2022 Individual Taxpayer Organizer

Taxpayer							Tax ID #*			
First Name M.I.			Last Name Email				IP PIN			
Occupation			Date of birth				Are you new to our firm? Yes No			
Address			City					Zip		
County			Primary phone				Secondary phone			
Driver's License No.	State Issue Da				Date	te Exp. Date				
Spouse						Tax ID # *				
First Name M.I.		Last Name Email			'	IP PIN				
Occupation			Date of birth				Are you new to our firm? Yes No			
Address (If different from Taxpayer)			City				te Zip			
County	Primary phone				Secondary 1	Secondary phone				
Driver's License No.			Date	te Exp. Date						
If you moved during 2022, enter your previous address.						Date of mov	Date of move			
Were you divorced or separated during Individuals who are in registered don Have you received any notice from the	nestic partnership	os (RD	Ps) and civil un	ions a	are not consi	deaths in the far dered married fo Yes No	-	Yes No l tax purp		
Names of dependent children Child's full name	ames of dependent children				Date of birt	Months lived h home in 202		itionship t axpayer	o College student?	
Did any of the children have unearned income above \$1,150 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 2022? Yes No										
Other dependents or people who live	ed with you					Months lived in				
Name	Tax ID # *		IP PIN		ate of birth	home in 2022	Relatio	onship	Income	
Bank information: Use for Direct deposit of refund Direct debit of balance due N					1					
Checking Savings Routing transit number						Account number				
Ask your tax preparer for information *A Tax ID # is either a Social Security Numb										