



TAX YEAR

20\_\_

## TAX RETURN BINDER

ORGANIZER FOR PERSONAL AND BUSINESS  
INCOME TAXES

Taxpayer Name \_\_\_\_\_

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## PERSONAL INFORMATION

Full Name

Date of Birth

SSN

Occupation

Spouse Name

Date of Birth

SSN

Occupation

Address

Phone  
Number

(      )

Email

## DEPENDENT INFORMATION

Dependent Name

Date of Birth

SSN

Relationship

If any of the above dependents did not live with you all year, indicate which one(s) and number of months they lived with you. 

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## BANK ACCOUNT INFORMATION

*(for direct deposit of tax refund)*

Bank Name

Routing Number

Account Number

Checking or Savings

# TAX RETURN BINDER

## INDIVIDUAL TAX INFORMATION

### PERSONAL INFORMATION CHECKLIST



*check all that apply*

- Are you, your spouse, or your dependents legally blind or permanently disabled?
- Did your marital status change during the year?
- Did your address change during the year?
- Did you adopt a child under the age of 18 during the year? If yes, provide documentation.
- Did you have any children under age 18 or full-time students under age 23 at the end of the tax year who had interest/dividend income of \$2,500 or other investment income?
- Did you obtain health insurance through the Marketplace? If yes, provide Form 1095-A.
- Did you sell your primary residence during the year? If yes, provide closing disclosure statement.
- Did you have an interest in or authority over a foreign bank or foreign investment account?

### INCOME CHECKLIST



*check all that apply and attach relevant documentation*

- W-2 provided by your employer(s)
- Social Security Benefits (Form SSA-1099)
- Interest and dividend income (Form 1099-INT and Form 1099-DIV)
- Business income reported on Form 1099-MISC, 1099-NEC, or 1099-K (also complete the business tax section)
- Sales of stocks, bonds, or other investments (Form 1099-B)
- Did you sell or exchange Cryptocurrency? Provide cost basis.
- Did you receive income from rental property? (also complete the rental real estate section)
- Did you receive Alimony payments?

# TAX RETURN BINDER

## INDIVIDUAL TAX INFORMATION

### INCOME CHECKLIST - CONTINUED



*check all that apply and attach relevant documentation*

- Did you sell an investment property? If yes, attach settlement statement.
- Income from IRA, pension distributions, or rollovers (Form 1099-R or Form 5498)
- State and local tax refunds (Form 1099-G)
- Unemployment income (Form 1099-G)
- Gambling or prize winnings (Form W-2G or Form 1099)
- Cancelled or forgiven debts (Form 1099-C)
- Distributions from an Education Savings Account or Qualified Tuition Program (Form 1099-Q)
- Royalty income
- Pass-through income from a partnership or S Corporation (Schedule K-1)
- Other income (Provide 1099 or other documentation)

### ADJUSTMENTS AND ITEMIZED DEDUCTIONS CHECKLIST



*check all that apply and attach relevant documentation*

- Paid tuition expenses (Form 1098-T)
- Student loan interest (Form 1098-E)
- Did you make a back door Roth IRA conversion (if yes, provide documentation)
- Medical expenses (doctor's visits, pharmacy, insurance, medical supplies, hospitalizations)
- Did you purchase a vehicle in which you paid sales tax?
- Real estate taxes paid on primary residence
- Mortgage interest and mortgage insurance on primary residence (Form 1098)

**TAX RETURN BINDER**

## INDIVIDUAL TAX INFORMATION

**ADJUSTMENTS AND ITEMIZED DEDUCTIONS CHECKLIST - CONTINUED**

*check all that apply and attach relevant documentation*

- Did you pay any investment interest expense?
- Cash donations to charity
- Non-monetary donations to charity (clothing, furniture, household items) - provide value of the items donated
- Did you make alimony payments?
- Educator expenses
- HSA contributions
- Did you do an early withdrawal of retirement income?
- Moving expenses

**CREDITS AND PAYMENT INFORMATION**

*check all that apply and attach relevant documentation*

- Did you pay for child/dependent care while you or your spouse worked? If so, provide amount paid for each child and FEIN of childcare facility.
- Did you make energy efficient improvements to your primary residence?
- Did you make any estimated tax payments throughout the year? If so provide the amounts below.

**PAYMENT DATE**      **AMOUNT**

\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_      \$ \_\_\_\_\_

\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_      \$ \_\_\_\_\_

\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_      \$ \_\_\_\_\_

\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_      \$ \_\_\_\_\_

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# TAX RETURN BINDER

## BUSINESS TAX INFORMATION

Business Name (if applicable)

Employer ID Number ("EIN", if applicable)

Business Activity

Business Start Date

Address

### BUSINESS INCOME

Total Gross Receipts/Sales      \$                   

Less Returns & Allowances      \$(                  )

### COST OF GOODS SOLD

Beginning of year inventory  
balance                                      \$                   

Materials & Supplies purchases  
throughout the year                              \$                   

End of year inventory  
balance    \$

**TAX RETURN BINDER**

## BUSINESS TAX INFORMATION

**BUSINESS EXPENSES**

Accounting	\$ _____	Cleaning/Janitorial	\$ _____
Advertising/Marketing/ Promotions	\$ _____	Laundry	\$ _____
Bad Debts	\$ _____	Licenses & Permits	\$ _____
Bank Charges	\$ _____	Business Meals (limited to 50%)	\$ _____
Commissions Paid	\$ _____	Office/General Supplies	\$ _____
FMLA (Paid leave)	\$ _____	Outside Services	\$ _____
Delivery & Freight	\$ _____	Student Loans Paid for Employees	\$ _____
Dues & Subscriptions	\$ _____	Parking & Tolls	\$ _____
Continuing Education	\$ _____	Salary/Wages for employees	\$ _____
Employee Retirement Contributions	\$ _____	Salary/Wages for owner	\$ _____
Business Gifts (limited to \$25 per person)	\$ _____	Postage	\$ _____
Liability Insurance	\$ _____	Printing	\$ _____
Health Insurance Premiums	\$ _____	Rents (office space/ equipment)	\$ _____
Key Person Life Insurance	\$ _____	401(k)/SEP Contributions	\$ _____
Worker's Comp. Insurance	\$ _____	Repairs & Maintenance	\$ _____
Interest Expense	\$ _____	Security	\$ _____
Internet Access	\$ _____	Payroll Taxes	\$ _____

**TAX RETURN BINDER**

## BUSINESS TAX INFORMATION

**BUSINESS EXPENSES - CONTINUED**

Personal Property Taxes	\$ <hr/>	<u>Other Business Expenses (list)</u>
State Taxes	\$ <hr/>	<hr/> \$ <hr/>
Telephone	\$ <hr/>	<hr/> \$ <hr/>
Tools & Equipment	\$ <hr/>	<hr/> \$ <hr/>
Airfare/Lodging	\$ <hr/>	<hr/> \$ <hr/>
Ground Transportation	\$ <hr/>	<hr/> \$ <hr/>
Uniforms	\$ <hr/>	<hr/> \$ <hr/>
Utilities	\$ <hr/>	<hr/> \$ <hr/>
Website Expenses	\$ <hr/>	<hr/> \$ <hr/>
Employer Provided Childcare	\$ <hr/>	<hr/> \$ <hr/>
Charitable Donations	\$ <hr/>	<hr/> \$ <hr/>
Legal & Professional Fees (including tax prep fees)	\$ <hr/>	<hr/> \$ <hr/> \$ <hr/> \$ <hr/> \$ <hr/> \$ <hr/>

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## BUSINESS TAX INFORMATION

### VEHICLE INFORMATION

Date Vehicle Placed in Service  
for Business Purposes

/ /

Year or Vehicle

Make

Model

Business Miles Driven

Total Miles

### Actual Vehicle Expenses\*

Gasoline \$

Repairs & Maintenance \$

Car Washes \$

Insurance \$

Vehicle Registration/  
Renewal Fees \$

Interest Paid \$

Lease Payment  
(if leased vehicle) \$

\*If you do not wish to provide this information you can use the mileage method of calculating business vehicle expenses which is business miles divided by total miles, multiplied by the current year IRS mileage rates.

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# TAX RETURN BINDER

## BUSINESS TAX INFORMATION

### HOME OFFICE DEDUCTION

Square Footage of your Home  
used for Business Purposes

Total Square Footage of your  
Home

### Total Home Expenses\*

Mortgage Interest \$

Real Estate Taxes \$

Rent \$

Repairs & Maintenance \$

Utilities \$

Casualty Losses \$

Other Expenses \$

Adjusted Basis or FMV  
(whichever lower) of  
Home for Depreciation \$

\*If you do not wish to provide this information you can use the simplified method of calculating the home office deduction which is the square footage of your home used for business multiplied by 5.

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# TAX RETURN BINDER

## RENTAL REAL ESTATE INFORMATION

Address of Investment/Rental Property

Property Description (condo/house/duplex/vacation)

Check if you spent 750 hours or more managing real estate during the year.

Purchase Price

\$

Check if this property was sold during the year. Provide settlement statement.

Closing Costs paid at purchase

\$

Other Costs of acquiring property

\$

Purchase Date

/  /

### RENTAL INCOME

Rental Income

\$

Number of days rented during the year

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## RENTAL REAL ESTATE INFORMATION

**RENTAL EXPENSES**

Accounting	\$ _____	Plumbing	\$ _____
Automobile Expenses	\$ _____	Property Management	\$ _____
Cleaning/Janitorial	\$ _____	Real Estate Taxes	\$ _____
Commissions	\$ _____	Supplies	\$ _____
HOA Dues	\$ _____	Telephone	\$ _____
Insurance	\$ _____	Travel	\$ _____
Landscaping/Lawn Service	\$ _____	Utilities	\$ _____
Legal & Professional Fees	\$ _____	<u>Other Expenses (list)</u>	
Repairs	\$ _____		\$ _____
Maintenance	\$ _____		\$ _____
Mortgage Interest (Form 1098)	\$ _____		\$ _____
Other Interest	\$ _____		\$ _____
Permits/Licenses	\$ _____		\$ _____
Pest Control	\$ _____		\$ _____
Plumbing	\$ _____		\$ _____
			\$ _____
			\$ _____
			\$ _____
			\$ _____

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# TAX RETURN BINDER

## MISCELLANEOUS INFORMATION

## CHARITABLE CONTRIBUTIONS LIST

# TAX RETURN BINDER

## MISCELLANEOUS INFORMATION

## OTHER ITEMS

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## MISCELLANEOUS INFORMATION

## NOTES