2024 Tax Organizer Personal Information

Personal Information									
		Name		SSN		Has IP PIN	Dat	e of Birth	
Taxpayer									
Spouse									
Name of person to whom all information should be addressed, if not the taxpayer									
Street address, city, state, and ZIP									
Occupation				Daytime Phone	Evening	Cell Phone			
Taxpayer									
Spouse									
Taxpayer email									
Spouse email									
Single Married Widowed - If widowed and your spouse died after December 31, 2022, enter the date of death Married filing separately - If married but filing separately, did you live apart from your spouse for the last six months of 2024? Yes No Are you or your spouse blind? Are you or your spouse disabled? Are you or your spouse a full-time student? Do you or your spouse want to designate \$3 to go to the Presidential Election Campaign Fund? At any time during 2024 did you: (a) receive (as a reward, award, or payment for property or services) a digital asset? (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? Identification Information Taxpayer's type of photo ID Driver's license State-issued photo ID Photo ID number Photo ID number State photo ID was issued Date photo ID was issued Date photo ID expires Date photo ID expires									
Accoun	it Information	for Deposits and Withdra	awals						
Name of Bank			Bank Routing Number	Bank Type of Account Use this Account Number Checking Savings Deposits					ccount for Withdrawals
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Appoint	tment Inform	ation							
Appointment Information Your 2024 appointment is scheduled for									
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