

Certified Public Accountant
tom@avmaraccounting.com
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Phone: 954.764.0404
 Fax: 954.764.2327
www.avmaraccounting.com

INDIVIDUAL TAX ORGANIZER

	Name	Birthdate	SS#
Taxpayer			
Spouse			
Dependent #1			
Dependent #2			
Dependent #3			
Dependent #4			

Address
Please indicate your state residency

Contact Information	Cell Phone	
	Email Address	

DIRECT DEPOSIT INFORMATION FOR TAX REFUND

Bank Name		Routing #	
Account Type		Account #	

Are you a signor or beneficiary of a foreign bank account?
Did you reside outside the United States and US Territory for more than 330 out of 365 days?
Do you do business as an S Corporation or LLC?
Are you a partner or shareholder in a foreign entity?
Were you employed on a foreign flagged vessel?
Please provide copy of your most recent income tax return.

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INCOME INFORMATION - PLEASE PROVIDE THE FOLLOWING DOCUMENTATION

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<u>Form</u>	<u>Income Description</u>
W-2	Wages
1099 INT	Interest Income
1099 DIV	Dividend Income
1099G	Unemployment Benefits & State Tax Refunds
1099B	Capital Gains/Losses (Provide Schedule of Gains/Losses)
1099R	Retirement and Annuity Income Including Roth Rollovers
K-1	Partnership, S-Corp, & Trust/Estate Income
1099C/1099A	Cancellation of Debt Income
SSA-1099	Social Security Benefits
W-2G	Gambling Income
1099-MISC	Prizes
No Form	Alimony
See Supplemental Schedule	Unincorporated Businesses (Schedule C)
See Supplemental Schedule	Rental Properties (Schedule E)

DEDUCTION INFORMATION - PLEASE PROVIDE DOCUMENTATION ON THE FOLLOWING

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Moving Expenses	If you relocated for Work & were not reimbursed in full.
Retirement Plan Contributions	SEP, SIMPLE, IRA, & ROTH
Alimony Paid	Provide Name and Social Security # of recipient
Education Expenses	Student Loan Interest, Tuition (Form 1098T), & Books
Medical Expenses	Please List
Real Estate Tax	Residence, Second Home, Vacant Land etc
Personal Property Tax	Vehicles
Sales Tax	New Vehicles & Permanent Home Improvements
Mortgage Interest	First Mortgage, Second Mortgage & Home Equity Loan
Charitable Contributions	Cash/Check/Credit Card/Goods (See Donation value Guide if value is more than \$499)
Job Hunting Expenses	Mileage, Resume Services, Head Hunter Fees, Travel etc
Unreimbursed Business Expenses	Auto Expenses (Provide Total Mileage and Business Mileage), Meals/Entertainment, Office Expenses & Supplies etc Union Dues, Uniforms, Telephone, Travel
Tax Preparation	
Safety Deposit Box	
Investment Expenses	Investment Interest, Advisory Fees, Newsletters, Paid Websites

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SUPPLEMENTAL SCHEDULE RENTAL REAL ESTATE (FORM SCHEDULE E)

Rent Received	_____		
Advertising	_____	Auto/Travel	_____
Cleaning/Maintenance	_____	Commissions	_____
Professional/Management Fees	_____	Insurance	_____
Mortgage Interest	_____	Repairs	_____
Appliance Purchases	_____	Improvements	_____
Real Estate Tax	_____	Supplies	_____
HOA/Condo Fees	_____	Utilities	_____
Purchase Price	_____		
Purchase Date	_____		

DISCLOSURE

I (We) verify that the information provided on this tax ornaizer is accurate and complete. I (We) understand it is my (our) responsibility to include any and all information related to my income, deductions and any other information necessary for the preparation of my (our) personal income tax return. In the event of an audit it is the taxpayers responsibility to provide supporting documentiaton for all income and expenses.

Taxpayer Signature _____

Date _____

Printed Name _____

Spouse Signature _____

Date _____

Printed Name _____