

INCOME TAX ORGANIZER

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We are at the SW corner Pima and Swan.
The office is on the west end of the building.
Take the elevator to the second floor then turn right to get to Suite 214

_____ **Express Option** - Instead of scheduling a meeting with me, complete this tax organizer, attach the W-2's and other documents requested, include a list of questions you may have and mail, deliver, fax, or e-mail it all to me. After reviewing the information, I will contact you if I have any questions. For this express option my total fee will be discounted by \$20. However, the essential requirement for this express option is the completion by you of this tax organizer. Also, the discounted price is **not** available after March 20th. For those of you who prefer meeting with me, I will continue to do so.

Client contact _____
Phone Number _____
Best Time To Call _____

_____ **Meeting Option** (call for appointment)

APPOINTMENT: Day _____
Date _____
Time _____

Electronic Filing Options

1. Efile federal and state returns Yes/No
2. Email to you your copy of the returns Yes/No
3. Direct Deposit refund(s) to bank account Yes/No If yes, attach voided check.

SALE OF STOCKS OR BONDS (itemize or provide me broker's recap including **original cost**)

<u>Number of Shares & Name of Stock/Bond</u>	<u>Date Purchased</u>	<u>Date Sold</u>	<u>Total net sale proceeds (less commission)</u>	<u>Total cost (including commission)</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

<u>RENTAL INCOME</u>	Property "A"	Property "B"	Property "C"	Property "D"
Address	_____	_____	_____	_____
Total rents (3) \$	\$ _____	\$ _____	\$ _____	\$ _____

RENTAL EXPENSES:

	Property "A"	Property "B"	Property "C"	Property "D"
Auto mileage (21) _____ mi	_____ mi	_____ mi	_____ mi	_____ mi
Advertising (20) _____	_____	_____	_____	_____
Insurance (24) _____	_____	_____	_____	_____
Interest (mortg) (28) _____	_____	_____	_____	_____
Interest (other) (29) _____	_____	_____	_____	_____
Management Fees(27) _____	_____	_____	_____	_____
Repairs & maint. (30) _____	_____	_____	_____	_____
Improv/Major Purchase(s) _____	_____	_____	_____	_____
Supplies (31) _____	_____	_____	_____	_____
Property tax (32) _____	_____	_____	_____	_____
Utilities (33) _____	_____	_____	_____	_____
Homeowners Dues _____	_____	_____	_____	_____
Misc. _____	_____	_____	_____	_____

FOREIGN INVESTMENT - Do you have a 10% or larger interest in a foreign corporation, partnership or trust (ie Mexican land trust) or a foreign bank or investment account? **YES/NO**

ESTIMATED TAXES

	<u>Date Paid</u>	<u>Federal</u>	<u>Arizona</u>		<u>Date Paid</u>	<u>Federal</u>	<u>Arizona</u>
4-15 installment _____	(4)\$ _____	(15)\$ _____	_____	9-15 installment _____	(8)\$ _____	(19)\$ _____	_____
6-15 installment _____	(6)\$ _____	(17)\$ _____	_____	1-15- <u>12</u> payment _____	(10)\$ _____	(21)\$ _____	_____

Any substantial change in your *future* income, withholding or deductions?
If so, describe _____

HOUSEHOLD HELP? babysitting, cleaning, cooking, gardening, etc. in excess of \$1,700 a year? **YES/NO**

CHILD OR DISABLED DEPENDENT CARE paid for care of child(ren) under the age of 13 or a dependent who is physically unable to care for him or herself.

To Whom Paid	Soc. Sec. No. or Fed ID No.	Amount Paid
_____	_____	_____
_____	_____	_____
_____	_____	_____

SOCIAL SECURITY If you are **under** age 66 and receiving **Social Security**, did you have business profits or wages in 2011 of more than \$14,160. **YES/NO**

GIFT TAX RETURN Did you make **gifts** of more than \$13,000 to any one individual during the year? **YES/NO**

CLEAN FUEL CREDIT - Did you buy a hybrid vehicle during 2011 other than a Toyota or Lexus? **YES/NO**

IRA, SEP, OR KEOGH CONTRIBUTIONS

2011 contributions made or to be made to:
 IRA/Roth IRA/SEP/Keogh Plan (circle applicable)
 Client \$ _____ Spouse \$ _____
 or Maximum Allowed

Amounts **rolled over** in 2011 to a Roth IRA
 Client _____ Spouse _____

IRA Distribution? If so, 12-31-11 balance in all IRA
 Accts. Client _____ Spouse _____

CASUALTY LOSS Deductible only if casualty loss exceeds 10% of your income (Circle applicable item Storm, Fire, Theft, Car Accident, Other)
 #1 #2

Amount of Loss: \$ _____ \$ _____
 Insurance paid: \$ _____ \$ _____

JOB-RELATED EDUCATION EXPENSES (do not include that to meet **minimum** job requirements or to **qualify for new trade**)
 Cost of tuition, books, etc. \$ _____

ENERGY CREDIT Energy savings items such as qualified exterior windows and doors, insulation, central air conditioners, heat pumps, water heaters and furnaces. (see www.energystar.gov) \$ _____

QUALIFIED PRODUCTION ACTIVITIES Does the business you own manufacture, grow, or construct (including architecture and engineering)? **YES/NO**

MOVING EXPENSES (For work in new location)
 Miles moved (must be over 50 miles) _____ miles
 Cost of moving household goods \$ _____
 Motels in route \$ _____

MEDICAL, DENTAL & HOSPITAL EXPENSES

Medicare out of Soc Sec checks _____
 Medical, dental insurance (7) _____
 Amt to Health Savings Acct _____
 Nursing Home **insurance** (8) _____
 Travel for medical care (9) _____ miles
 Prescription drugs _____
 Lodging - Medical _____
 Nursing Home **care** _____
 Total doctor and dental _____
 Hospital _____
 Lab/x-ray _____
 Eyeglasses/contacts/supplies _____
 Ambulance _____
 Hearing aids/batteries _____
 Chiropractor _____
 Air conditioning (medically req'd) _____
 Therapy pool (medically req'd) _____
 Weight Loss Program (not food) _____
 Other Medical (10) _____

Medical insurance **reimbursement** on any of the above received by you. _____

TAXES PAID BY YOU

Vehicle license fees (total paid) (20) \$ _____
Real estate taxes on your home (13) \$ _____
Real estate taxes on other property
(except rental property listed above) \$ _____
Sales taxes on major purchases \$ _____
Describe _____
Trailer or boat tax (18) \$ _____
Foreign tax paid (21) \$ _____

INTEREST PAID BY YOU

	To Whom Paid	Amount
Home-1st mortgage	_____	\$ _____
Home-2nd mortgage	_____	\$ _____
2nd Home	_____ (23)	\$ _____
Mortgage Insurance paid in 2011 on loan that began after 2006	_____ (30)	\$ _____
Points paid on the origination of a new loan	_____	\$ _____
Investment Loan Int.	_____ (31)	\$ _____
Interest on student loans		\$ _____

CONTRIBUTIONS - DONATIONS

Checks or Cash with Receipts (Cash donations without receipts are not deductible)

Religious \$ _____
United Way \$ _____
AZ Public School
Extracurricular Activities \$ _____
AZ Scholarship Organization \$ _____
AZ Working Poor Org. \$ _____
Total **all other** contributions with checks or receipts \$ _____
(32)

Clothing/furniture/etc. - good or better condition

	Value	Original Cost
Salvation Army	\$ _____	\$ _____
Goodwill	\$ _____	\$ _____
Beacon	\$ _____	\$ _____
_____	\$ _____	\$ _____

(35)

Miles put on your car to help a charitable organization. (34) Miles _____

Organization _____

MISCELLANEOUS DEDUCTIONS AND CREDITS

Alimony paid \$ _____
Interest Forfeiture on CD \$ _____
Tuition, Fees and Books (1st four years of post high school) \$ _____
Other Tuition and Fees (post high school) yours and the kids. \$ _____
EE Bond interest - educational \$ _____
Uncollectible loans or
worthless securities \$ _____
IRA Custodial Fees \$ _____
Investment expenses \$ _____
Describe: _____
Tax preparation fee (if not prepared by us) \$ _____
Safe deposit box \$ _____
Gambling Losses (limited to gambling income) \$ _____

HOME OFFICE EXPENSES: Only if primary office of business or employment **and** the office area in your home is used **exclusively** for the home office.

Total home square feet _____
Office square feet _____
Rent _____ Utilities _____
Insurance _____ Repairs _____

BUSINESS MILEAGE (do not include to and from work) Do you have a **mileage log** for the business miles? **YES/NO**

	Car #1	Car #2
Total Miles	_____	_____
Business Miles	_____	_____

BUSINESS VEHICLE EXPENSES (optional)

	Car #1	Car #2
Gas, oil, lubrication	\$ _____	\$ _____
Repairs	\$ _____	\$ _____
Insurance	\$ _____	\$ _____
Tires, supplies, etc.	\$ _____	\$ _____
Lease Payments	\$ _____	\$ _____
Interest on Vehicle	\$ _____	\$ _____
Cost of New Car	\$ _____	\$ _____

EMPLOYMENT RELATED EXPENSES

	Taxpayer	Spouse
Business Meals (with receipts listing nature of meetings and individuals at meetings) \$ _____	\$ _____	\$ _____
Teacher supplies	\$ _____	\$ _____
Union/Prof. Dues	\$ _____	\$ _____
Job related books, magazines & newspapers \$ _____	\$ _____	\$ _____
Uniform expense (cost and upkeep)	\$ _____	\$ _____
Small tools & supplies for work	\$ _____	\$ _____
Safety equip. for work	\$ _____	\$ _____
Business long distance telephone calls.	\$ _____	\$ _____
Employment seeking expense	\$ _____	\$ _____
Other job related expenses (itemize)_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

OVERNIGHT OUT-OF-TOWN TRIPS

(Business & Conventions - must have receipts)

	#1	#2	#3
Where _____	_____	_____	_____
Purpose _____	_____	_____	_____
Miles			
Driven _____	_____	_____	_____
Airline \$ _____	\$ _____	\$ _____	\$ _____
Lodging\$ _____	\$ _____	\$ _____	\$ _____
Meals \$ _____	\$ _____	\$ _____	\$ _____
Taxi \$ _____	\$ _____	\$ _____	\$ _____
Other \$ _____	\$ _____	\$ _____	\$ _____
Amount Paid by employer(____)(____)(____)			

TEMPORARY OUT-OF-TOWN EMPLOYMENT

	#1	#2
Where employed _____	_____	_____
Employer _____	_____	_____
Dates out-of-town _____	_____	_____
Miles traveled _____	_____	_____
Cost of food	\$ _____	\$ _____
Cost of room	\$ _____	\$ _____

QUESTIONS: