one account.

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| --- | --- | --- | --- | --- | --- |
| **State information** | Full-year resident | Part-year resident | Nonresident | School district |  |
| States of residence | during 2020 and dates |  |  | Do you rent or own your home? Rent | Own |

**Questions — All Taxpayers** *(Provide related statements or other documentation.)*

“You” refers to both taxpayer and spouse — enter “?” if unsure about a question.

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| --- | --- | --- |
| ***LIFESTYLE & TAXES*** | Yes No | Are either you or your spouse legally blind? |
| Yes No | Did you pay or receive alimony in 2020?*Paid Received* $ | *Recipient’s SSN* | *Date of divorce or separation* |
| Yes No | Did you purchase health insurance through a public exchange? IF YES WE WILL NEED THE 1095 A |
| Yes No | Will there be any significant changes in income or deductions next year, such as retirement? |
| Yes No | Have you paid alternative minimum tax (AMT) in previous years? |
| Yes No | Did you pay anyone for domestic services in your home? |
| Yes No | Did you purchase a new energy-efficient car, truck, or van? |
| Yes No | Are you involved in bankruptcy, foreclosure, repossession, or had any debt (including credit cards) cancelled? |
| Yes No | Are you a member of the military? | State of residency |
| Yes No | Were you a citizen of or lived in a foreign country? | Foreign country |
| Yes No | Do you own or have financial interest in a foreign bank or financial account? Balance exceeds $50,000 Yes No |
| Yes No | Did you receive an economic impact payment? If so, provide the amount. |
| Yes No | Would you like to allow your tax preparer or another person to discuss your return with the IRS?*Designee’s name Phone number PIN (any five digits)* |
| ***CHILDREN & EDUCATION*** | Yes No | Were any children born or adopted in 2020? *(Provide statement for other expenses.)* |
| Yes No | Were any children attending college? | *Year in college* | Paid by you: *Tuition* $ | *Student loan interest* $ | *Books* $ |
| Paid by student: *Tuition* $ | *Student loan interest* $ | *Books* $ |
| Yes No | Did you pay any tuition for a private school for a dependent or take classes yourself? |
| *Student* | *Amount paid* $ |
| *Name and address of school* |
| Yes No | Did you pay for child or dependent care so you could work or go to school? *(add statement if needed)* |
| *Name of provider* | *EIN or SSN* |
| *Address* | *Amount paid* $ |
| Yes No | Do you have any children who have unearned income of $1,100 or more? |
| Yes No | Did you make any contributions to a 529 plan in 2020? |
| ***INVESTMENTS*** | Yes No | Did you, or will you, contribute any money to an IRA for 2020? | Traditional IRA Roth IRA |
| Yes No | Did you roll over any amounts from a retirement account in 2020? |
| Yes No | Did you sell or transfer any stock or sell rental or investment property? |
| Yes No | Did you receive any income from an installment sale? |
| Yes No | Did you have any investments become worthless or were you a victim of investment theft in 2020? |
| Yes No | Were you granted, or did you exercise, any employee stock options during 2020? |
| Yes No | Did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? |
| ***DEDUCTIONS*** | Yes No | Did you, or do you plan to, contribute money before April 15, 2021 to a HSA for 2020? If yes, provide details. |
| Yes No | Did you pay any interest on a loan for a boat or RV that has living quarters? If yes, provide details. |
| Yes No | Did you pay sales taxes on a major purchase in 2020, such as a vehicle, boat, or home? |
| Yes No | Did you make any charitable contributions in 2020? If yes, provide details. |
| ***BUSINESS*** | Yes No | Did you work from a home office or use your car for business? |
| Yes No | Did you receive income from a sharing/gig economy activity (e.g. Airbnb, Uber, etc.) |
| Yes No | Do you own a business or an interest in a partnership, corporation, LLC, farming activities, or other venture? |
| ***HOME*** | Yes No | Did you purchase or sell a main home during the year? If yes, provide closing statement. |
| Yes No | If you sold a home, did you claim the First-Time Homebuyer Credit when it was purchased? If yes, provide details. |
| Yes No | Did you refinance a mortgage or take a home equity loan? If yes, provide closing statement. |
| Yes No | Did you use any mortgage loan proceeds for purposes other than to buy, build, or substantially improve your home? |
| Yes No | Did you make any new energy-efficient improvements to your home? If yes, provide details. |



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| --- |
| **Estimated Tax Payments — Tax Year 2020** |
| *Installment* | *Date paid* | *Federal* | *Date paid* | *State* |
| First |  | $ |  | $ |
| Second |  | $ |  | $ |
| Third |  | $ |  | $ |
| Fourth |  | $ |  | $ |
| Amount applied from 2019 overpayment? |  | $ |  | $ |
| Total |  | $ |  | $ |
| **Tax Preparation Checklist** |

Please provide the following documentation:

All Forms W-2 (wages), 1099-INT (interest), 1099-DIV (dividends), 1099-B (proceeds from broker or barter transactions), 1099-R (pensions and IRA distributions), Schedules K-1 from partnerships, S corporations, estates and trusts, and other income reporting statements, including all copies provided from the payer.

Form 1095-A (for health insurance purchased through a public exchange), Form 1095-B (for health insurance purchased outside of a public exchange), or Form 1095-C (for employer-provided health insurance coverage).

If you are a new client, provide copies of last year’s tax returns.

The completed Individual Income Tax Organizer. ***Note:*** If you choose not to fill out the organizer, you must at least answer the “Yes” or “No” questions under “Questions — All Taxpayers.”

Copy of the closing statement if you bought or sold real estate.

Mileage figures for any automobile expenses claimed, including total mileage, commuting mileage, and business mileage. Detail of estimated tax payments made, if any.

Income and deductions categorized on a separate sheet for business or rental activities.

List of itemized deductions categorized on a separate sheet for medical, taxes, interest, charitable, and miscellaneous deductions. Copy of all acknowledgement letters received from charitable organizations for contributions made in 2020.

**Tax Return Preparation**

We will prepare your tax return based on information you provide. In the event your return is audited, you will be responsible for verifying the items reported. It is important that you review the return carefully before signing to make sure the information is

correct. Unless otherwise stated, the services for preparation of your return do not include auditing, review, or any other verification or assurance.

**Taxpayer Responsibilities**

* You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
* You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review your documentation.
* You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
* You must review the return carefully before signing to make sure the information is correct.
* Fees must be paid before your tax return is delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer is required for preparation of late returns.
* You should keep a copy of your tax return and any related tax documents. You may be assessed a fee if you request a copy in the future.

**Signatures.** By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities. For a joint return, both taxpayers must sign.

*Taxpayer Spouse Date*

**Privacy Policy**

The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from

applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to a third party without your permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.