

**2004
 TAX ORGANIZER**

Taxpayer Information				Spouse Information			
Last name		Suffix		Last name		Suffix	
First name				First name			
Middle Initial		Suffix		Middle Initial		Suffix	
Social security number				Social security number			
Date of birth				Date of birth			
Occupation				Occupation			
Work phone		Ext		Work phone		Ext	
Cell phone				Cell phone			
E-mail address				E-mail address			
Address						Apartment number	
City				State		ZIP Code	
Home phone		Fax number		Home phone		Fax number	

Dependent Information						
First name Last name	MI Suffix	Social Security Number Relationship	Date of Birth	Months Lived with Taxpayer	Child Care Expense	

Child and Dependent Care Provider Expenses			
Name	Address	ID Number	Amount Paid

Education Tuition and Fees					
Student First Name	MI	Suffix	Student Last Name	Social Security Number	Qualified Expenses

For each student: 1) First/second year of post-secondary education? 2) At least 1/2 time? 3) Earning degree or other credential? 4) No drug offense? Attach details of the qualified education expenses.

Student Loan Interest Paid
 Enter total 2004 qualified student loan interest

Attach Form(s) W-2 – Wages, Salaries, Tips and Other Compensation	
Employer Name	Last Year Amount

Attach Form(s) 1099-R – Distributions from Pensions, Annuities, Retirement, Profit-Sharing, IRAs, etc	
1099-R Payer Name	Last Year Amount

Attach Form(s) SSA-1099 – Social Security/Railroad Benefits		Taxpayer	Spouse
Social Security Benefits from Form SSA-1099			
Railroad Retirement Benefits from Form RRB-1099			
Medicare B premiums withheld			

Attach Form(s) 1099-MISC – Miscellaneous Income	
1099-MISC Payer Name	

Attach Form(s) 1099-INT – Interest Income	
1099-INT Payer Name	Last Year Amount

Attach Form(s) 1099-DIV – Dividend Income	
1099-DIV Payer Name	Last Year Amount

Attach Form(s) 1099-B, 1099-S – Sales of Stocks, Bonds, Real Estate, etc
 Attach all stock sale transaction information, including initial cost information.

Other Government Forms to attach:
 Form(s) 1099-G – Certain Government Payments, Schedule K-1s – Partnership, S-Corporation, Trust or Estate Income, Form(s) W-2G – Gambling or Lottery Winnings, Form(s) 1099-Q – Payments from Qualified Education Programs

Other Income:
 Alimony, jury duty, unreported tips, disability income, etc. Business, rentals, farms: Attach income and expenses for any business, rental or farm you own. Include a list of all new equipment acquired this year, including date of purchase and cost.

Retirement Plan Contributions		Taxpayer	Spouse
Traditional IRA contributions made for 2004			
Roth IRA contributions made for 2004			
SEP, Keogh, Individual 401(k) or SIMPLE Contributions			

Medical and Dental Expenses	2004 Amount	Last Year Amount
Prescription medications	_____	_____
Health insurance premiums	_____	_____
Doctors, dentists, etc	_____	_____
Hospitals, clinics, etc	_____	_____
Eyeglasses and contact lenses	_____	_____
Miles driven for medical purposes	_____	_____
Other medical and dental expenses:	_____	_____
_____	_____	_____
_____	_____	_____
Taxes	2004 Amount	Last Year Amount
Real estate taxes paid on principal residence	_____	_____
Real estate taxes paid on additional homes or land	_____	_____
Auto license registration fees based on the value of the vehicle	_____	_____
Other personal property taxes	_____	_____
Interest Expenses		
Home mortgage interest paid – Attach Form(s) 1098.		
Lender's Name	2004 Amount	Last Year Amount
_____	_____	_____
_____	_____	_____
Points paid on loan to buy, build or improve main home		
Lender's Name	2004 Amount	
_____	_____	
_____	_____	
Cash Charitable Contributions		
Charitable Organization	2004 Amount	Last Year Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Noncash Charitable Contributions		
Attach all receipts with details listing the following information: Donee, donee address, description of donation, date acquired and date contributed, your cost, value at time of donation, and how you acquired the property.		
Miscellaneous Deductions	2004 Amount	Last Year Amount
Union and professional dues	_____	_____
Professional subscriptions, books, supplies	_____	_____
Uniforms and protective clothing (including cleaning)	_____	_____
Job search costs	_____	_____
Taxpayer educator expenses	_____	_____
Spouse educator expenses	_____	_____
Tax return preparation fees	_____	_____
Safe deposit box rental	_____	_____
Gambling losses (to the extent of gambling income)	_____	_____
Other expenses (list):	_____	_____
_____	_____	_____
_____	_____	_____

	Yes	No
1 Did you purchase a motor vehicle or boat during 2004? If yes , attach documentation showing sales tax paid.	<input type="checkbox"/>	<input type="checkbox"/>
2 Did your marital status change during 2004? If yes , explain: _____	<input type="checkbox"/>	<input type="checkbox"/>
3 Were you or your spouse permanently and totally disabled in 2004?	<input type="checkbox"/>	<input type="checkbox"/>
4 Do you have dependents who must file?	<input type="checkbox"/>	<input type="checkbox"/>
5 Do you have children under age 14 with investment income greater than \$1,600?	<input type="checkbox"/>	<input type="checkbox"/>
6 Did you provide over half the support for any other person during 2004?	<input type="checkbox"/>	<input type="checkbox"/>
7 Did you incur adoption expenses during 2004?	<input type="checkbox"/>	<input type="checkbox"/>
8 Did you receive a total distribution from an IRA or other qualified plan that was partially or totally rolled over into another IRA or qualified plan within 60 days of the distribution?	<input type="checkbox"/>	<input type="checkbox"/>
9 Did you receive any disability payments in 2004?	<input type="checkbox"/>	<input type="checkbox"/>
10 Did you receive tip income not reported to your employer?	<input type="checkbox"/>	<input type="checkbox"/>
11 Did you buy, sell or refinance a principal residence or other real property in 2004? If yes , attach closing or escrow statements.	<input type="checkbox"/>	<input type="checkbox"/>
12 Did you incur any casualty or theft losses during 2004?	<input type="checkbox"/>	<input type="checkbox"/>
13 Did you incur any non-business bad debts?	<input type="checkbox"/>	<input type="checkbox"/>
14 Did you pay any individual for domestic services in 2004?	<input type="checkbox"/>	<input type="checkbox"/>
15 Did you buy or sell any stocks or bonds in 2004?	<input type="checkbox"/>	<input type="checkbox"/>
16 Did you use the proceeds from Series EE or I U.S. savings bonds purchased after 1989 to pay for higher education expenses? ..	<input type="checkbox"/>	<input type="checkbox"/>
17 Did you incur any moving expenses? If yes , attach details	<input type="checkbox"/>	<input type="checkbox"/>
18 Did you receive any income not included in this Tax Organizer?	<input type="checkbox"/>	<input type="checkbox"/>
If yes , please attach information.		
19 Do you expect your income and deductions in 2005 to be the same as 2004?	<input type="checkbox"/>	<input type="checkbox"/>
If no , attach explanation of changes expected.		
20 If you paid any alimony, enter recipient's SSN: _____ Alimony paid: _____	<input type="checkbox"/>	<input type="checkbox"/>
	Taxpayer	Spouse
21 Enter your state of residence	_____	

Electronic Filing and Direct Deposit of Refund

	Yes	No
If your tax return is eligible for Electronic Filing, would you like to file electronically?	<input type="checkbox"/>	<input type="checkbox"/>
The Internal Revenue Service is able to deposit many refunds directly into taxpayers' accounts. If you receive a refund, would you like direct deposit?	<input type="checkbox"/>	<input type="checkbox"/>
If yes , please provide a voided check (not a deposit slip). What type of account is this?	Checking <input type="checkbox"/>	Savings <input type="checkbox"/>

Estimated Tax Paid

Federal		State			Local		
Date	Amount	Date	Amount	ID	Date	Amount	ID

Additional Information (Enter any additional information here and attach any documents.)
