



Filing Status: Single Married Filing Joint Qualifying Widow(er)¹ Head of Household² Married Filing Separate

In year 2019 only: Married (date: _____) Divorced (date: _____) Death—Taxpayer/Spouse (date: _____)

TAXPAYER

SPOUSE

Name _____		Name _____	
Occupation _____		Occupation _____	
SSN _____	Date of Birth _____	SSN _____	Date of Birth _____
Home Phone _____	Disabled <input type="checkbox"/>	Home Phone _____	Disabled <input type="checkbox"/>
Work Phone _____	Blind <input type="checkbox"/>	Work Phone _____	Blind <input type="checkbox"/>
Cell Phone _____	Best Time to Call _____	Cell Phone _____	Best Time to Call _____
Email _____	Fax _____	Email _____	Fax _____
Address _____		County _____	
City _____		State _____ Zip Code _____	
Address on Last Year's Tax Return (if different) _____			
Date Address Changed _____			

¹ All of the following must apply: your spouse died in 2016 or 2017; in that year you qualified to file jointly; you did not remarry before January 1, 2019 and you paid over half the cost of maintaining your home, which was your dependent child's (or stepchild's) main home for the entire year.

² Must be unmarried (or considered unmarried) at the end of the tax year, and maintain a home that for more than half of the tax year is the principal home of a qualifying person (generally your child or relative). You may be considered unmarried if your spouse did not live in your home during the last six months of the tax year. If you are maintaining the household of a parent, the parent does not need to live with you to qualify.

Personal Income Tax Organizer and Deduction Finder[®]

- CHECKLIST**
- a** 1) All Forms W-2 (wages), 1095, 1098 and 1099 (such as 1099-INT for interest, 1099-DIV for dividends, 1099-B for sale of securities, 1099-R for annuities, pensions, IRA or other retirement plan withdrawals, 1099-G for state tax refunds, 1099-S for real estate sales, SSA-1099 for Social Security, 1099-G for unemployment compensation, 1099-K for merchant card and third-party network payments and 1099-MISC for commissions and fees, etc.). Include all copies.
- Documents needed in addition to your completed organizer:**
- 2) Copies of Schedules K-1 for partnerships, S corporations, estates or trusts. (**Note:** You do not need these documents to make your tax appointment. You can provide them at a later date.)
 - 3) If you sold real estate, stock or mutual fund shares during the year, see STEP 4.
 - 4) If you acquired, sold or refinanced a home or other property in 2019, provide a copy of the closing statement.
 - 5) If you are a new client, provide copies of tax returns for 2015, 2016 and 2017.

Note: When completing your organizer, round all amounts to the nearest dollar.

STEP 1		The following items may affect your tax return. Please answer carefully.			
These questions pertain to calendar year 2019 unless otherwise noted. If married filing jointly, questions apply to you and your spouse.					
1)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Did you pay or receive alimony (Tax Tip 1)? Do not include child support.	(Select one.)	Pay <input type="checkbox"/> Receive <input type="checkbox"/>
			To/From: Name	Social Security Number	Amount \$
2)	Y <input type="checkbox"/>	N <input type="checkbox"/>	For the entire year, did you, your spouse and your dependents have health care coverage provided by either an employer or the government (Medicare, Medicaid or VA) or purchased through the Health Insurance Marketplace (Exchange) or directly from an insurance company?		
3)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Did you move because of a job change?		
			Distance from old house to old job:	Distance from old house to new job:	
4)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Did you (or do you plan to before April 15, 2020) contribute to a traditional IRA or Roth IRA for 2019? (Tax Tip 2)		
			Self: Traditional IRA \$	Roth IRA \$	Spouse: Traditional IRA \$ Roth IRA \$
5)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Did you convert a traditional IRA or roll a qualified plan distribution to a Roth IRA in 2019?		
			If yes, amount converted/rolled over: \$		
6)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Did you (or do you plan to before April 15, 2020) contribute to a health savings account (HSA) for 2019? (Tax Tip 3)		
			Amount of contribution: (Do not list employer contributions, including amounts you elected to contribute under a cafeteria plan, shown on your Form W-2.)		
			Self: \$	Spouse: \$	Type of health plan coverage: Self-only <input type="checkbox"/> Family <input type="checkbox"/>
7)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Did you receive any distributions from your health savings account (HSA)?		
			Amount of distributions: \$	Amount of unreimbursed qualified medical expenses (attach list): \$	
8)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Are you a grade K–12 teacher?		
			If yes, enter amount of out-of-pocket classroom costs you paid or incurred (Tax Tip 4): \$		
9)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Did you pay child care costs for a dependent child under age 13, or costs of caring for a disabled dependent or spouse, so you could work, attend school or look for a job?		
			If yes, provide the amounts paid for each individual and the names, addresses and taxpayer identification numbers of the care providers.		
			Amount, if any, that was reimbursed by an employer dependent care plan (Tax Tip 5): \$		
10)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Did you pay expenses related to adopting a child?		
			If yes, provide details of any expenses incurred:		
11)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Did you pay any individual \$2,100 or more to perform household services during the year, such as a babysitter, care-taker, housekeeper, cook or gardener?		
12)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Did you have any debts cancelled or reduced (including credit cards), property repossessed or foreclosed upon, or did you file for bankruptcy? (Tax Tip 6)		
13)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Did you have a financial interest in, or signature authority over, a financial account (such as a bank or securities account) located in a foreign country at any time during 2019? A financial account is located in a foreign country if it is physically located outside of the U.S., including an account maintained with a branch of a U.S. bank that is physically located outside of the U.S.		
			Y <input type="checkbox"/>	N <input type="checkbox"/>	If yes, did the aggregate value of all accounts located in a foreign country (other than accounts maintained on a U.S. military installation) exceed \$10,000 at any time during the year?
14)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Did you receive a distribution from, or were you the grantor of, or a transferor to, a foreign trust?		
15)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Do you have financial accounts maintained by a foreign (non-U.S.) bank or financial institution that totaled more than \$50,000 on the last day of the year or more than \$75,000 at any time during the year (\$100,000 and \$150,000, respectively, if married filing a joint return)?		
16)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Did you own any other foreign financial assets (such as stock in a foreign corporation or an interest in a foreign partnership) that are not held in a financial account?		
17)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Did you have any children under age 19 (or age 19–23 and full-time students) who had unearned income over \$1,050?		
18)	T <input type="checkbox"/>	S <input type="checkbox"/>	Do you (or your spouse) want to designate \$3 to the Presidential Election Campaign Fund? (Does not change amount due or refund.) Leave blank if neither wishes to designate \$3.		
19)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Do you want to allow your preparer or another individual to discuss your federal return with the IRS? Provide name, phone number and personal identification number of individual if not preparer.		
			Name:	Phone Number:	
			Identification Number:		
20)	Y <input type="checkbox"/>	N <input type="checkbox"/>	Did you make gifts totaling more than \$15,000 to any individual during the year? If so, provide recipient's name, address, relationship to you and the amount of the gift.		

STEP 1 (Continued)	Check any of the boxes below that apply to you for 2019:
<input type="checkbox"/>	Purchased health insurance for yourself or a family member through the Health Insurance Marketplace (Exchange). (Attach Form 1095-A, Health Insurance Marketplace Statement).
<input type="checkbox"/>	Were granted stock options by your employer and/or exercised employer stock options.
<input type="checkbox"/>	Owned any securities or held any debts that became worthless during the year.
<input type="checkbox"/>	Contributed to or received distributions from an Archer Medical Savings Account (MSA).
<input type="checkbox"/>	Traveled more than 100 miles from home and stayed overnight to perform duties as a National Guard member or reservist.
<input type="checkbox"/>	Performed services in the performing arts for at least two employers.
<input type="checkbox"/>	Lived and worked in a foreign country.
<input type="checkbox"/>	Were issued an Identity Protection PIN by the IRS: _____
<input type="checkbox"/>	Were in the military (or reservist).
<input type="checkbox"/>	Received any notice from the IRS or a state taxing authority.
<input type="checkbox"/>	Contributed to or received distributions from an Achieving a Better Life Experience (ABLE) account.
<input type="checkbox"/>	I can be claimed as a dependent on another person's tax return for 2019.
Please provide any other information related to your 2019 taxes not reported elsewhere on this organizer:	

STEP 2	Dependents (Tax Tip 7) (attach additional sheet, if necessary)																								
Children age 18 or younger (age 19-23 if attending school full time for at least five months during the year) who lived with you more than half the year and who did not provide more than half of their own support (or a permanently and totally disabled child).																									
<input type="checkbox"/> Check if it is possible that a different taxpayer might claim a child listed below as a dependent.																									
1) _____	Birthdate _____ SSN _____																								
2) _____	Birthdate _____ SSN _____																								
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4) _____	Birthdate _____ SSN _____																								
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:40%;">Other Dependents (relatives and/or members of household)</th> <th style="width:20%;">Relationship</th> <th style="width:15%;">Social Security #</th> <th style="width:10%;">Is 2019 Gross Income less than \$4,150? (Yes or No)</th> <th style="width:10%;"># Months Resided in Your Home in 2019</th> <th style="width:5%;">% Support Received From You</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>		Other Dependents (relatives and/or members of household)	Relationship	Social Security #	Is 2019 Gross Income less than \$4,150? (Yes or No)	# Months Resided in Your Home in 2019	% Support Received From You	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____	_____																				
_____	_____	_____	_____	_____	_____																				
<input type="checkbox"/> Check if you are divorced and either signed or received Form 8332 (release of exemption for child). (Provide Form 8332.)																									

STEP 3	Income
Wages—Provide ALL Copies of Forms W-2	
Number of employers (during the year): Self _____ Spouse _____	
Dividend and Interest Income	
Provide all Forms 1099-INT, 1099-DIV and 1099-OID. List interest and dividends not reported on Form 1099 on a separate sheet, but do not duplicate what's reported on the 1099s. Also, list any penalty on early withdrawal from savings.	
Installment Sale Payments Received	
Total Payments \$ _____	Is payer a relative or related party? Yes <input type="checkbox"/> No <input type="checkbox"/>
Interest \$ _____	If payer uses property as a principal residence, provide payer's:
Principal \$ _____	Name _____
	Address _____
	Social Security Number _____
Did sale occur in 2019? If Yes <input type="checkbox"/> No <input type="checkbox"/>	
yes, complete STEP 4.	

**STEP 3
(Continued)**

Retirement Plan and Social Security Income

- 1) Did you receive distributions from IRAs, SEPs, pensions, 401(k)s or other retirement plans (including amounts rolled over and in-plan Roth rollovers)? Yes No
If yes, provide all Forms 1099-R received. Enter amounts received but not reported on a Form 1099-R here \$ _____
- 2) Amount of distribution rolled over to qualified plan or traditional IRA (Tax Tip 8)
- 3) Amount of distribution rolled over to a Roth IRA
- 4) Amount of distribution rolled over to a Designated Roth Account
- 5) Amount of distribution made directly to a qualified charity
- 6) If you were under age 59½ when the distribution was received, do you qualify for an exception to the 10% penalty on early distributions? (Tax Tip 9) Yes No
Explain: _____
- 7) If you have reached age 70½, have you taken the 2019 required minimum distributions from your IRAs and qualified retirement plans? Self: Yes No
Spouse: Yes No
- 8) Did you receive Social Security or railroad retirement benefits? Yes No
If yes, provide all Forms SSA-1099 or RRB-1099 received

Partnerships, Estates, Trusts and S Corporations

Provide a list of all the partnerships and S corporations in which you own an interest and all trusts of which you are a beneficiary. Indicate on the list whether you materially participated in that entity's trade or business in 2019 (Tax Tip 10). Write "N/A" if the entity is not engaged in a trade or business (for example, an entity whose only activity is ownership of rental real estate or investment assets such as stocks and bonds). Provide all Schedules K-1 received for the tax year.

Other Income—Provide Forms 1098 and 1099

- Bartering Income \$ _____
- Bonuses and Prizes not reported on Form W-2 (Explain)
- Cancellation of Debt (Form 1099-A or 1099-C) (Tax Tip 6)
- Commissions and Fees (Not reported in STEP 5)
- Disability Income not included on Form W-2 (taxable)
- Education Savings Account or Qualified Tuition (529) Plan Withdrawals (Form 1099-Q)
- Gambling/Lottery Winnings
- Jury Duty—Election Board Fees
- Scholarships (Form 1098-T)
- State Income Tax Refund (Form 1099-G)
- Tips and Gratuities not reported on Form W-2 (Tax Tip 11)
- Unemployment Compensation (Form 1099-G)
- Veterans' Pension and Disability
- Workers' Compensation
- Other (attach separate sheets if necessary)

STEP 4

Sales and Exchanges

Provide information about sales of stock, real estate or other property along with Forms 1099-B, 1099-S, closing statement or other supporting information. Attach separate sheet if necessary. If all transactions, including basis, are reported on Forms 1099-B you provide, there is no need to complete the following. If your principal residence was sold, see STEP 13.

	Asset #1	Asset #2	Asset #3
Description of Property	_____	_____	_____
Date Acquired	_____	_____	_____
Date Sold	_____	_____	_____
Sales Price	\$ _____	\$ _____	\$ _____
Basis (Tax Tips 12 and 13)	_____	_____	_____
Expenses of Sale	_____	_____	_____

STEP 5	Self-Employment Income (See also STEPs 7, 8 and 9) If more than one farm activity or business, list income and expenses separately for each. Also include any single-member limited liability companies (LLCs).
Business Activity/Product: _____	
Business Name: _____	
Did you begin or end the business in 2019? Begin <input type="checkbox"/> End <input type="checkbox"/> s	
Receipts (provide all Forms 1099-MISC and 1099-K) \$ _____	
Inventory—Beginning of Year \$ _____	
Merchandise Purchases (less Product for Personal Use)	
Labor, Materials and Other Costs of Inventory	
Inventory—End of Year	
Did you make any payments requiring Forms 1099 be filed? ¹ Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes, did you file Forms 1099? Yes <input type="checkbox"/> No <input type="checkbox"/>	
¹ Generally, payments over \$600 made to noncorporate entities in the course of a trade or business must be reported. Common examples are payments for non-employee compensation and rent.	

STEP 6	Rental and Royalty Income			
Physical Address (Street, City, State, Zip Code)	Type¹	Rent/Royalty Received	Fair Rental Days	Personal Use Days
_____	_____	\$ _____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Did you make any payments requiring Forms 1099 be filed? Yes <input type="checkbox"/> No <input type="checkbox"/>		If Yes, did you file Forms 1099? Yes <input type="checkbox"/> No <input type="checkbox"/>		
¹ 1—Single family residence; 2—Multi-family residence; 3—Vacation/short-term rental; 4—Commercial; 5—Land; 6—Royalties; 7—Self-rental; 8—Other (describe).				

STEP 7	Travel, Meals and Entertainment Expenses		
Travel expenses are deductible if you traveled away from home overnight on business. Business meals and entertainment when not traveling are also deductible (subject to limits), provided you have records showing date, amount, persons present and business purpose. Employee expenses are not deductible if employee could have been reimbursed by the employer.			
Use Correct Column F	Employee	Self-Employed	Rental Activity
Travel:			
Airplane, Train, Taxi, Auto Rental	\$ _____	\$ _____	\$ _____
Meals (see Employee/Self-Employed Tax Tip C on Page 6)	_____	_____	_____
Lodging	_____	_____	_____
Telephone/Internet Connection	_____	_____	_____
Cleaning and Laundry	_____	_____	_____
Baggage and Shipping	_____	_____	_____
Other: _____	_____	_____	_____
Meals and Entertainment Not Associated With Travel	_____	_____	_____
Reimbursements			
Were you reimbursed for any of the above expenses? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, provide details, including how reported on Form W-2.			

STEP 8 Self-Employment and Rental Expenses																																																																			
Do you qualify for business use of home deductions? Yes <input type="checkbox"/> No <input type="checkbox"/> (See Employee/Self-Employed Tax Tip B below.)	If yes, attach list of expenses related to home. Do not duplicate below. Business sq. ft. _____ Total sq. ft. _____ Part of home used for business: 0.00 %																																																																		
Use Correct Column F	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;"></th> <th style="width: 20%; text-align: center; padding: 5px;">Self-Employed¹</th> <th style="width: 20%; text-align: center; padding: 5px;">Rental¹</th> </tr> </thead> <tbody> <tr> <td style="padding: 2px 5px;">Advertising</td> <td style="padding: 2px 5px;">\$ _____</td> <td style="padding: 2px 5px;">\$ _____</td> </tr> <tr> <td style="padding: 2px 5px;">Cleaning and Maintenance</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Commissions and Fees Paid</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Contract Labor</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Employee Benefit Programs (include health insurance for employees)</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Insurance (not including health)</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Interest • Mortgage (Form 1098)</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;"> • Other Interest</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Legal and Professional Fees</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Licenses</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Management Fees</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Office Expenses</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Pension/Profit-Sharing Plan Contributions Made for Employees</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Rent Paid • Vehicles, Machinery and Equipment</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;"> • Other Business Property</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Repairs and Maintenance</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Supplies</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Taxes</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Utilities</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Wages Paid</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> <tr> <td style="padding: 2px 5px;">Other Expenses (provide list)</td> <td style="padding: 2px 5px;">_____</td> <td style="padding: 2px 5px;">_____</td> </tr> </tbody> </table>		Self-Employed¹	Rental¹	Advertising	\$ _____	\$ _____	Cleaning and Maintenance	_____	_____	Commissions and Fees Paid	_____	_____	Contract Labor	_____	_____	Employee Benefit Programs (include health insurance for employees)	_____	_____	Insurance (not including health)	_____	_____	Interest • Mortgage (Form 1098)	_____	_____	• Other Interest	_____	_____	Legal and Professional Fees	_____	_____	Licenses	_____	_____	Management Fees	_____	_____	Office Expenses	_____	_____	Pension/Profit-Sharing Plan Contributions Made for Employees	_____	_____	Rent Paid • Vehicles, Machinery and Equipment	_____	_____	• Other Business Property	_____	_____	Repairs and Maintenance	_____	_____	Supplies	_____	_____	Taxes	_____	_____	Utilities	_____	_____	Wages Paid	_____	_____	Other Expenses (provide list)	_____	_____
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¹ If more than one business or rental property, provide information separately for each. Business or rental asset purchases or sales. Provide a separate schedule listing dates of purchase or sale, purchase/sales price and property description. Include copies of sales receipts or contract is available.																																																																			

STEP 9 Health Insurance and Retirement Plans for the Self-Employed	
Insurance premiums paid: Health \$ _____	Long-Term Care \$ _____
Include premiums paid for yourself, spouse, dependents and children under age 27, as well as Medicare premiums. Do not include any premiums for months self-employed person was eligible to participate under any employer's plan. Report in Step 12 instead.	
Contributions made to your SEP, SIMPLE or qualified retirement plan for 2019. See Employee/Self-Employed Tax Tip D below. \$ _____	

- | Employee/Self-Employed Tax Tips |
|--|
| <p>A) First-Year Expensing Election. A certain amount of qualifying business assets purchased and placed in service in 2019 may be expensed currently. (Separate limits apply to business vehicles.)</p> <p>B) Business Use of Home Deduction. If an area of the home is used regularly and exclusively for business, a deduction for a portion of mortgage interest, taxes, insurance, other operating costs and depreciation may be allowed. Special rules apply for inventory storage and daycare. Ask for details.</p> <p>C) Per Diem Meal Rates. In lieu of using actual expenses incurred for meals and incidental expenses while traveling, self-employed individuals and employees may deduct IRS-approved per diem amounts. The amounts depend on location. Provide detailed list of dates and locations of business travel.</p> <p>D) Self-Employed Retirement Plans. Many retirement plans (funded with pre-tax dollars) are available to self-employed business owners. The deadlines for establishing and contributing to a retirement plan vary. If you have employees, matching contributions may be required.</p> <p>E) Small Employer Health Insurance Credit. A credit is available to qualified small employers that pay health insurance premiums for employees. Premiums paid for the business owner and his family members don't qualify. Ask us for details.</p> |

STEP 10 Vehicle Expense

- Commuting between your home and regular work location is not deductible.
- Commuting expenses for going between your home and a temporary work location outside the metropolitan area where you live and normally work are deductible. Travel expenses between your home and a temporary work location within your metropolitan area are not deductible unless either of the following tests are met:
 - 1) You have one or more regular work locations away from your home or
 - 2) Your home is your principal place of business.
- A work location is considered temporary if employment is expected to last and actually does last for one year or less.
- There are two methods to determine the deduction for vehicles used for business: (1) actual expenses or (2) standard mileage rate (for 2019, 54.5¢ per mile).
- For each vehicle used for business, complete lines 1–6. If you know that you use standard mileage allowance, ignore lines 7–13. If you purchased a vehicle this year and do not use standard mileage allowance, provide a copy of the sales invoice.

Vehicle	#1	#2	#3
1) Total miles driven this year: Business	_____	_____	_____
Commuting	_____	_____	_____
Other Personal	_____	_____	_____
2) Vehicle Description	_____	_____	_____
3) Date Vehicle Was First Used for Business	_____	_____	_____
4) Cost (cash paid, net of any trade allowance)	\$ _____	\$ _____	\$ _____
Was a care traded in?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
or Lease Payments (for the year)	_____	_____	_____
5) Interest Paid on Vehicle Loan (Self-Employed Only)	_____	_____	_____
6) Parking and Tolls	_____	_____	_____
7) Gasoline, Oil, Lubrication	_____	_____	_____
8) Repairs, Maintenance, Car Washes	_____	_____	_____
9) Tires and Supplies	_____	_____	_____
10) Insurance	_____	_____	_____
11) Tags and Licenses	_____	_____	_____
12) Garage Rent	_____	_____	_____
13) Other:	_____	_____	_____
14) Sold in 2019? If yes, date sold:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
15) If yes, provide sales price and any trade information	_____	_____	_____

Questions for All Taxpayers Claiming Vehicle Expenses:

1) Do you have evidence to support business use?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2) If yes, is the evidence written?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3) Do you (or your spouse) have another vehicle available for personal use?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4) Do you have an employer-provided vehicle that is available for personal use?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5) Were you reimbursed for any of above auto expenses?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
6) If yes, is the reimbursement included in your Form W-2?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Recordkeeping: Your vehicle expenses will not be allowed by the IRS without adequate records or sufficient evidence verifying business use.

Daily records provide the best protection in case of an audit.

STEP 11	Education Expenses (Attach Forms 1098-E, 1098-T and 1099-Q)		
Include information about education expenses incurred for you, your spouse or your dependents.			
1) Student's Name			
2) If in college, was student enrolled at least half-time for at least one academic period beginning in 2019?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
3) Felony Conviction? ¹	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
4) Educational Purpose (degree seeking, job related)			
5) Name of Institution			
6) Type of Expense (See Tax Tip 14)			
7) Amount Paid	\$	\$	\$
8) Paid By Whom?			
9) Student's Grade or Year in College			
¹ Indicate whether or not student was convicted before 12/31/2019 of a felony for possession or distribution of a controlled substance.			

STEP 12	Itemized Deductions		
Note: Complete this step only if you think your total itemized deductions might exceed the IRS standard deduction for your filing status (see below).			
2019 Standard Deduction			
Filing Status	Standard Deduction		Add for Blind and/or Over 65
Married Filing Jointly or Qualifying Widow(er)	\$ 24,000	+	\$ 1,300
Single	12,000		1,600
Head of Household	18,000		1,600
Married Filing Separately	12,000		1,300
Medical Expenses			
Deductible only if net expenses exceeds 10% of Adjusted Gross Income (AGI)			
Note: Do not include amounts paid for or reimbursed by insurance or health insurance premiums paid with pre-tax income.			
Did you pay medical expenses for a person you cannot claim as a dependent? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, ask your tax preparer.			
Health Insurance Premiums ¹ (Include premiums for vision and dental insurance but not for disability or loss of income policies)		See Note Above	\$
Medicare Insurance Premiums ¹ (Form SSA-1099)			
Long-Term Care Insurance Premiums ¹ (Tax Tip 15)			
Prescribed Drugs and Insulin			
Doctors and Clinics			
Dentists and Orthodontists			
Glasses, Contact Lenses, Eye Exams, Laser Eye Surgery			
Hospitals, Nurses, Ambulance			
Nursing or Long-Term Care Facility			
Other (please detail):			
.....			
.....			
.....			
.....			
.....			
Medical Miles Driven in 2019			
Parking Fees			
Lodging While Obtaining Medical Treatment Limited to \$50 per night, per person			
¹ Do not include any premiums included in STEP 9 (if self-employed).			

**STEP 12
(continued)**

Taxes

State and Local Income Taxes Paid in 2019 (include 2019 estimated tax payments and amounts paid with 2017 return)

State and Local Sales Tax Paid for Major Purchases (motor vehicles, boats, airplanes, homes or home building materials, if rate same as general sales tax rate)

Foreign Taxes

Real Estate Taxes—Homestead (less special assessments)

Other Real Estate Taxes (second home, cabin, etc.)

Property Tax Refund

Special Assessments—Interest Portion Only

Personal Property Taxes (auto license tags, etc.)

\$

Charitable Donations (Use separate sheet if needed.)

Monetary donations under \$250 each must be substantiated by a bank record (such as a cancelled check). For each donation of \$250 or more, the taxpayer must obtain a written acknowledgement from the charity. (See Tax Tip 16.)

Cash, Check or Credit Card (include payroll deductions):

Churches or Synagogues

Other: _____

Other: _____

Other: _____

Noncash:

Fair Market Value (FMV) of Items Given to Charities

Attach list of each item (or group of similar items) and its FMV (Tax Tip 17).

If a vehicle, boat or airplane donation over \$500, provide Form 1098-C.

Out-of-Pocket Expenses for Charitable Work

Charitable Miles: _____ Miles x 14¢ = _____

Other:

\$

Miscellaneous Expenses

Do Not Duplicate STEP 7

State deductible only

Unreimbursed employee business expenses (for example, union dues, tools and supplies, special uniforms and safety equipment, professional dues and subscriptions, job-related education—see Tax Tip 18). List items on separate sheet. See STEP 7 for automobile expenses and travel and entertainment

Job-Seeking Expenses in Same Field (Tax Tip 19)

Travel/Air Fare/Lodging \$ _____

Meals

Employment Agency Fees

Resume \$ _____ Other \$ _____ Total = _____

Tax Prep, Financial Planning/Consultation Fees (Tax Tip 20)

Investment Expenses (Tax Tip 21)

Phone/Postage/Supplies for Investments \$ _____

Safe Deposit Box

Investment Publications and Journals

IRA and Other Retirement Plan Fees You Paid Directly

Other \$ _____ Total = _____

Gambling Losses, Limited to Total Gambling Winnings Listed in STEP 3

Other: _____

Other: _____

Other: _____

\$

STEP 12 (continued)	Casualty Loss		
Auto Accident, Fire, Theft, Storm, etc. Provide details. (Tax Tip 22)			
Interest Paid (Provide Forms 1098)		Primary Residence	Second Home (Tax Tip 23)
Home Mortgage (If seller-financed, provide seller's name/address/SSN)		\$ _____	_____
Home Equity Loan		_____	_____
Loan Points not Reported on Form 1099-INT (Tax Tip 24)		_____	_____
Investment Interest Paid		\$ _____	_____

STEP 13	Principal Residence (attach any 2019 closing statements)		
Yes <input type="checkbox"/> No <input type="checkbox"/>	Did you sell your principal residence in 2019? If yes: (Tax Tip 25)		
Yes <input type="checkbox"/> No <input type="checkbox"/>	• Did you own and use it as a principal residence for at least two of five years before the sale?		
Yes <input type="checkbox"/> No <input type="checkbox"/>	• Did you sell a previous residence within two years before the sale date and exclude any gain?		
Yes <input type="checkbox"/> No <input type="checkbox"/>	Did you purchase a residence in 2019?		
Yes <input type="checkbox"/> No <input type="checkbox"/>	Did you refinance your mortgage or take out a home equity loan in 2019? Amount of proceeds used for something other than acquiring or improving your home: \$ _____		
Yes <input type="checkbox"/> No <input type="checkbox"/>	Did you purchase any energy-efficient improvements such as solar water heaters, generators or fuel cells, or energy efficient exterior doors, windows, insulation, heat pumps, furnaces, central air conditioners or water heaters?		
Yes <input type="checkbox"/> No <input type="checkbox"/>	Did you receive a first-time homebuyer credit for a home purchased in 2008? If yes, enter the amount of the credit: \$ _____		

STEP 14	2019 Estimated Tax Payments¹			
	Federal	Date Paid	State	Date Paid
Amount applied from 2018 overpayment, if any: \$ _____	_____	_____	\$ _____	_____
First Quarter Payment Made	_____	_____	_____	_____
Second Quarter Payment Made	_____	_____	_____	_____
Third Quarter Payment Made	_____	_____	_____	_____
Fourth Quarter Payment Made	_____	_____	_____	_____

¹ Do not include withholding from Forms W-2 or 1099 in estimated tax payments shown here.

STEP 15	Tax Refund—Direct Deposit Information		
If you are expecting a 2019 federal tax refund, the refund can be routed to up to three of your checking or savings accounts. (Tax refunds may also be directly deposited to your IRA, Health Savings Account, Archer MSA or Education Savings Account or to a Treasury Direct online account.) If you prefer a direct deposit, please complete the following information. Otherwise a refund check will be mailed to you at the address on your tax return.			
Type of Account (Checking, Savings, IRA, etc.)	Routing Number (Nine digits)	Account Number	Percent of Refund
_____	_____	_____	_____

Privacy Policy:

We collect nonpublic information about you from the following sources:

- 1) Information we receive from you on applications, tax organizers, worksheets and other forms,
- 2) Information about your transactions with us, our affiliates or others and
- 3) Information we receive from a consumer reporting agency.

We do not disclose any nonpublic personal information about our customers or former customers to anyone, except as required by law.

We restrict access to nonpublic personal information about you to those members of our firm who need to know that information in order to provide services to you. We maintain physical, electronic and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.

Tax Tips

- 1) Payments that meet specific requirements are treated as alimony for tax, regardless of how they are described in a divorce decree. One of the requirements is that the payments end upon the recipient's death. So, payments for maintenance or spousal support may be considered alimony for tax. Ask us for details.
- 2) IRA contributions are limited to the lesser of \$6,000 (\$7,000 if age 50 or older at year-end) or compensation. If you (and your spouse) are not covered by an employer retirement plan, traditional IRA contributions (up to the limit) are fully deductible. If you or your spouse are covered by an employer retirement plan, the deduction is phased out at higher income levels. Roth IRA contributions are not deductible. Also, regardless of whether you are covered by an employer retirement plan, the Roth IRA contribution limit is phased out at certain income levels. If only one spouse has compensation, a spousal IRA can be set up for the nonworking spouse. Each spouse (working and nonworking) can contribute up to \$6,000 (\$7,000 if age 50 or older) provided the working spouse's compensation is at least equal to the IRA contributions.
- 3) Individuals covered only by a high deductible health plan (deductible of at least \$1,350 for individual coverage and \$2,700 for family coverage) can make deductible (subject to limits) HSA contributions.
- 4) Grade K–12 teachers can deduct amounts paid for books, supplies (other than nonathletic supplies for health and PE courses), computer software and other equipment and materials used in the classroom as well as certain expenses for professional development courses.
- 5) The child and dependent care credit is generally available to married taxpayers only if both spouses have earned income, unless a spouse is a full-time student or disabled. Cancellation of debt (COD) generally results in taxable income. However, exceptions are available for bankrupt and insolvent taxpayers as well as for cancellations or reductions of student loans, farm-related loans, mortgages on principal residences and loans related to business real property.
- 6) A person who files a joint return (other than a return filed solely to claim a refund) cannot be claimed as a dependent. Also, special rules apply to children of divorced parents.
- 7) To be tax free, IRA and qualified plan distributions must be rolled over to another traditional IRA or qualified plan within 60 days. Also, for IRAs, there is a one-year waiting period between tax-free rollovers.
- 8) IRA (but not qualified plan) withdrawals before age 59½ are not subject to the 10% penalty if the funds are used for (a) medical expenses that are deductible as an itemized deduction (b) certain higher educational expenses (c) a first-time home purchase for distributions up to \$10,000 or (d) medical insurance by individuals who are unemployed for at least 12 weeks. Other exceptions may apply to IRA and qualified plan withdrawals.
- 9) Material participation in a trade or business generally means the taxpayer spends more than 500 hours participating in the activity during the year. However, the test can also be met in other situations, such as when the taxpayer is the only one who substantially participates in the activity or spends more than 100 hours participating and no one else spends more time.
- 10) If "allocated tips" are listed on year-end Form W-2, the amount will be subject to both Social Security Income and income tax unless recd's (tiplog) verify that a lesser amount was actually received.
- 11) Improvement costs may reduce taxable gain upon sale of property. Keep records of improvement costs made to all real property at least four years after the property is sold.
- 12) If stock or mutual fund dividends are automatically reinvested instead of received in cash, these reinvestments increase cost basis, and reduce gain or increase loss upon sale.
- 13) Tax benefits such as a credit, deduction or income exclusion for interest on certain U.S. savings bonds may be available for certain education expenses. Benefits may be phased out at certain income levels. List the following expenses: (a) tuition and required fees, (b) books, supplies and equipment required for attendance, (c) computer equipment and internet access, (d) room and board (if at least half-time attendance) and (e) student loan interest.
- 14) Qualified long-term care insurance premiums are deductible subject to age and annual dollar limits.
- 15) Charitable contributions of \$250 or more in any one day to any one organization must have written acknowledgment from the organization. The acknowledgment must state whether or not any goods or services were received in exchange for the donation.
- 16) When making contributions of used furniture, appliances and clothing to nonprofit organizations, attach a record of the items donated to the receipt for proof of this deductible contribution. Contributions must be in good or better condition to be deductible.
- 17) Expenses incurred for education for improving your skills for your present job or maintaining your job may be deducted. Seminars, tuition, books and some travel expenses can be deducted.
- 18) Job-seeking costs in the same field of employment are deductible. Successful job placement is not necessary.
- 19) Part of a legal fee incurred in a divorce or an estate plan may be deductible if it is for advice on the tax consequences. Have your attorney clearly indicate how much of the fee is for tax advice.
- 20) Expenses incurred for attending conventions, seminars or other meetings that give investment advice to taxpayers are not deductible.
- 21) Generally, a net loss due to a casualty (such as flood, fire, theft, etc.) is deductible to the extent it exceeds 10% of your AGI. Special rules apply to federally declared disasters.
- 22) A home can be a house, condominium, cooperative, mobile home, boat or similar property. It must provide basic living accommodations including sleeping space, toilet, and cooking facilities.
- 23) Loan origination fees (points) paid on a loan to buy or build a principal residence are generally deductible as interest in the year paid. Points paid on refinancing an existing mortgage or on a loan to purchase or improve a second home must be deducted (amortized) over the life of the loan. Exception: If part of the proceeds were used to improve your main home, points related to the improvements may be deducted in the year paid. You can exclude up to \$250,000 (\$500,000 if married and filing jointly or certain surviving spouses) of the gain on a sale of a principal residence if you owned and occupied
- 24) the residence for two out of the five years before the date of sale. If the home was used other than as your principal residence any time after 2012, some of the gain may be taxable.
- 25) Keep receipts supporting tax deductions for at least four years.
- 26) Keep receipts supporting tax deductions for at least four years.