

Tax Organizer



Sus Amigos Income Tax
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Tax Return Appointment

Date: _____

Time: _____

Print this form out, take some time to fill out, and bring it with you when you come to the office.
This will save you time and money, and help us help you more effectively.

****If we have not previously prepared your return, please provide a copy of your previous tax return****

Part 1: General Information

Did your martial status change since last year?

Yes	No

How are you filing?

- Single
- Married Filing Jointly
- Head of Household (HOH)
- Qualifying widow Year spouse died: _____

Taxpayer Name: _____

SSN: _____ - _____ DOB: _____ / _____ / _____

CADL: _____ Exp. Date: _____

Spouse's Name: _____

SSN: _____ - _____ DOB: _____ / _____ / _____

CADL: _____ Exp. Date: _____

Address: _____

Home Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Email: _____

Part 2: Current Employment

Company Name: _____

Address: _____

Work Phone: (____) _____ - _____ Ext. _____

If you or your spouse is self employed print the worksheet Self Employed worksheet on the Tax Center,
in order to itemize your deductions.

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Part 3: Dependents

Are there any changes in your dependents from last year?

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 If so, please state the changes.

Name	Relationship	SSN	DOB
1 _____	_____	- - -	/ /
2 _____	_____	- - -	/ /
3 _____	_____	- - -	/ /
4 _____	_____	- - -	/ /
5 _____	_____	- - -	/ /

Are you being claimed (or are eligible to be claimed) as a dependent on anyone else's return?

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 Did you incur expenses in connection with adoption?

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Part 4: Credits

Child and Dependent Care (Note: Child must be under 13 years of age)

Name of Provider: _____
 Address: _____
 Amount Paid: _____
 SSN/EIN: _____

Part 5: Questions

If any of the following items apply to you or your spouse, please "X" the appropriate box:

Do you have. . . ?		Yes	No
Wages - Attach W-2	If possible include details	<input type="checkbox"/>	<input type="checkbox"/>
Interest Income - Attach 1099 INT		<input type="checkbox"/>	<input type="checkbox"/>
Dividend Income - Attach 1099 DIV		<input type="checkbox"/>	<input type="checkbox"/>
State/Local Tax Refund		<input type="checkbox"/>	<input type="checkbox"/>
Alimony Received or Paid? (Provide Name, SSN, and amount)		<input type="checkbox"/>	<input type="checkbox"/>
Business Income - Attach 1099 Misc		<input type="checkbox"/>	<input type="checkbox"/>
Did you exercise any stock options? If so, attach 1099-B Capital Gains and Losses (Use Outline on Page 4)		<input type="checkbox"/>	<input type="checkbox"/>
IRA distributions, Pensions, Annuities, and Rollovers		<input type="checkbox"/>	<input type="checkbox"/>
Rental Income and/or Royalties.		<input type="checkbox"/>	<input type="checkbox"/>
Did you receive, or expect to receive a Schedule K-1 from a trust, estate, partnership or S corp.?		<input type="checkbox"/>	<input type="checkbox"/>
Farm Income		<input type="checkbox"/>	<input type="checkbox"/>

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Do you have. . . ?	Yes	No
Unemployment Compensation	<input type="checkbox"/>	<input type="checkbox"/>
Social Security Benefits Received	<input type="checkbox"/>	<input type="checkbox"/>
Gambling Winnings?	<input type="checkbox"/>	<input type="checkbox"/>
Gambling Losses (if gambling income)	<input type="checkbox"/>	<input type="checkbox"/>
Tax Preparation fees	<input type="checkbox"/>	<input type="checkbox"/>
Tuition & Fees paid of higher education	<input type="checkbox"/>	<input type="checkbox"/>
Uniform and protective clothing costs and cleaning	<input type="checkbox"/>	<input type="checkbox"/>
Union Dues	<input type="checkbox"/>	<input type="checkbox"/>
Did you purchase, sell, or own any bonds you paid more or less than the face amount?	<input type="checkbox"/>	<input type="checkbox"/>
Did you sustain any non-business bad debts?	<input type="checkbox"/>	<input type="checkbox"/>
Casualty and Theft Losses? (Explain Details and provide copy of report filed.)	<input type="checkbox"/>	<input type="checkbox"/>
Did you sell your primary residence during this tax year?	<input type="checkbox"/>	<input type="checkbox"/>

If "Yes", provide a copy of the closing statements of the sale and a copy of the closing statement at the time of your purchase, details of any capital improvements you made during the time of you owned the property, and any expenses of sale incurred by you. If you have purchased a replacement property indicate cost and date acquired. If you have previously sold a residence, provide a copy of form 2119 from you tax return for the year of sale.

Part 6: How do you want your return filed?

E-file	<input type="checkbox"/>
Check sent to you by mail	<input type="checkbox"/>
Quick refund via a bank product	<input type="checkbox"/>

If you would like your tax refund (if any) deposited directly into your bank account, please provide:

Account Type:	Bank Routing Number	Account Number

Part 7: Additional Information

Please elaborate on any of your tax data, or include facts and circumstances we should be aware of of in order to properly prepare your tax return. Also include any questions you may have.

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If you sold any stocks, bonds, or other investment property in 2008, please list the information for each sale.

Be sure to attach all 1099-B forms and brokerage statements.

Description of Property (Box 5)	Date Acquired	Date Sold (Box 1a)	Sales Price (Box 2)	Cost or Basis	Expenses of Sale	Federal Income Tax Withheld