

2020 Individual Taxpayer Organizer

Sirrom Tax Specialist & Consultant

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Basic Expat Fee: \$300 
Basic US Return (no foreign income): \$100 

***These fees include Federal and single State tax return preparation, e-filing, federal extensions (state upon request) and limited year-round planning and support.

Additional fees
(Please visit website for more payment options)

Schedule C, E, or F (per form): Varies
Additional State or Local Tax Returns: \$40
Second Overseas Presence Test (Form 2555): \$75
Separate Tax Return Filings (taxpayer/spouse): \$100
Fee to Mail Returns: \$50
IRS/State Issues: \$50 per hour
Amendments (previous years): \$300 each year

Name of Taxpayer				SS#			
<i>First</i>	<i>M.I.</i>	<i>Last</i>	Email				
Occupation		Date of birth					
Address		City		State	Zip		
County		Home phone		Work or cell			
Name of Spouse				SS#			
<i>First</i>	<i>M.I.</i>	<i>Last</i>	Email				
Occupation		Date of birth		Are you new to our firm? Yes No			
<i>(Enter information below only if different from Taxpayer)</i>							
Address		City		State	Zip		
County		Home phone		Work or cell			
If you moved during 2020, enter your previous address.				Date of move			
Filing status: Single Married Filing Jointly Married Filing Separately Widow(er) Head of Household Unsure Were you divorced or separated during the year? Yes No Were there any deaths in the family? Yes No Have you received any notice from the IRS or state revenue department within the past year? Yes No Same-sex married couples are required to file as Married Filing Jointly or Married Filing Separately for federal returns, regardless of where the married couple lives. Same-sex married couples may also want to file amended returns for prior tax years.							
Names of dependent children		Social Security #		Date of birth	Months lived in home in 2020	Relationship to taxpayer	College student?
<i>Child's full name</i>							
Did any of the children have income above \$1,100 for the year? Yes No Do any of the children have a disability? Yes No Is it anticipated that a different taxpayer will seek to claim a child listed above as their dependent for tax year 2020? Yes No							
Other dependents or people who lived with you							
Name		Social Security #		Date of birth	Relationship	Income	
If you are due a refund, would you like it directly deposited into your bank account? <i>Name of bank</i>							
Checking Savings		Routing transit number			Account number		
Ask your tax preparer for information about depositing a refund into an IRA account or splitting the deposit into more than one account.							

Questions — All Taxpayers

"You" refers to both taxpayer and spouse—enter "?" if unsure about a question.

Yes	No	Did your marital status change during the year?
Yes	No	Where there any changes to dependents?
Yes	No	Did your resident state change during the year?
Yes	No	Did you, your spouse, and your dependents have health insurance for the entire year of 2020? (send 1095-A, B, and/or C)
Yes	No	Did you have any investment income, such as interest, dividends, stock sales, royalties, etc? (provide year-end statements)
Yes	No	Did you have any higher education expenses or pay any student loan interest?
Yes	No	Did you have any debt cancelled or was your home foreclosed?
Yes	No	Did you purchase, refinance or sell your principal home, second home, or rental property? (send closing docs)
Yes	No	Did you own any foreign assets, such as bank accounts, retirement accounts, investments, etc?
Yes	No	Did you make any contributions to a retirement account other than one sponsored by your employer?
Yes	No	Did you have any dependent care expenses?
Yes	No	Did you have any other income, such as income from retirement distributions, self-employment, rental properties, unemployment compensation, alimony, gambling winnings, jury duty pay, or state tax refunds? (provide year-end statements)
Yes	No	Did you have itemizable deductible expenses, such as mortgage interest, property taxes, medical expenses, car tags, or charitable contributions?

**IF YOU ANSWERED "YES" TO ANY OF THE
QUESTIONS ABOVE, IT IS IN YOUR BEST
INTEREST TO COMPLETE A FULL CLIENT TAX
ORGANIZER. YOU CAN DOWNLOAD THE
ORGANIZER AT
<http://www.sirromtax.com/forms2.html>**

Foreign Earned Income Exclusions (Form 2555)

PHYSICAL PRESENCE TEST

BONA FIDE RESIDENT

OVERSEAS INFORMATION FOR TAXPAYER

T/S	Employer name	T/S	Employer name
	1)		4)
	2)		5)
	3)		6)

Provide employer information for each number above, respectively in the columns below.

	Address or APO Address	City	Country	Zip
1)				
2)				
3)				
4)				
5)				
6)				

Travel Information – Trips to USA or US Possession or Territory (**send flight itineraries & LOA**)

Please enter all travel for 2019 as well as travel for 2020 known to date and estimated. Use MM/DD/YY format for all dates entered.

First Full Day Overseas (Taxpayer):

First Full Day Overseas (Spouse):

T/S	Date Left Foreign Country	Date Arrived USA	Date Left USA	Date Arrived Foreign Country
	1)			
	2)			
	3)			
	4)			
	5)			
	6)			

List Any Unreimbursed Employee Expenses Related to Foreign Employment

These are the items required by your employer to do your job.

Current Calendar Year Only

Description

Foreign Housing Expense	\$	Safety gear & supplies	\$
Foreign Taxes Paid During 2019	\$	Phone	\$
Storage fees during US absence	\$	Internet	\$
Computer, hardware, software, accessories	\$	Other (list):	\$
Office supplies	\$	Other (list):	\$