

TAX ORGANIZER FOR 2021 TAX YEAR

Taxpayer & Spouse _____ Social Security # _____ Occupation _____ Birth Date _____

Street Address _____

City State – Zip _____

Daytime Telephone _____ Evening Telephone _____

Taxpayer & Spouse

Driver' License: Number _____ Issue Date _____ Expiration Date _____

Driver' License: Number _____ Issue Date _____ Expiration Date _____

Do you rent or own?

Dependents

List the following for each dependent:

Full Name	Social Security #	Relationship	Months lived in home	Date of Birth
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Name of any person living with you who is claimed as a dependent on someone else's tax return _____

Did any dependents have unearned income (interest, dividends, etc.) over \$700?

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Insurance Coverage

Did you have medical coverage during the year?

_____ Through Government Program

_____ Through Affordable Healthcare Program

If so, did you receive a 1095A form?

Important Tax Matters

Personal Information

Did your address change during 2021?

Did your marital status change during 2021?

If married, do you and your spouse want to file separate returns?

Can you or your spouse be claimed as a dependent by another taxpayer?

Dependents

Were there any changes in dependents from the prior year?

Did you pay for childcare while you worked or looked for work?

Did you have any children under age 19 with unearned income more than \$950?

Did you adopt a child or begin adoption proceedings during 2021?

Purchases, Sales and Debt

Did you have any debts canceled, forgiven, or refinanced during 2021?

Did you start a new business, purchase a new rental property or farm, or acquire any new interest in any partnership or S Corporation during 2021?

Did you sell an existing business, rental property, farm, or any existing interest in any partnership or S Corporation during 2021?

Did you sell, exchange, or purchase any real estate in 2021? If so, please attach closing documents.

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Did you withdraw any amounts from your IRA or Roth IRA to acquire a principal residence?

Did you receive grants of stock options from your employer, exercise any stock options granted to you or dispose of any stock acquired under a qualified employee stock purchase plan?

Did you pay any student loan interest in 2021?

Did you take out a home equity loan in 2021?

Are you claiming a deduction for mortgage interest paid to a financial institution for which someone else received the Form 1098?

Itemized Deductions

Did you contribute property (other than cash) with a fair market value of more than \$5,000 to a charitable organization ?

Did you incur any casualty or theft losses during the year?

Miscellaneous

Did you install any energy property to your residence such as solar water heaters, generators or fuel cells or energy efficient improvements such as exterior doors or windows, insulation, heat pumps, furnaces, central air conditioners or water heaters ?

Did you or your spouse contribute to or establish a medical savings account (MSA) during 2021?

Did you or your spouse contribute to a Roth IRA or convert an existing IRA into a Roth IRA?

Did you withdraw any amounts from your IRA to pay for higher education expenses incurred by you, your spouse, your children or grandchildren?

Did you withdraw any amounts from an educational IRA?

Did you or your dependents incur any post secondary education expense such as tuition?

If you or your spouse are self-employed, are you or your spouse eligible to be covered under an employer's health plan at another job? If yes, how many months were you covered?

Did you move to a different home because of a change in the location of your job?

Did you pay an individual for domestic services performed in your home?

Did you or your spouse receive distributions from long-term care insurance contracts? If yes, please include Form 1099-L TC

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Did you make gifts of more than \$15,000 to any individual?

Did you have any foreign income or pay any foreign taxes during 2021?

Were you or your spouse a grantor or transferor for a foreign trust, have an interest in or a signature or authority over a bank account, securities account, or other financial account in a foreign country?

Have you received a punitive damage award or an award for damages other than for physical injuries or illness?

Did you engage in any bartering transactions?

Were you notified by the IRS or other taxing authority of any changes in your prior year returns?

Sale of Your Home

Did you sell your home in 2021?

If yes, did you own and occupy the home as your principal residence, for at least two years of the five-year period prior to the sale?

Did you ever rent out this property?

Did you ever use any portion of the home for business purposes?

Have you or your spouse sold a principal residence within the last two years?

At the time of the sale, was the residence owned by the taxpayer, spouse or both?

Severance/Retirement

Did you retire or change jobs in 2021?

Did you receive retirement/severance compensation? _____ If yes –date received _____

Income

Wages and Salaries - PLEASE ENCLOSE ALL COPIES OF YOUR CURRENT YEAR W-2'S

Interest Income – PLEASE ENCLOSE COPIES OF ALL FORMS 1099-INT OR OTHER INTEREST DOCUMENTS.

Dividend Income - PLEASE ENCLOSE COPIES OF ALL FORMS 1099-DIV OR OTHER DIVIDEND DOCUMENTS.

Pensions and Annuities - PLEASE ENCLOSE ALL FORMS 1099-R AND ANY NONTAXABLE DISTRIBUTION DETAILS.

Sale of Stocks, Securities, Capital Assets - PLEASE ENCLOSE ALL FORMS 1099-A, 1099-B 1099-S.

YT PHOENIX ENTERPRISE

TAX TELEPHONE 678.485.9932

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Description of Property	Date Sold	Date Acquired	Cost Basis	Gross Sales Price Less Commissions	Tax Withheld

Alimony Paid or Received

Paid or Recipient's Name	Social Security #	Amount	State Received

Miscellaneous Income

Unemployment compensation, Social Security, Railroad Retirement, IRA distributions - PLEASE ENCLOSE ALL FORMS W-2G, 1099-MISC, 1099-G, 1099-NEC and 1099-SSA, ETC.

Retirement Account Contributions - IRA IS, SEP's

Are you covered by an employer's retirement plan? _____

Taxpayer amount paid in 2022 for 2021 _____

Taxpayer amount paid by April 15, 2022 for 2021 _____

Spouse amount paid in 2022 for 2021 _____

Spouse amount paid by April 15, 2022 for 2021 _____

Other Matters

Were you or your spouse a full time student or disabled? _____

Did you pay an individual for services performed in your home? _____

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Educational Expenses

Student's Name	Social Security#	Amount 1 st two years	Amount Other
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Amount 1st 2 Years - Tuition and other expenses incurred during the one of the first two years of post secondary education (2021 amount only). _____

Amount Other - Tuition and other post secondary educational expenses not included in Amount during 1st 2nd Years _____

Student Loan Interest Paid - Please enclose 1098

Bank/Financial Institution Name	Amount Paid in 2021	Year payment began
_____	_____	_____
_____	_____	_____

Federal Estimated Tax Payments (please complete if you made any estimated tax payments)

Amount Paid	Date of Payment
_____	_____
_____	_____
_____	_____

2020 Overpayment applied to 2021 estimate (if any): _____
Estimated tax payments for 2022 paid in 2021 _____

ITEMIZED DEDUCTIONS

Medical & Dental

Prescription medicines & drugs _____
Medical insurance premiums paid _____
Long-term insurance premiums paid _____

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Long-term care expenses _____
Total insurance reimbursements _____
Number of miles traveled for medical care _____
Lodging _____
Doctors, dentist, etc. _____
Hospitals _____
Lab fees _____
Eyeglasses & contacts _____

Interest Paid - PLEASE ENCLOSE ALL FORMS 1098

Home mortgage interest to a financial institution _____
Deductible points (prepaid interest) _____
Other Mortgage Interest _____

Investment Interest Expense (interest on money borrowed for investment property)

Description	Amount	State
_____	_____	_____
_____	_____	_____
_____	_____	_____

Taxes Paid

Real estate _____
Personal property (including automobile taxes) _____
State Income Taxes Paid _____
State Income Taxes Refunds Received _____
Sales or excise tax paid on a new vehicle _____
Other taxes (specify) _____

Cash Charitable Contributions

Do you have evidence to support Current Year Contribution? _____

Description if over \$250?	Amount
_____	_____
_____	_____
_____	_____

Number of miles traveled performing volunteer work for qualified charitable organizations? _____

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If Non-cash Charitable Contributions Are Greater Than \$500

Name of Organization	Address	Property Description	Date of Donation
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How was value determined? (Appraisal, Thrift shop value, Catalog, Comparable Sales) _____

How was the non-cash contribution acquired? _____

Casualty or Theft Losses (property stolen or destroyed)

Please provide a description of the property, the date it was purchased, date it was lost, the amount of any insurance reimbursement for the property, the property's original cost, the value before the casualty, the value after the casualty, and the cost to replace it. Please indicate if the property was personal or business. Indicate the state that the loss took place in.

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PERSONAL BUSINESS - RENTAL PROPERTY

Type of business: _____

Name of business: _____

Business address: _____

Income

Income on form 1099 _____

Sales/ Rental _____

Interest _____

Other _____

Expenses

Advertising _____

Car & truck expense _____

Commissions/fees _____

Insurance _____

Mortgage _____

Legal & professional _____

Office expense _____

Rent / lease _____

Repairs / Maintenance _____

Supplies _____

Taxes / License _____

Travel _____

Meals _____

Entertainment _____

Utilities _____

Other _____

Depreciable Assets (Associated with the above business or rental property)

Property Description	Date Purchased	Cost	Prior Depreciation Taken
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Automobile make/year _____

Number of commuting miles _____

Number of miles driven for business or rentals? _____

Did your business have an inventory? _____

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Home Office Deduction

(Office used solely for business purposes and not a room with both business and personal uses)

Total square footage of your house: _____ Office square footage: _____

List expenses (mortgage interest, utilities, other costs):

_____	_____
_____	_____
_____	_____
_____	_____

Income from Partnerships, Estates & Trusts, S Corporations, REMI - PLEASE ENCLOSE ALL SCHEDULES K-1 AND SCHEDULES Q

What was the amount of health insurance paid by the entity (if any)? _____

Attach sheet listing any expenses associated with partnerships or other pass through entities.

_____	_____
_____	_____
_____	_____

Seller-Financed Mortgage Interest Income - Please provide name, social sec number of homebuyer, current year amount received, state where property is located.

Did YOU Sell Your Home in 2021? - PLEASE ENCLOSE A COPY OF YOUR CLOSING STATEMENT, 1099-S.

Child and Dependent Care Expenses

Total expenses paid in 2021 _____

Total expenses incurred and not paid in 2021 _____

Total Expenses incurred in 2021 but paid in 2021 _____

Employer provided dependent care benefits that were forfeited in 2021 _____

Total Dependent Care Expenses and Provider Information

Provider Name _____

Street Address City, State, Zip _____

Social Security Number or Tax I.D. _____

Name of child/person cared for:	Social Security #	Total Amount Paid
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_____	_____	_____
_____	_____	_____
_____	_____	_____

Please provide any other details that you feel are relevant to your tax status