

# TAX ORGANIZER

## Taxpayer Information

First Name: Initial: Last Name:  
Date of Birth: SSN# Occupation:  
Address: City:  
State: Zip: Home Tel: Work Tel: Cell:  
Email:

## Filing Status

Single: Married: Married filing separately: Head of Household: Qualified widow(er):

## Spouse Information

First Name: Initial: Last Name:  
Date of Birth: SSN# Occupation:  
Work Tel: Cell:  
Email:

## Dependents

Name: DOB: SSN#: Relationship:

## Wage, Salary Income (Provide W-2s)

Employer Name:

## Other Income

Interest (Provide 1099INT Forms)  
Dividends (Provide 1099DIV Forms)  
Capital Gains (Provide 1099B and 1099S Forms)  
Pension/IRA Distributions (Provide 1099R Forms)  
Unemployment Received (Provide 1099G Forms)  
Social Security Received (Provide SSA-1099 Forms)  
Other: (Description and amount)

## **Deductions**

Real estate taxes:

Mortgage Interest Paid (*Attach 1098 Forms*)

Contributions (*Attach details*)

Cash or check: \$                      Other than cash: \$

## **IRA Contributions**

	Taxpayer	Spouse
Traditional IRA Contributions:	\$	\$
Roth IRA Contributions:	\$	\$

## **Estimated Tax Payments**

	<u>Federal:</u> Date	Amount	<u>State:</u> Date	Amount
1 <sup>st</sup> Quarter	\$		\$	
2 <sup>nd</sup> Quarter	\$		\$	
3 <sup>rd</sup> Quarter	\$		\$	
4 <sup>th</sup> Quarter	\$		\$	