TAX DEDUCTION LOCATOR
& IRS TROUBLE MINIMIZER

YOUR TAX APPOINTMENT

Please complete and sign this organizer prior to your appointment.

- ○ Please call to schedule your appointment. Try to call early before the calendar is booked up.
- ○ Please mail the completed organizer along with the requested information to this office prior to your appointment.
- ○ Please mail the completed organizer along with the requested information to this office so the return can be prepared by correspondence.
- ○ Your tax appointment is scheduled for:

Day: ____________________________

Date: ____________________________

Time: ____________________________

○ Office Appointment ○ Virtual Appointment

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. Do not be concerned that your business, personal or financial matters will be discussed with clients whom you refer. All client information is treated in the utmost confidence.

IF YOU ARE A NEW CLIENT, BE SURE TO PROVIDE A COPY OF LAST YEAR'S TAX RETURN.

SAVE TIME - READ THIS FIRST

This organizer is designed to assist and remind you of information that is needed to prepare your tax return. The goal is to not overlook anything so you can maximize your legal deductions, comply with government reporting requirements, and avoid problems with the IRS after the return is filed.

Taxes are complicated and the rules change constantly. This organizer was designed specifically for the 2024 tax year and certain items may not apply to other years. Although care has been taken to accommodate most taxpayers' needs, please note questions that are related to issues not included here under "Questions You May Have" in Section D6.

Section Categories

To help you collect your information quickly, this organizer is organized into five general areas. Information required from:

- everyone – Sections A1 – A13 (Pages 2 & 3)
- business owners - Pass-through deduction -Section D1 (Page 4).
- those who have relocated (military only), sold their home, made home energy improvements, or have debt relief income - Sections D2 - D6 (Page 4)

The instructions provided in the header of each section will help you determine if you are required to complete the information in that section.

If you paid foreign taxes (entered at Sections A10 or A11) and are a partner in a partnership or a shareholder in an S-Corporation, it is important that you so notify whoever is responsible for the entity's tax returns.

Before proceeding, please take a moment to review the purpose of the SPECIAL MARKERS used throughout this organizer.

Your tax information from the prior year is automatically transferred to this year's tax return. Therefore, not all taxpayer data and contact info needs to be recorded. The marker signifies that returning clients need only enter data in that section if it has changed since the prior year or if there is new information.

This marker notes areas where the IRS can match the entry in their computer and incomplete or incorrect information can trigger government correspondence or, worse yet, an office audit. Pay particular attention to sections or individual entries with this symbol.

This flag symbol denotes areas where a deduction or item of income is to be treated differently when computing the alternative minimum tax (AMT). The AMT is another way of computing your tax liability, which applies more restrictive limits on certain deductions and preference income. If higher than the regular tax, the AMT applies.

1099

This marker indicates payments that may require the issuance of a 1099 if, in the course of a trade or business (including most rentals), the annual amount paid to an individual is $600 or more. Failure to file 1099s can lead to a loss of the tax deduction for that expense and failure to timely file the forms with the IRS and furnish copies to payees can result in substantial penalties.

A - TAXPAYER INFORMATION

The information on this page is required for every taxpayer. Please review each section on this page and report items that are applicable to you, your spouse or dependents.

A1 - TAXPAYER INFORMATION

Returning clients: enter first and last name of filer and any changes only.

Filer Name (Must Match SS Admin)		Birthday / /	
Social Security No. (and IRS IP-PIN if issued)		Occupation	
Driver's Licence (DL)		State	
DL Issued Date	/ /	DL Expires	/ /
Contact Phone		○ Day ○ Evening	
Email Address		☐ Legally Blind	
Spouse Name (Must Match SS Admin)		Birthday / /	
Social Security No. (and IRS IP-PIN if issued)		Occupation	
Driver's Licence (DL)		State	
DL Issued Date	/ /	DL Expires	/ /
Contact Phone		○ Day ○ Evening	
Email Address		☐ Legally Blind	

A2 - ADDRESS

Returning clients can skip this section except for changes.

Street		Apt/Unit No			
City		State		Zip	
Home Phone Number (if different from above)					

A3 - STATUS CHANGES FOR 2024

Check any that apply and enter the effective date.

☐ Married	/ /	☐ Moved	/ /
☐ Separated	/ /	☐ Home Sold	/ /
☐ Divorced	/ /	☐ Spouse Deceased	/ /
☐ Retired	/ /	☐ Dependent Deceased	/ /

A4 - ESTIMATED TAXES PAID

This office cannot assume that all estimated taxes were paid as originally scheduled or on time. Therefore, please enter the amounts and dates of payment or provide proof of payments. Incorrect amounts will result in IRS or state correspondence after the return is filed.

Payment & Due Date	Date Paid	Federal	State
Applied from Last Year's Refund			
First Quarter (April 15, 2024)	/ /		
Second Quarter (June 17, 2024)	/ /		
Third Quarter (Sept. 16, 2024)	/ /		
Fourth Quarter (Jan. 15, 2025)	/ /		

A5 - REFUND DIRECT DEPOSIT

Complete this section to have your refund automatically deposited into your bank account. Doing so will speed up the refund and eliminate the danger of a check being lost or stolen. Direct deposit can be allocated to up to 3 separate accounts. Entries for only one account are provided below. If you wish to make multiple deposits, please provide the additional account information and how you wish to allocate the refund.

Bank Name	
Bank Routing Number (Exactly 9 Digits)	
Account Number (include hyphens - omit spaces & special characters – 17 digits max)	

Account Type ○ Checking ○ Savings Allocation: %

A6 - INCOME & ADJUSTMENTS

	You	Spouse
W-2 Wages – Please provide W-2 Forms (retain copy "C" for your records)		
Partnership, Trust or S-Corporation K-1s (provide complete K-1 copies) **and K-3s if issued**		
Were you the beneficiary of an inheritance? If so, please verify with executor or trustee if you will be receiving a K-1.	☐ Yes	☐ Yes
State Tax Refund (provide 1099-G)		
Social Security or RR income (provide SSA-1099 or RRB-1099)		
Pension Income (provide all 1099-Rs) - enter IRA distributions in A7		
Alimony Received (IRS matches with alimony paid)		
Alimony Paid (provide name and SSN below)		
Paid to: SSN:		
Tips (not included in W-2s)		
Unemployment Compensation (provide 1099-G)		
Gambling Winnings (provide W-2Gs)		

A7 - IRA & RETIREMENT PLANS

		You	Spouse
Retirement plan with your employer?		☐ Yes	☐ Yes
Did you or your spouse convert a traditional IRA to a Roth IRA in 2024?		☐ Yes	☐ Yes
Traditional IRA, Keogh & SEP Plans	Contributions		
	Withdrawals (1099-R)(1)		
	Rollovers(2)(3)		
	Basis (Total of your prior year non-deductible contributions)		
Roth IRA	Contributions		
	Withdrawals (1099-R)(1)		
	Rollovers(2)(3)		

(1) Show reason if under age 59-1/2 (2) Must be reported even if not taxable unless directly "transferred"
(3) Rollovers from Traditional to a Roth IRA may be taxable.

A8 - SPECIAL QUESTIONS & INFO

Coverdell Education Account	**Contribution**		**Distribution** - provide 1099-Q	
Sec 529 Tuition Plan	**Contribution**		**Distribution** - provide 1099-Q	
HSA	**Contribution** other than via employer		**Distribution** - provide 1099-SA	
Adoption Expenses	☐ Special Needs Child		**Educator Expenses**	

CAUTION – There are severe penalties with failing to report an interest in or signature authority over a foreign bank account. Call our attention to any foreign accounts, dealings, or inheritance.

CHECK ALL THAT APPLY TO YOU (AND OR YOUR SPOUSE)

- ☐ Exercised substantial control or 25% of the ownership interest in a corporation, LLC, or any other entity created by filing with a secretary of state or similar office in the U.S.
- ☐ Have signature authority or are named as a co-owner on a bank account in a foreign country even if the funds are not yours.
- ☐ Received an inheritance from someone in a foreign country.
- ☐ Have a foreign bank account (over $10,000 at any time in 2024)
- ☐ Received a distribution from, or were the grantor, or transferor to, a foreign trust
- ☐ At any time during the year hold an interest in a foreign financial asset
- ☐ Receive, sell, exchange or otherwise acquire a financial interest in digital assets during the year.
- ☐ Invest in a Qualified Opportunity Fund during the year
- ☐ Been denied Earned Income Credit by the IRS
- ☐ Been re-certified for the Earned Income, Child Tax, or American Opportunity Credit
- ☐ Bought, sold, or gifted real estate in 2024. If so, please call in advance.
- ☐ Made a gift of money or property to any individual in excess of $18,000 ($36,000 for joint gifts by a married couple) in 2024
- ☐ Employ household workers
- ☐ Sold jewelry, gold, coins, or other precious metals during the year
- ☐ Received Form 1099-K - Explain source of income: ____________________
- ☐ Filer ☐ Spouse You wish to contribute to the Presidential campaign fund

A - TAXPAYER INFORMATION

The information on this page is required for every taxpayer. Please review each section on this page and report items that are applicable to you, your spouse or dependents.

A9 - DEPENDENTS

Returning clients need only enter first names and any changes. Enter all the information for new dependents.

First Name	Last Name (If Different)	Social Security Number (and, if issued, IRS IP-PIN) (Mandatory)	S, D, F, M, G, Other or HOH*	Months in Home (Your Home)	Birth Date	If over the age of 18	
						Income	Student
					/ /		☐ Yes
					/ /		☐ Yes
					/ /		☐ Yes

* Enter S-Son, D-Daughter, F-Father, M-Mother, G-Grandchild, or enter other relationship. Enter HOH for non-dependent Head of Household qualifiers.

A10 - INTEREST INCOME

Caution: All interest must be reported even if tax-free!

IRS matches payer and amount. Always use the payer name listed on 1099 even if not the original source.

Name of Payer Please provide all forms 1099INT and 1099OID (Entries are not needed when 1099s are provided)	Banks, Credit Union, Corp Bonds, Seller Financed Mortgages, etc.	Foreign Taxes Paid or Withheld	Direct U.S. Obligations Saving Bonds, T-Bills, etc. (State Tax-Free)	Home State Municipal Bonds (Generally Tax-Free)	Other State (Federal Tax-Free)

Forfeited Interest (early withdrawal penalty)		Federal Tax Witholding on Interest & Dividends	

Seller Financed Mortgages

Note: Seller financed mortgages require the name, SSN and address of the payer.

Payer Name:		SSN:		Address:	

A11 - DIVIDEND INCOME

IRS matches payer and amount. Always use payer name listed on 1099 even if not the original source. Some institutions use substitute 1099s and caution must be used in separating the various types of dividends. Please bring broker statements.

Name of Payer Please provide all forms 1099DIV (Entries are not needed when 1099s are provided)	Foreign Taxes Paid or Withheld	Ordinary Dividends	Qualified Dividends(1)	Capital Gains	199A Dividends	Source U.S. Obligations (2)	Taxable to State Only	Non-Taxable State & Federal

(1) Qualified dividends receive special tax treatment and are included in the "Ordinary Dividends" total. (2) Includes income from savings bonds, T-Bills, etc., which are state tax-free.

A12 - INVESTMENT SALES

IRS matches gross proceeds from sales using the 1099-B. All transactions must be reported even if there is no profit. If broker provides a summary of transactions, bring it and skip this section. For home sales, see Section D2.

Description (Please provide all forms 1099-B and any gain/loss statements provided by broker)	Inherited?	Date Acquired	Date Sold	Selling Price	Cost or Other Basis(1)	Profit (Memo Only)
	☐ Yes	/ /	/ /			
	☐ Yes	/ /	/ /			
	☐ Yes	/ /	/ /			

(1) The basis from which gain is determined may not be the original cost and must account for stock splits, reverse splits, mergers, reinvested dividends, wash sales, etc.

A13 - CHILD OR DEPENDENT CARE EXPENSES

Care must enable you to work (or search for work) or attend school FULL-TIME. Care must be for a child under age 13 or an individual who is physically or mentally incapable of self care. If you are a student, also see section C4. IRS matches employer provided care benefits and income reporting of care provider.

☐ Employer provides dependent care services		Provider's SSN or Employer ID # MANDATORY unless it is an exempt organization (EO). If EO, check box.	Payments MUST BE Allocated by Child/Dependent		
Paid To	Address & Phone Number		Child/Depnd.'s Name:	Child/Depnd.'s Name:	Child/Depnd.'s Name:
		☐			
		☐			
		☐			

D - BUSINESS DEDUCTION, RELOCATION, HOME SALE, DEBT RELIEF, ENERGY CREDITS

D1 - SEC 199A DEDUCTION

Income passed through from a business activity via a K-I may qualify for a special tax deduction.

The information needed to compute this deduction is included on **the K-1 and a separate K-1 statement** where the business income or loss is from partnerships, S-corporations and trusts Please be sure to provide the supplemental statement along with any K-1 form you've received.

D2 - HOME SALE

If you sold your home, abandoned it, or lost it to foreclosure, the disposition may need to be reported. If you received a 1099-S, it is very important that you provide it. If you abandoned the home or lost it to foreclosure, see Section D5.

CHECK ALL BOXES THAT APPLY

Address of Home Sold	
Date Purchased	/ /
Purchase Price (please provide purchase escrow statement)	

☐ You deferred gain from a home sale made prior to 5/7/1997. If so, please provide the Form 2119 for the year of sale.

Improvements to Home Sold (not maintenance)(provide list)		
Date of Sale	(Please bring FINAL closing escrow statement. This document will have the information needed for these entries.)	/ /
Sales Price		
Sales Expenses		

☐ You owned and used the home as your primary residence for two of the prior five years (counting back from the sale date)

☐ Your spouse (if married) owned and used the home as his/her primary residence for two of the prior five years

If owned and used less than two years, give reason for sale:

☐ If the home was ever used for business (such as a rental, home office or day care center)

☐ Any of the business use in the prior question was before 5/7/97

☐ The home was acquired by tax-deferred (Sec 1031) exchange after 10/22/04

☐ You (and spouse if married) have excluded gain from the sale of a prior residence within two years of the date of sale of this residence

☐ The home was inherited (including from a deceased spouse)

☐ The home was not used as your primary residence for any period after 2008

☐ You claimed the first-time home buyer credit in 2008

D3 - ENERGY CREDITS

Enter only items certified by the manufacturer to meet Government energy standards.

☐ Did you have solar electric or solar water heating installed on your main or second home in 2024?

☐ Did you pay for an energy audit of or make energy savings improvements to your main home in 2024?

☐ Did you purchase a new or previously-owned electric vehicle in 2024?

☐ If you entered a written binding contract between January 1, 2022, and before August 16, 2022, to purchase a new EV and placed that vehicle in service in 2024, form 15400 Clean Vehicle Seller's Report from the dealer is required to claim the credit.

D4 - MOVING DEDUCTIONS

For federal for years 2018 - 2025, allowed only for active duty members of the Armed Forces who move pursuant to a military order. There are no distance requirements for military change of station.

☐ Check if employer reimbursed any amount of moving expense or home sale assistance and provide the reimbursement statement from the employer (Form 3903 or a substitute statement)

A - Miles from Old Residence to New Job	miles
B - Miles from Old Residence to Old Job	miles
A minus B – if less than 50 miles, stop: no deduction allowed	miles

Commercial Mover		Truck Rental	
Temporary Storage (up to 30 days)		Lodging en route (no meals)	
Trailer Rental		Highway Tolls	
Rental Fuel Costs		Airfare	
# of owned vehicles driven to new home		Auto Travel	miles
Boxes/Tape/Supplies		Other:	

D5 - DEBT RELIEF & FORECLOSURE

If you had debt totally or partially forgiven, you may be required to report debt relief income. This includes real estate mortgages, credit card debt, vehicle loans, etc. Debts discharged in bankruptcy and most forgiven student loans are not included. Please call the office in advance to discuss what additional documentation may be required.

CHECK ALL THAT APPLY

☐ You had any amount of credit card debt forgiven and provide a copy of the 1099-C you received from the financial institution

☐ You abandoned your home and provide a copy of the 1099-A and/or the 1099-C you received from the financial institution (also complete Section D2 home sale information)

☐ Your home was foreclosed upon or you sold it under a "short sale" agreement with the lender and provide a copy of the 1099-A and/or the 1099-C you received

D6 - QUESTIONS YOU MAY HAVE

If you need more space please include a separate note.

D8 - SIGNATURE

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

	/ /		/ /
Filer Signature	**Date**	**Spouse Signature**	**Date**