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TAX ORGANIZER SHORT FORM

NAME _____ PHONE NUMBER _____
SOCIAL SECURITY NUMBER _____ EMAIL ADDRESS _____
ADDRESS _____
DATE OF BIRTH _____
STATE OF RESIDENCY _____

INCOME

FOREIGN FLAGGED VESSELS _____
AMERICAN FLAGGED VESSELS _____

PLEASE PROVIDE ANY THIRD PARTY DOCUMENTATION YOU MAY HAVE RECEIVED
THESE DOCUMENTS MAY INCLUDE BUT ARE NOT LIMITED TO THE FOLLOWING:

W-2'S wage statement (typically received when working on American flagged vessels)
1099-MISC income statement (typically received when working on American flagged vessels as an independent contractor or freelance crewmember)
1099-INT issued by your financial institution to report interest income earned
1099-DIV issued by your financial institution to report dividend income earned
1099-B issued by your financial institution to report stock sales (for every stock sale we will need the purchase date and purchase price)

IF ANY OF THE FOLLOWING APPLIES TO YOU PLEASE COMPLETE OUR LONG FORM TAX ORGANIZER

you own a home
you have dependents
you have unreimbursed business related expenses
you own rental property

THE LONG FORM TAX ORGANIZER MAY BE FOUND ON OUR WEBSITE AT :

avmaraccounting.com (under the tax organizer tab)

IF YOU ARE A SIGNOR OR BENEFICIARY OF A FOREIGN BANK ACCOUNT YOU WILL NEED TO COMPLETE THE "FOREIGN BANK ACCOUNTS"

avmaraccounting.com (under the tax organizer tab)

IF YOU QUALIFY FOR THE FOREIGN INCOME EXCLUSION WE WILL NEED YOU TO COMPLETE THE "TAX CALENDAR"

avmaraccounting.com (under the tax organizer tab)

DISCLOSURE

I (We) verify that the information provided on this tax organizer 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 documentation for all income and expenses.

Taxpayer Signature _____ Date _____
Printed Name _____
Spouse Signature _____ Date _____
Printed Name _____