

# Organizer

TAXPAYER (& Spouse, if MFJ): \_\_\_\_\_

## #2 - Intake Questions

TAX YEAR: \_\_\_\_\_

*\* If MARRIED FILING JOINT - both the taxpayer and the spouse combine their answers on this single worksheet*

Rev. 01/01/2025 v001

YES	NO	DUE DILIGENCE & RECONCILIATION (per IRS & state regulations)	If YES, take ACTION
<input type="checkbox"/>	<input type="checkbox"/>	Did you & everyone listed on your tax return have healthcare coverage for all 12-months of the year?	
<input type="checkbox"/>	<input type="checkbox"/>	Did you have any income from outside the USA &/or pay taxes to a foreign country?	
<input type="checkbox"/>	<input type="checkbox"/>	Did you have any type of financial account(s) in a foreign country(s)?	
<input type="checkbox"/>	<input type="checkbox"/>	Did you make any purchases (including via internet) for which you did not pay sales tax?	
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive, buy, sell, exchange, gift, any form or type of digital assets during the year (examples: crypto currency, Bitcoin, FTX, Ethereum, any NFTs, - <b>ANYTHING in digital format</b> , etc.)	
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been notified by any taxing authority that you have been denied or ineligible to claim any type or kind of credit including but not limited to the Child Tax Credit (CTC) or the Earned Income Tax Credit (EITC)?	
YES	NO	INFORMATION	If YES, take ACTION
<input type="checkbox"/>	<input type="checkbox"/>	Have you received a 6-digit Identity PIN - ISSUED BY THE IRS TO YOU - to be used when filing a tax return?	Provide that information
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any notices from the IRS or other taxing entities (state, county, city) last year that you want to discuss with us?	
<input type="checkbox"/>	<input type="checkbox"/>	Did you make any <b>ESTIMATED</b> (quarterly) payments to the IRS or any other taxing authority?	<b>ORGANIZER: Estimated Taxes Paid</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you make any payments to any taxing authority for taxes due on prior year STATE matters?	
<input type="checkbox"/>	<input type="checkbox"/>	Did your Marital status change at any time during the year?	
<input type="checkbox"/>	<input type="checkbox"/>	Can you be claimed as a dependent by someone else?	<b>ORGANIZER: Dependent</b>
<input type="checkbox"/>	<input type="checkbox"/>	Do you have dependents to claim on your tax return?	<b>ORGANIZER: Dependent Care</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you incur expenses for Child Care &/or Dependent care during the year?	EIN #: _____
<input type="checkbox"/>	<input type="checkbox"/>	Do you or have you ever had an EIN (Employer Identification Number)?	
<input type="checkbox"/>	<input type="checkbox"/>	Do you have / are (or were) you part of an LLC, Corporation, S-corp, Partnership, or Trust?	
YES	NO	RESIDENCE	If YES, take ACTION
<input type="checkbox"/>	<input type="checkbox"/>	Is the address you are going to list on your tax return a <b>California</b> address?	See California section on page 3
<input type="checkbox"/>	<input type="checkbox"/>	Is the address you are going to list on your tax return a <b>New York</b> address?	See New York section on page 3
<input type="checkbox"/>	<input type="checkbox"/>	Are you filing a <b>Pennsylvania</b> state tax return?	See Pennsylvania section on page 3
<input type="checkbox"/>	<input type="checkbox"/>	Did you MOVE more than 50 miles last year?	<b>ORGANIZER: Moving</b>
YES	NO	INCOME	If YES, take ACTION
<input type="checkbox"/>	<input type="checkbox"/>	Are you missing any W2s? NOTE: Provide ALL copies of ALL pages of ALL W-2s; Do NOT separate W-2s	
<input type="checkbox"/>	<input type="checkbox"/>	Do you have any tip income to declare that you did not report to your employer?	Provide copies 1099-MISC
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any 1099-MISCs?	Provide copies 1099-NEC
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any 1099-NECs?	<b>ORGANIZER: Self Employed</b>
<input type="checkbox"/>	<input type="checkbox"/>	Do you have any cash income to declare for which you did NOT receive a 1099?	<b>ORGANIZER: Self Employed</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any 1099-Ks? (issued by payment processors i.e., Paypal, Venmo, etc.)	Provide copies 1099-C
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any 1099-Cs (cancelation of debt)?	
<input type="checkbox"/>	<input type="checkbox"/>	Did you have any bank accounts that earn interest (savings, checking, etc.)?	Provide copies 1099-INT
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any 1099-INT? (May not have received if less than \$10; check with your bank)	Provide copies 1099-DIV
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any 1099-DIV?	Provide copies 1099-B
<input type="checkbox"/>	<input type="checkbox"/>	Did you sell any stocks, bonds, or mutual funds, etc.?	Provide copies of K-1 & Basis Worksheet
<input type="checkbox"/>	<input type="checkbox"/>	Did you / should you be receiving any K-1s (Partnerships, Trusts, Beneficiary, Estates, etc.)?	Provide copies 1099-G
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any Unemployment?	Provide copies 1099-SSA
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any money from Social Security?	Provide copies 1099-R
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any money from a pension, retirement account, and or an IRA?	<b>ORGANIZER: Rental</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you own rental property?	<b>ORGANIZER: Rental - Gig Economy</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you use your home for shared rental accommodations (i.e., Airbnb, VRBO, etc.)?	
<input type="checkbox"/>	<input type="checkbox"/>	Did you use your vehicle for ride-share or delivery(Uber, Lyft, Door Dash, TaskRabbit, etc.)?	
<input type="checkbox"/>	<input type="checkbox"/>	Did you pay or receive any alimony?	
<input type="checkbox"/>	<input type="checkbox"/>	Did you receive any other type of income including but not limited to prize winnings, gambling, jury duty, Combat Pay, award money or barter goods or services?	Provide any documentation received

**CONTINUED ON NEXT PAGE**

Taxpayer: \_\_\_\_\_

Tax Year: \_\_\_\_\_

<b>YES</b>	<b>NO</b>	<b>HEALTHCARE</b>	<b>If YES, take ACTION</b>
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The TCJA has removed the *penalty* for not having "minimum essential" healthcare coverage **on your federal return** . However, it is STILL REQUIRED that you (and everyone listed on your tax return) have "minimum essential" healthcare coverage.  
 Though you may not be penalized on your federal tax return, you may be subject to a penalty on your state return for failing to have essential coverage in those states which have enacted and now require minimum essential healthcare coverage.

<input type="checkbox"/>	<input type="checkbox"/>	Did you receive <b>ANY</b> coverage through the Marketplace (healthcare.gov or state exchange)? Did you receive Form 1095-A, B, or C?	Provide copy of 1095-A Provide copies of all 1095s
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<b>YES</b>	<b>NO</b>	<b>MEDICAL</b>	<b>If YES, take ACTION</b>
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<input type="checkbox"/>	<input type="checkbox"/>	Did you have medical expenses for yourself, spouse, dependents?	ORGANIZER: <b>Medical</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you have MSA, HSA, FSA, or HRA account for medical expenses?	ORGANIZER: <b>Medical</b>

<b>YES</b>	<b>NO</b>	<b>OTHER</b>	<b>If YES, take ACTION</b>
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<input type="checkbox"/>	<input type="checkbox"/>	Did you, spouse, dependent(s) incur education costs at an eligible education institution?	ORGANIZER: <b>Education Credit</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you pay any student loans during the?	Provide copies of all 1098-Es
<input type="checkbox"/>	<input type="checkbox"/>	Did you have any student loan debt canceled by the feds or any state?	
<input type="checkbox"/>	<input type="checkbox"/>	DID you put any money into a Traditional, ROTH, or SEP IRA - <b>NOT THROUGH YOUR EMPLOYER</b> ?	
<input type="checkbox"/>	<input type="checkbox"/>	WILL you put any money into a Traditional or ROTH IRA before the tax filing deadline (usually April 15)?	
<input type="checkbox"/>	<input type="checkbox"/>	Did you own a house and / or property (land) at any time during the year?	Provide copy of all 1098s
<input type="checkbox"/>	<input type="checkbox"/>	Did you pay property taxes? <span style="float:right;">If so, list amount paid: <b>Amount \$</b> _____</span>	
<input type="checkbox"/>	<input type="checkbox"/>	Did you purchase anything that invoked a lot of sales tax (i.e., car, boat, plane, etc.?)	
<input type="checkbox"/>	<input type="checkbox"/>	Did you pay vehicle registration fees? <span style="float:right;">If so, list amount paid: <b>Amount \$</b> _____</span>	
<input type="checkbox"/>	<input type="checkbox"/>	Did you make any charitable contributions in cash or check?	ORGANIZER: <b>Charity - Part A</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you donate goods / items to charity? (Goodwill, Salvation Army, etc.?)	ORGANIZER: <b>Charity - Part A</b>

<b>YES</b>	<b>NO</b>	<b>BUSINESS / PROFESSION / OCCUPATION / JOB</b>	<b>If YES, take ACTION</b>
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<input type="checkbox"/>	<input type="checkbox"/>	Did you incur any expenses for your business / profession / occupation / job?	ORGANIZER: <b>Self Employed</b>
<input type="checkbox"/>	<input type="checkbox"/>	Are you claiming any business miles for vehicle use?	ORGANIZER: <b>Vehicle Expense</b>
<input type="checkbox"/>	<input type="checkbox"/>	Are you claiming Home Office for business expense?	ORGANIZER: <b>Home Office</b>
<input type="checkbox"/>	<input type="checkbox"/>	Did you travel OUT OF TOWN for work (or to look for work)?	ORGANIZER: <b>Out of Town For Business</b>

<b>YES</b>	<b>NO</b>	<b>ADMIN</b>	<b>If YES, take ACTION</b>
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<input type="checkbox"/>	<input type="checkbox"/>	Are you a new client to us?	If so, provide copy of last year's tax return
<input type="checkbox"/>	<input type="checkbox"/>	Are you providing us with a signed <b>Organizer #3 - Letter or Engagement (LOE)</b> ?	Include LOE with your material
<input type="checkbox"/>	<input type="checkbox"/>	Are you providing us with a copy of your <b>Social Security card</b> ? (Required only 1st year)	If this is your 1st year with us, provide copy
<input type="checkbox"/>	<input type="checkbox"/>	Are you providing us with a copy of your <b>STATE ISSUED DL/ID</b> (Required <u>every</u> year)	Provide copy of your state issued DL/ID

**When providing documents - always provide legible copies of the entire front & back of all pages of all documents; do not separate documents or W-2s. ALL ITEMS MUST BE IN PDF FORMAT ONLY!**

**CONTINUED ON NEXT PAGE**

# STATES

Taxpayer: \_\_\_\_\_

Tax Year: \_\_\_\_\_

Please check states below for additional information and instructions.

**Disregard any state where you do not have to file.**

CALIFORNIA		If you are filing a California return, the following items need be addressed		Additional Information
YES	NO	Do you want to make a charitable contribution as part of your CA return ( <i>this will reduce your refund or increase what you owe, on your CA return</i> )		ORGANIZER: CA Voluntary Contribution
YES	NO	Do you have an LA <b>CITY</b> address on your CA tax return?		Check for LA City License requirement

NEW YORK		If you are filing a New York RESIDENT return, the following items need be addressed		Additional Information
↳		On your New York RESIDENT return, you are <b>required</b> to provide your <b>County</b> and your <b>School District</b> information.		Please provide that information on your worksheet <b>Organizer #1 - Primary</b>
↳		If you file as a NY RESIDENT (and/or you have a NY address on your return), you are required to receive NY Publication 135 <i>Consumer Bill of Rights Regarding Tax Preparers</i>		<a href="http://www.tax.ny.gov/pdf/publications/income/pub135.pdf">www.tax.ny.gov/pdf/publications/income/pub135.pdf</a>
YES	NO	Have you ever been convicted for Bribery?		

PENNSYLVANIA		If you are filing a Pennsylvania return, the following items need be addressed		Additional Information
↳		If you are claiming OUT OF TOWN business expenses, you cannot use M&IE for your out-of-town days on the Pennsylvania return. You MUST use actual expenses. You MUST have ALL receipts for your OUT OF TOWN expenses. ( <i>You can use M&amp;IE for your federal return; just not on your PA return.</i> )		