Rich Driscol CPA

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2024 1040 Tax Organizer - Client information

Personal Data	(Please Print)						
	First N	ame, M.I., Last Name	SSN	Date of Birth	Sex	Occupation	
Taxpayer:				/ /	□ M □ F		
Spouse:				/ /	□M □F		
Primary Residence Address:					Prima	ry contact:	
City, State, Zip:						Text □	
Secondary Residence:					\Box TP \Box SP	E-mail □	
City, State, Zip:						Phone	
Taxpayer E-mail:				Taxpayer Phone:	() -		
Spouse E-mail:				Spouse Phone:	() -		
Check if you are	a Victim of Ider	ntity Theft \Box TP \Box S	P IRS PIN# TP	[] SP[]		
Tax Year Filin	ng Status (Ched	ck One)					
Single:		□ if MFS:	Spouse's Name :]	
Head of Household:			Spouse's SSN:			1	
Qualifying Widow(er):			Check if you live with your spouse at all during the taxable year.				
Married Filing Joint:			If yes, check if lived with your Spouse anytime after June 30th.				
Married Filing Separate:		□ Did your Spouse file a tax return & Itemize Deductions? □ Y □ N				$\neg Y \ \square N$	
Dependents (ij	f applicable)	. Head of Household mus	st complete this section				
First Name	Last Name	SSN	Date of Birth	Relationship & Months in Home	Full-Time Student?	Dependent's Gross Income	
			/ /	-	$\square Y \square N$	\$	
			/ /	-	$\square Y \square N$	\$	
			/ /	_	$\square \ Y \ \square \ N$	\$	
			/ /	_	$\square\;Y\;\;\square\;N$	\$	
			/ /	_	$\square\;Y\;\;\square\;N$	\$	
	-	ared with other taxpayers ax return to coordinate bo		g years?	□ Y □ N		
Divorce (if app	-						
Date divorce/sep	peration agreeme	nt was final: ree or seperation agreement	was modified any time a	after the taxable year	end.		

		r Taxable Year (requi	,		~ 1	1.00	
State	Own, Rent, Other	Date Moved In	Date Moved Out	County on Jan 1	Schoo	1 District	
	+	/ /	/ /				
	+	/ /	/ /	-			
		/ /	/ /				
State Renter'	's Deduction (if app	olicable)					
Address Rente	d, if different:			1			
Total Months I		#	Landlord's Name:				
	f Monthly Rent	\$	Landlord's Address	11	μ φα οοο : 10	XY	
Your Portion o	t Annual Rent	\$	h \$3,000 paid?	1 Y □ N			
CollegeChoic	ce 529 Credit 837 (if applicable)					
Bene	ficiary Name	Account #		Contribuitions paid for Higher Eduction	Contributions paid for K - 12 Education	Provide Tax Documents	
K - 12 Privat	e School / Homesch	hool Education Deduc	ction (if applicable)				
Name	of Student G	r Qualifying Expenses	Name o	f School	City, S	State, Zip	
						•	
College Char	ritable Contributio	n Credit (<i>if applicable</i>	e)				
U	ne of Indiana College	(0.11	,	4 Digit Code	Amount	Date	
		·			\$	/ /	
					\$	/ /	
					\$	/ /	
					Ψ		
		x Impacts Regarding					
		eductions & Form W-4		Estimated Tax Payn			
	HSA Health Saving			Subcontract Labor Form W-9 & Form 1099-MISC			
	401K Contribution			Personal Property Taxes			
	Retirement Contrib			Purchasing a Vehicle & Deducting a Vehicle			
	College 529 Saving			Assets and Depreciation			
				Selling Assets / Investments & Capital Gains			
	Charitable Contribu			In Home Office Deductions			
	Changes in Family	Size		Buying / Selling a Rental Property			
	Inherited Assets			Starting / Closing a Small Business			
	Divorce			Forming a LLC			
	Retirement & Socia		Security Income QBID Qualified Business Income Deduction				
	Gains from the Sale	e of a Main Home		Marginal Tax Rate vs Average Tax Rate			
	Prior Year Tax Ret	urns		State Tax Rates			
	IRS or State Agenc	y notices		Other:			

Electronic Filing (required)

All Tax Returns are Required to be E-Filed. This is a free service.

Electronic Approval and Electronic Signatures (required)

All Clients will receive an Online E-Signature request via DocuSign once their return is ready for final approval and filing. The E-Signature request contains an online copy of your returns.

Online Client Document Portal (LINK, cloud hosted by Intuit) (optional, but recommended)

This Service is OPTIONAL, if you would like to use the Client Document Portal please call us and we will invite you. All Clients have a FREE two-way client document portal available. This entire packet is available in your document portal. Clients can use their secure Client Document Portal Link to send, store and print their tax documents and tax returns. LINK allows us to share documents back and forth using PDF scans, JPG pictures, and other upload methods.

Paper Copies (optional)

All Clients will receive an Online Copy of their tax returns with their completed E-Signature via DocuSign.

LINK Document Portal Clients will also have a copy of their returns stored in their document cloud hosted by Intuit.

Any Original Tax Documents received will be returned via USPS for an additional \$10 fee.

Paper Copies of Tax Returns can be provided for an additional \$10 fee.

Client Options (required)	Initial				
Please Return my Original Tax D	\$ 10 fee	[]		
Please send me a paper copy of r	\$ 10 fee	ſ]		
Payment Choice : (Select one) fe	ees are compiled and presented with returns for review	ew.	-	-	
□ Cash or check	a free service				
□ Zelle to 317-413-8338	a free service				
□ ACH bank transfer	a free service				
☐ Credit or Debit Card	3 % fee				
Cardholder Name:					
Card Number:		Security Code:			
Expiration Date:	/	Billing Zip:			

2024 Tax Fees

All Tax Returns must be approved, signed, and fees paid before e-file can proceed. Tax fees are now \$180 per hour. Any situations identified that could materially increase your fees will be communicated to you promptly before work begins. I appreciate your loyalty and your referrals. Thank you again.

Final Checklist					
Items to be returned to CPA for tax prep					
☐ Signed Engagement Letter					
☐ Completed Client Information 4 pages, Signed at page 4					
☐ Completed Tax Organizer 50 pages					
Copies of Last Pay Stubs for the Year					
☐ Copies of all W-2s					
☐ Copies of all 1099-Gs (Government Payments)					
☐ Copies of all 1095-Cs or 1095-Bs (Health Insurance)					
☐ Copies of all 1095-As (Health Insurance Marketplace)					
☐ Copies of 1099-INTs (Interest Income)					
☐ Copies of all 1099-DIVs (Dividend Income)					
☐ Copies of all 1099-Bs (Sales of Stocks & Bonds)					
☐ Copies of all Brokerage Statements					
☐ Copies of all 1099-SSAs (Social Security Income)					
☐ Copies of all 1099-Rs (Retirement Income)					
☐ Copies of all K-1s (Partnership, S-Corp, Trust)					
☐ Copies of all 1098s (Mortgage Interest Paid)					
☐ Copies of all Real Estate Closing Documents					
☐ Copies of all 1098-Ts (Tuition Paid)					
☐ Copies of all Receipts for Sales Tax Paid on Big Purchases (Vehicles, Boats,)					
☐ Copies of Divorce Decree / Separation Agreement (if new)					
☐ Copies of Prior Year Tax Returns (new clients only)					
☐ Copies of any other Tax Documents You Received					
☐ Copies of any IRS or State Tax Notices You May Have Received					
☐ Copy of a Check or a screen shot for Direct Deposit information					
☐ Do Not Send Your Receipts, only the Tax Documents Listed Above.					
Signatures for Return Processing					
(required)					
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I certify that the information provided in this organizer is accurate and complete. I understand it is my responsibility to include					
any and all information concerning income, deductions and other information necessary for the preparation of my personal income tax returns. All returns received and still in our office on March 15 will have automatic extensions filed.					
(If filing a joint return both parties must sign and date.)					

Date:

Date:

Taxpayer Signature:

Spouse Signature: