



INDIVIDUAL TAX ORGANIZER LETTER (FORM 1040)

The Internal Revenue Service (IRS) matches information returns/forms with amounts reported on tax returns. A negligence penalty may be assessed when income is underreported or when deductions are overstated. Accordingly, all information returns reflecting amounts reported to the IRS also are mailed or delivered to the taxpayers in an envelope clearly marked “IMPORTANT TAX DOCUMENTS ENCLOSED” and should be submitted with this organizer. Forms such as:

W-2 (Wages)	Schedules K-1
1099-R (Retirement)	(Forms 1065, 1120S, 1041)
1099-INT (Interest)	
1099-DIV (Dividends)	Annual Brokerage Statements
1099-B (Brokerage Sales)	1098 — Mortgage Interest
1099-MISC (Rents, etc.)	Other tax information statements
1099 (any other)	8886, Reportable transactions
1098-T (Education)	Form HUD-1 for Real Estate Sales/Purchases

To continue providing quality services on a timely basis, I urge you to collect your information as soon as possible. If information from “pass-through” entities such as partnerships, trusts and S corporations is the only data you are missing, please send the data you have assembled and forward the missing information as soon as it is available.

The filing deadline for your income tax return is in April each year. In order to meet this filing deadline your completed tax organizer needs to be received no later than April 1st of any given tax year. Any information received after that date may require that an extension of time be filed for this return.

If an extension of time is required, any tax due must be paid with that extension. Any taxes not paid by the filing deadline may be subject to late payment penalties and interest.

I look forward to providing services to you. Should you have questions regarding any items, please do not hesitate to contact me.

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If we did not prepare your prior year returns, provide a copy of federal and state returns for the three previous years. Complete pages 1 through 4 and all applicable sections.

Taxpayer's name _____ Occupation _____

Spouse's name _____ Occupation _____

Home address _____

City, town or post office _____ County _____ State _____ ZIP code _____ School district _____

Telephone number _____ Telephone number (Taxpayer) _____ Telephone number (Spouse) _____

Home _____ Office _____ Office _____

Email (T) _____ Fax _____ Fax _____

Email (S) _____ Cell _____ Cell _____

_____ Email _____ Email _____

Taxpayer: Date of Birth _____ Blind? Yes ___ No ___

Spouse: Date of Birth _____ Blind? Yes ___ No ___

► **Dependent Children Who Lived With You:**

FULL NAME	RELATIONSHIP	BIRTH DATE	
1.			
2.			
3.			
4.			
5.			
6.			
7.			

► **Other Dependents:**

FULL NAME	RELATIONSHIP	BIRTH DATE		NUMBER MONTHS RESIDED IN YOUR HOME	% SUPPORT FURNISHED BY YOU
8.					
9.					
10.					