Instructions: Print out this organizer, then complete it and bring it to our office at your scheduled tax appointment.

Tax Organizer for

(Year)

Taxpayer's Name _____

Keith A. Barfield, P.C. Certified Public Accountant 2727 LBJ Freeway, Suite 900 Dallas, TX 75234 (214) 630-8457 • FAX (214) 630-8456 keith@kbarfieldcpa.com • www.kbarfieldcpa.com Tax Organizer for _____ (year)

Please complete this organizer and bring it to your tax appointment. Your last year's tax return is an excellent guide for completing this organizer. Make a special note wherever you have additional information not on last year's return.

Personal Information

TaxpayerNameSocial Security NumberDate of BirthOccupation				
Spouse Name Social Security Number Date of Birth Occupation				
Mailing Address City		Stat	e 7ir	
Work Phone		Home Phone	د کار ک)
TaxpayerYesNoBlind	Spouse Yes	No	Marital Sta Married Single Widow(er)	
Filing Jointly Yes No				
Do you want to contribute \$3	to the Presidential G	Campaign Fun	d Yes No	
Dependent Children (other	5)			
Name	Social Security Number	Date of Birth	Relationship	Dependent's Income

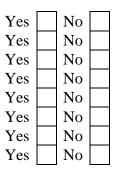
Please bring the following to your appointment:

Last year's tax return, unless we prepared it.

Copies of all W-2s, 1099s, supporting documents of income and expense. The mailing label given to you on the IRS tax booklet, if any.

Please answer the following questions:

6 1
Did you receive any notices from the IRS this past year?
Do you have a foreign bank account?
Did you pay to attend classes beyond high school?
Did you pay interest on a student loan this past year?
Did you receive any rental income from property?
Did you receive any farm income?
Do you have self-employment income or expense?
Were there any births, adoptions, or deaths in the family?



Amount

Income

Wages (attach W-2s)

Name of Employer Taxpayer Spouse

Interest Income (attach 1099-INT)

Payor (bank, etc.)

Dividends (attach 1099-Div)

Payor (company name)	Ordinary Div.	Capital Gain	Nontaxable

Partnership, S-Corp., and Other Income (attach K-1)

List the sources

Real Estate Sold (home, vacation property, bare land, etc.)

Description	Selling Price	Date Purchased	Cost

Investments Sold (stocks, bonds, mutual funds, other)

Name	Cost	Date Acquired	Date Sold	Selling Price

Individual Retirement Account (IRA)

Contributions for this past year	Amount	Roth	Regular
Taxpayer			
Spouse			

Withdrawals from IRA (attach 1099-R) Reason for withdrawals:

Other Pension or Annuity Income (attach 1099-R)

Payor	Reason for withdrawal

Other Income

Source	Amount
State income tax refund	
Commissions	
Unreported tips	
Installment sales payments received	
Alimony received	
Scholarships or grants	
Unemployment compensation	
Worker's compensation	
Disability income	
Other	

Expenses

Medical Expense (insurance, drugs, equipment, nursing, hospital, doctors, etc.)

List type:	Amount
Taxes Paid (other than on W-2 wage statements)	
Type of tax Federal income tax estimates (Form 1040-ES) State income tax Real estate tax Personal property tax Other	Amount
Interest Paid	Amount
Mortgage paid to:	
Child or Other Dependent Care Expenses Did you pay for dependent care this past year? Yes N Details: (Care provider, social security number, amount)	Io 🗌
Casualty or Theft Loss Did you have property stolen or damaged by storm, water, yes No Details:	fire, or accident this past year?
Charitable Contributions Paid by cash (check) Organization:	Amount

Moving Expenses (job related)

Did you move this past year due to change in job locations? Yes No Details:

Employment Related Expenses (not reimbursed)

Did you buy tools, uniforms, licenses, or pay dues or educational expenses in relation to your work this past year?

Yes No Details:

Investment Expenses

Item	Amount
Investment interest paid	
Safe deposit box rent	
Tax preparation fee	
Other	