

2021 Individual Taxpayer Organizer



PORTERKINNEY PC CERTIFIED PUBLIC ACCOUNTANTS

NOTE: If you are a returning client, please only fill in your name and the information that has changed since last year.

Taxpayer				SSN	
<i>First Name</i>	<i>M.I.</i>	<i>Last Name</i>	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	
<i>First Name</i>	<i>M.I.</i>	<i>Last Name</i>	Email		IP PIN
Occupation		Date of birth		Are you new to our firm? Yes No	
Address <small>(If different from Taxpayer)</small>		City		State	Zip
County		Home phone		Work or cell	
Driver's License	No.	State	Issue Date	Exp. Date	

If you moved during 2021, enter your previous address.	Date of move
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Marital status at 12/31/21: 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

Names of dependent children <i>Child's full name</i>	<i>Social Security #</i>	<i>IP PIN</i>	<i>Date of birth</i>	<i>Months lived in home in 2021</i>	<i>Relationship to taxpayer</i>	<i>College student?</i>
						▼
						▼
						▼

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 2021? Yes No

Other dependents or people who lived with you						
<i>Name</i>	<i>Social Security #</i>	<i>IP PIN</i>	<i>Date of birth</i>	<i>Months lived in home in 2021</i>	<i>Relationship</i>	<i>Income</i>

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.

Questions

Please check the appropriate box and include all necessary details and documentation.

Miscellaneous Information

	Yes	No
Did you receive the 3rd Economic Impact Payment as reported on Notice 1444-C?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make gifts of more than \$15,000 to any individual?	<input type="checkbox"/>	<input type="checkbox"/>
Did you retire or change jobs this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you make energy efficient improvements to your main home this year?	<input type="checkbox"/>	<input type="checkbox"/>
Do you want to designate \$3 to the Presidential Election Campaign Fund?	<input type="checkbox"/>	<input type="checkbox"/>
Did you change bank accounts that may affect direct deposits from the IRS?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive an Identity Protection PIN from the IRS? If yes, attach IRS letter.	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive an adjustment to your refund or balance due for the exclusion of unemployment compensation and/or Advance Premium Tax Credit?	<input type="checkbox"/>	<input type="checkbox"/>

Dependent Information

Did you receive advanced Child Tax Credit (CTC) payments in July-December?	<input type="checkbox"/>	<input type="checkbox"/>
Did all of your dependents live with you for at least half of the tax year and did you provide at least half of their support?	<input type="checkbox"/>	<input type="checkbox"/>
Did you provide over half the support for any other person(s) other than your dependent children during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Could you provide documentation to substantiate your support of dependents (i.e. medical records, school records, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>
Were any child tax, earned income or education credits or your HOH status disallowed or reduced in previous years?	<input type="checkbox"/>	<input type="checkbox"/>
Did you pay for child care while you worked, looked for work, or while a full-time student? Please attach Provider's name, EIN/SSN, address and amount paid.	<input type="checkbox"/>	<input type="checkbox"/>
Is there a Form 8332 Release/Revocation of Claim to Exemption for Child by Custodial Parent, or a similar statement in place? Did you release the claim of a dependent to another person this year? If yes, which child? _____	<input type="checkbox"/>	<input type="checkbox"/>

Income, Purchases, Sales and Debt Information

Did you start a new business or purchase rental property during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive a Paycheck Protection Program (PPP) loan? If yes, was it forgiven?	<input type="checkbox"/>	<input type="checkbox"/>
Did you sell, exchange, or purchase any assets used in your trade or business?	<input type="checkbox"/>	<input type="checkbox"/>
Did you acquire a new or additional interest in a partnership or S corporation?	<input type="checkbox"/>	<input type="checkbox"/>
Did you sell, exchange, or purchase any real estate during the year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you utilize an area of your home for business purposes?	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive any unemployment benefits, sick leave or family leave pay?	<input type="checkbox"/>	<input type="checkbox"/>
Did you take out a home equity loan this year?	<input type="checkbox"/>	<input type="checkbox"/>
Did you lend money with the understanding of repayment and this year it became totally uncollectable?	<input type="checkbox"/>	<input type="checkbox"/>
Did you have any debts canceled/forgiven, such as a mortgage or student loan(s)?	<input type="checkbox"/>	<input type="checkbox"/>
Did you sell or exchange virtual currencies (including from an airdrop or a hard fork, or used virtual currencies to pay for goods or services)?	<input type="checkbox"/>	<input type="checkbox"/>
Did you have a financial interest in or signature authority over a financial account, foreign financial assets or hold interest in an entity located in a foreign country?	<input type="checkbox"/>	<input type="checkbox"/>
Did you have any foreign income or pay any foreign taxes during the year, directly or indirectly, such as from investment accounts, partnerships or a foreign employer?	<input type="checkbox"/>	<input type="checkbox"/>
Do you expect a large fluctuation in income, deductions, or withholding next year?	<input type="checkbox"/>	<input type="checkbox"/>

Retirement Information

Did you make any contributions to or withdrawals from an IRA, Roth, Keogh, SIMPLE, SEP, 401(k), or other qualified retirement plan? If yes, please explain.	<input type="checkbox"/>	<input type="checkbox"/>
If you received any qualified disaster retirement plan distributions, did you repay any of the distributions in 2021?	<input type="checkbox"/>	<input type="checkbox"/>

Education Information

- Did you, your spouse, or your dependents attend a post-secondary school during the year, or plan to attend one in the coming year? Please attach Form 1098-T.
- Did you make contributions to or withdrawals from a 529 Plan account?
- Did you pay any student loan interest this year?

Health Care Information

- Did you have health care coverage (i.e. employer-sponsored, Medicare/Medicaid or Marketplace Coverage through healthcare.gov) for your family? If yes attach any Form(s) 1095-A, 1095-B and/or 1095-C you received.
- Did you make contributions to or distributions from a Health savings account (HSA)?
- Did you receive any Health Coverage Tax Credit (HCTC) advance payments?

Itemized Deduction Information

- Did you make any cash charitable contributions (even if less than \$600)?
- Did you make any major purchases during the year (cars, boats, etc.)?

Client Name (printed): _____

Client Signature: _____ Date: _____

Notes

Income Worksheet

Provide to your preparer all Forms W-2, 1099-INT, 1099-DIV, 1099-R, 1099-MISC, 1099-NEC, and other income reporting statements. Do not list dollar amounts for the following forms. Your preparer will report the appropriate amounts.

Indicate "T" for taxpayer, "S" for spouse, "J" for joint

Provide additional statements if more room is needed

Forms W-2—Wage and Tax Statement

T/S	Employer name	T/S	Employer name
<input type="checkbox"/>	1)	<input type="checkbox"/>	4)
<input type="checkbox"/>	2)	<input type="checkbox"/>	5)
<input type="checkbox"/>	3)	<input type="checkbox"/>	6)

Forms 1099-INT—Interest Income

T/S/J	Name of issuer	T/S/J	Name of issuer
<input type="checkbox"/>	1)	<input type="checkbox"/>	4)
<input type="checkbox"/>	2)	<input type="checkbox"/>	5)
<input type="checkbox"/>	3)	<input type="checkbox"/>	6)

Forms 1099-DIV—Dividends and Distributions

T/S/J	Name of issuer	T/S/J	Name of issuer
<input type="checkbox"/>	1)	<input type="checkbox"/>	4)
<input type="checkbox"/>	2)	<input type="checkbox"/>	5)
<input type="checkbox"/>	3)	<input type="checkbox"/>	6)

Forms 1099-R—Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, Etc.

T/S	Name of issuer	T/S	Name of issuer
<input type="checkbox"/>	1)	<input type="checkbox"/>	4)
<input type="checkbox"/>	2)	<input type="checkbox"/>	5)
<input type="checkbox"/>	3)	<input type="checkbox"/>	6)

If the distribution is before age 59½, give a reason to determine if an exception to penalty applies.

Tax-Exempt Interest (such as municipal bonds—include statement)

Payer	\$	Payer	\$

Other Income

State tax refund	\$	Unreported tips	\$
Unemployment compensation	\$	Other	\$
Social Security (taxpayer)—provide SSA-1099 or RRB-1099	\$		\$
Social Security (spouse)—provide SSA-1099 or RRB-1099	\$		\$
Gambling income—provide W-2G	\$		\$
Business income (see <i>Sole Proprietorship Tax Organizer</i>)		Stock sales	See "Sales and Exchanges Worksheet" below.
Rental income (see <i>Rental Property Tax Organizer</i>)		Sale of other property	

Sales and Exchanges Worksheet

Provide information about sales of stock, real estate, or other property, along with Forms 1099-B, 1099-S, or other supporting statements.

Description of property	Purchase date	Cost/basis	Sale date	Sale price
		\$		\$
		\$		\$
		\$		\$

Notes:

- When stock is sold, you will usually receive Form 1099-B, *Proceeds From Broker and Barter Exchange Transactions*, reporting the proceeds from the sale. However, your statement will not always provide the cost/basis information necessary to compute gain or loss. If the statement does not contain the cost/basis information, you must provide it. You may need to contact your broker for questions about cost/basis and purchase dates of your stock accounts.
- Often, "transfers" of stock or mutual funds within a brokerage account are actually sales of one type of stock and purchase of another. Even if you did not receive any cash from the transaction, you may have taxable gain or loss.
- If your stock dividends are automatically reinvested, the dividends will be taxable even though you did not receive any cash. The transaction is treated as if you had received cash and purchased additional stock. When the stock is sold, the amount reinvested over the years is taken into account. You may need to contact your broker for questions about the amount of reinvested dividends.
- If you sold property other than stock, your taxable gain or loss will be determined by your cost/basis. The cost/basis is usually the original purchase price plus improvements (the cost of repairs and maintenance are not taken into account for cost/basis).

Itemized Deductions Worksheet

Deductions must exceed \$12,550 Single, \$25,100 MFJ, \$18,800 HOH, or \$12,550 MFS to be a tax benefit.

Medical Expenses. Must exceed 7.5% of income to be a benefit—include cost for dependents—do not include any expenses that were reimbursed by insurance.

Dentists	\$	Hospitals	\$
Doctors	\$	Insurance	\$
Equipment	\$	Prescriptions	\$
Eyeglasses	\$	Other	\$
Medical miles: _____ @ 16¢			

Taxes Paid. Do not include taxes paid for full or partial business or rental-use property, including business use of the home.

State withholding	<i>Reported on W-2</i>
State estimated taxes—paid in 2021	\$
Real estate tax—residence	\$
Real estate tax—other	\$
Personal property taxes	\$
Property tax refund—received in 2021	\$ ()
Foreign tax paid	\$
Other	\$
Other	\$
Other	\$
Balance paid in 2021 from prior year state returns (do not include interest or penalties)	\$
Did you keep receipts for sales tax paid during 2021?	Yes No
Did you purchase a car, plane, boat, or home in 2021?	Yes No
Sales tax paid \$	Purchase paid \$ Date

Interest Paid. Do not include interest paid for full or partial business or rental-use property, including business use of the home. Provide all Forms 1098 or lender information and ID numbers.

Main home	\$	Equity loan	\$
Second home	\$	Equity loan	\$
Points	\$	Investment interest	\$

Did you pay a mortgage insurance premium when you purchased your home? Amount \$ Date

Charitable Contributions. If over \$500 in noncash charitable contributions, provide details of contributions. Rules require that the taxpayer retain documentation for all contributions.

Cash	\$
Noncash contributions (FMV). Clothing or household items must be in good used condition or better.	\$
Did you transfer funds from an IRA directly to a charity? Yes No	\$
Charitable mileage	

Casualty and Theft Losses

If you suffered any sudden, unexpected damage or loss of property, or a theft in a federally-declared disaster area, provide details to your tax preparer. Yes No

Miscellaneous Itemized Deductions. Miscellaneous itemized deductions subject to the 2% AGI limitation are no longer deductible on the federal return. However, these expenses may still be deductible on your state return. For use of home, auto mileage, or other job-related expenses, provide information on a separate sheet. Were any expenses reimbursed by your employer? Yes No

Dues	\$	Subscriptions	\$
Investment expenses	\$	Supplies	\$
Job education	\$	Tax prep fees	\$
Job seeking	\$	Tools	\$
Legal fees	\$	Uniforms	\$
Licenses	\$	Union dues	\$
Safety equipment	\$	Other	\$

Other Deductions. The following deductions are not subject to a 2% of income limit.

Gambling losses	\$	Federal estate tax on IRD	\$
Impairment-related expenses	\$	Other	\$

Other Deductions or Questions

- Notes:**
- Gambling losses are deductible only up to the amount of gambling winnings reported. A log must be kept to verify losses.
 - Work clothing is not deductible if adaptable for every day wear. Exception for safety equipment, such as steel-toe boots.
 - Expenses to enable individuals, who are physically or mentally impaired, to work are generally deductible.

Adjustments Worksheet

<i>Educator expenses.</i> Classroom expenses of teachers, counselors, and principals. Maximum \$250 each.	\$
<i>Health savings account deduction (HSA).</i> Some contributions for 2021 may be made in 2022.	\$
<i>Self-employed SEP, SIMPLE, and qualified plans.</i> Some contributions for 2021 may be made in 2022.	\$
<i>Self-employed health insurance deduction.</i> Sole proprietors, partners, and 2% S corporation shareholders if not eligible for employer coverage.	\$
<i>Penalty on early withdrawal of savings.</i>	\$
<i>IRA deduction.</i> For traditional IRAs. Roth IRAs are not deductible. Some contributions for 2021 may be made in 2022.	\$
<i>Student loan interest deduction.</i> Paid for taxpayers and dependents. Income limits apply.	\$
<i>Moving expenses.</i> Available only to members of the Armed Forces (or their spouses or dependents) on active duty that move pursuant to a military order and incident to a permanent change of station.	Ask preparer
<i>Business expenses of reservists, performing artists, and fee-based government officials.</i>	Ask preparer
<i>Charitable contributions.</i> For taxpayers who take the standard deduction. Up to \$300 (\$600 for MFJ).	\$
<i>Other adjustments.</i> Include description.	\$

Estimated Tax Payments — Tax Year 2021

<i>Installment</i>	<i>Date paid</i>	<i>Federal</i>	<i>Date paid</i>	<i>State</i>
First		\$		\$
Second		\$		\$
Third		\$		\$
Fourth		\$		\$
Amount applied from 2020 overpayment?		\$		\$
Total		\$		\$

Advance Child Tax Credit Payments Received

<i>Payment date</i>	<i>Amount received</i>	<i>Payment date</i>	<i>Amount received</i>	<i>Payment date</i>	<i>Amount received</i>
July 15, 2021	\$	September 15, 2021	\$	November 15, 2021	\$
August 15, 2021	\$	October 15, 2021	\$	December 15, 2021	\$

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 2021.

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.