

503-688-4573

Tax Services Organizer 2024 (For 2023 taxes)

Hello! This organizer will help you to gather the documents that we need to prepare your tax return. Please complete it as best you can and let us know if you have any questions along the way- that's what we're here for! OBTP #B907459

TAXPAYER	SPOUSE	
Pronouns	Pronouns	
Name	Name	
Email	Email	
Phone	Phone	
Occupation	Occupation	
Are you considered blind?	Are you considered blind?	
Are you considered totally and permanently disabled?	Are you considered totally and permanently disabled?	
Can someone else claim you as a dependent?	Can someone else claim you as a dependent?	
Would you like to designate \$3 to the Presidential Campaign Fund?	Would you like to designate \$3 to the Presidential Campaign Fund?	
Address		
City	State	Zip



DEPENDENTS			
Name:	Name:	Name:	
DOB:	DOB:	DOB:	
Relationship:	Relationship:	Relationship:	
Months in Home:	Months in Home:	Months in Home:	
Daycare Expense:	Daycare Expense:	Daycare Expense:	
Daycare Name:	Daycare Name:	Daycare Name:	
Eligible for an IEP:	Eligible for an IEP:	Eligible for an IEP:	
College Expenses:	College Expenses:	College Expenses:	



ESTIMATED TAX PAYMENTS: DATE, PAYEE, AMOUNT

DATE	FEDERAL	STATE	OTHER

Health Care

Did you or any family members purchase health care through the Marketplace? If so, please upload Form 1095-A to <u>the</u> <u>portal</u> .	
Did you make any contributions to an H.S.A outside of your employment? If so, how much?	
Did you take a distribution from your H.S.A? If so, please upload form 1099-SA to <u>the portal</u> .	



Foreign and Virtual Assets

Did you or your spouse buy, sell or trade any virtual currency at any time in 2023?	
Did you or your spouse have over \$10,000 in foreign assets at any time in 2023?	

Income

Please enter the number of forms you will be uploading to the portal. Do not enter dollar amounts. For example, enter "3" in the W2 text box if you will be uploading 3 W2 forms

W2	Self-Employment (1099-NEC) and fill out self- employment section
Interest Income 1099-INT	Unemployment 1099-G
Dividend Income 1099-DIV	State Tax Refund 1099-G
Stock Sales 1099-B	Income from a Partnership, S-Corp, Estate or Trust K-1
Social Security 1099-SA	Alimony Received
Debt Cancellation 1099-C or 1099A	Rental Income and fill out rental section
Retirement Income 1099-R	Other-Please describe



Deductions and Credits

Please enter amounts and provide forms

Student Loan interest paid Form 1098-E	\$ College Tuition paid for you or your dependents Form 1098-T	\$
IRA Contributions Form 5498	\$ Mortgage Interest Form 1098	\$
Health Insurance Premiums (if out of pocket)	\$ Property tax	\$
Out-of-pocket medical expenses (except Premiums)	\$ Charitable donations by cash, check, or credit card	\$
Alimony Paid	\$ Non-cash charitable donations such as Goodwill	\$
Political Contributions	\$ Other	\$



SELF-EMPLOYMENT INFORMATION SHEET

Name:
SSN/EIN:
Business Name:
Business Address:
Business Start Date:

INCOME	
Form(s) 1099-NEC or 1099-MISC	\$
Form(s) 1099-K (Merchant Sales) such as PayPal or Square	\$
Income From Cash or Check	\$
Other income not included above	\$



OPERATING EXPENSES

Advertising (business cards, website, print ads, gifts):	\$ Commissions and Fees (PayPal fees, bank fees):	\$
Contract Labor (paying someone to help you):	\$ Insurance (Non-health- liability, worker's comp, bonds):	\$
Dues and Subscriptions:	\$ Business Interest (business credit card, business loan):	\$
Legal and Professional Services (tax prep, lawyer fees):	\$ Office Supplies (paper, pens, printing, etc.):	\$
Rent or Lease (equipment, machinery, vehicles):	\$ Rent (office outside the home):	\$
Repairs and Maintenance (computer, plumbing):	\$ Supplies (items that have less than 1 year life):	\$
Taxes and Licenses (real estate, employer- paid payroll taxes, permits, etc.):	\$ Wages (paid to employees, gross wages less payroll taxes)	\$
Business Meals:	\$ Utilities outside the home (gas, electric, trash):	\$
Cell Phone:	\$ Research and Development:	\$
Software and IT:	\$ Education and Training:	\$
Other-Please describe:	\$ Other-Please describe:	\$



COST OF GOODS SOLD		
Inventory on January 1 ^{st:}		
Total Purchase:		
Other Costs Directly Related to Inventory:		
Inventory on December 31 st :		

TRAVEL EXPENSES						
Dates	Location	Meals	Airfare	Lodging	Bus/Cab	Other Expenses
		\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$



EQUIPMENT (Items over \$300 that will last more than a year)			
Item	Date of Purchase	Cost	Business Use %
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

BUSINESS USE OF HOME		
Date Home Office Was Placed in Service:		
Total Square Footage of Home: Total Square Footage Used Solely For Business:		
Expenses	Total Amount For Household	
Insurance:	\$	
Rent:	\$	
Repairs and Maintenance:	\$	
Utilities (Gas, Electric, Water, Trash):	\$	
Other Expenses:	\$	



AUTO EXPENSE INFORMATION				
Type of Vehicle:				
Date Placed in Service:				
Do you have another vehicle available for pers	Do you have another vehicle available for personal use?			
Was your vehicle available for use during off-duty hours?				
Do you have evidence to support your deduction? If yes, is it written?				
Commuting Miles:	Business Miles:	Other Miles:		
Parking:	Tolls:	Interest:		
Garage Rent:	Gas:	Insurance:		
Oil:	Lease Payments:	Property or Excise Tax:		
Tires:	Repairs:	Other:		



RENTAL INFORMATION SHEET

Property Description:		
Property Address:		
Do you live in this house? If yes, what percentage of the house did you rent?		
Total Rental Income from this property:	\$	

EXPENSES			
Advertising:	\$	Management Fees:	\$
Auto (miles):	\$	Mortgage Interest:	\$
Travel:	\$	Other Interest:	\$
Cleaning and Maintenance:	\$	Repairs:	\$
Commissions:	\$	Supplies:	\$
Insurance:	\$	Taxes:	\$
Legal and Professional Fees:	\$	Utilities:	\$
Management Fees:	\$	Other:	\$



MAJOR HOME IMPROVEMENTS- APPLIANCES, FURNISHING, IMPROVEMENTS, ETC			
Date	Description	Cost	
		\$	
		\$	
		\$	
		\$	

IS THERE ANYTHING ELSE YOU WOULD LIKE TO CHECK IN ABOUT THIS YEAR?

