

Please complete and return to:
Chip Capelli, Accountant, LLC
For an appointment contact:
Chip@ChipCapelli.com
(508) 487-8299

This Tax Organizer is designed to help you collect and report the information needed to prepare your 2020 income tax return. The attached worksheets cover income, deductions, and credits, and will help in the preparation of your tax return by focusing attention on your special needs.

Please enter your 2020 information in the designated areas on the worksheets. If you need to include additional information, you may use the back of a worksheet or an additional page.

When possible, 2019 information is included for your reference. You do not need to make any 2019 entries.

Note: The General Questions and Business/Investment Questions worksheets include a variety of questions designed to assist in completing your tax return. If you answer **yes** to any of the questions, be sure to provide the applicable details.

Please provide the following information:

- A copy of your 2019 tax return (if not in our possession).
- Original Form(s) W-2.
- Schedule(s) K-1 showing income or loss from partnerships, S corporations or estates or trusts.
- Copies of other compensation or pension documentation, such as Form 1099-MISC, Form 1099-R, or Form 1099-NEC.
- Form(s) 1099 or statements reporting dividend and interest income.
- Brokerage statements showing transactions for stocks, bonds, etc.
- Form(s) 1098 reporting interest paid, copies of real estate tax bills and other information relating to real property holdings.
- Copies of closing statements regarding the sale or purchase of real property.
- All other information notices you received, or any items you have questions about.

Thank you for taking the time to complete this Tax Organizer.

2020 TAX ORGANIZER

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

Attach all Form 1098-Ts and a list of your qualified education expenses.

Student Loan Interest Paid

Enter total 2020 qualified student loan interest.....

Attach Form(s) W-2 – Wages, Salaries, Tips and Other Compensation

Employer Name	2019 Amount
_____	_____
_____	_____
_____	_____

Attach Form(s) 1099-R – Distributions from Pensions, Annuities, Retirement, Profit-Sharing, IRAs, etc

1099-R Payer Name	2019 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	_____	_____
Medicare C premiums withheld	_____	_____
Medicare D premiums withheld	_____	_____

Attach Form(s) 1099-MISC – Miscellaneous Income and 1099-NEC

1099-MISC Payer Name and 1099-NEC Payer Name

Attach Form(s) 1099-INT – Interest Income

1099-INT Payer Name	2019 Amount
_____	_____
_____	_____
_____	_____
_____	_____

Attach Form(s) 1099-DIV – Dividend Income

1099-DIV Payer Name	2019 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.

	Taxpayer	Spouse
Retirement Plan Contributions		
Traditional IRA contributions made for 2020	_____	_____
Roth IRA contributions made for 2020	_____	_____
SEP, Keogh, Individual 401(k) or SIMPLE Contributions	_____	_____

2020 Deductions

Medical and Dental Expenses	2020 Amount	2019 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	2020 Amount	2019 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	2020 Amount	2019 Amount
_____	_____	_____
Points paid on loan to buy, build or improve main home Lender's Name	2020 Amount	
_____	_____	
Cash/Check/Credit Contributions	2020 Amount	2019 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	2020 Amount	2019 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 receive an Economic Impact (Stimulus) Payment?..... If yes, how much did you receive?..... <input style="width: 100px;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Did a lender cancel any of your debt in 2020? (Attach any Forms 1099-A or 1099-C).....	<input type="checkbox"/>	<input type="checkbox"/>
3 Did you make energy efficient improvements to your home or purchase any energy-saving property during 2020? If yes, please attach details.....	<input type="checkbox"/>	<input type="checkbox"/>
4 Did you purchase a motor vehicle or boat during 2020 ?..... If yes, attach documentation showing sales tax paid.	<input type="checkbox"/>	<input type="checkbox"/>
5 Did you purchase a hybrid or electric vehicle in 2020? If yes, enter year, make, model, and date purchased:	<input type="checkbox"/>	<input type="checkbox"/>
6 Did you donate a vehicle in 2020? If yes, attach Form 1098C.....	<input type="checkbox"/>	<input type="checkbox"/>
7 What was the sales tax rate in your locality in 2020 ? % State ID	<input type="checkbox"/>	<input type="checkbox"/>
8 Did your marital status change during 2020? If yes, explain:	<input type="checkbox"/>	<input type="checkbox"/>
9 Were you or your spouse permanently and totally disabled in 2020?	<input type="checkbox"/>	<input type="checkbox"/>
10 Do you have dependents who must file?.....	<input type="checkbox"/>	<input type="checkbox"/>
11 Do you have children who are under age 19 or a full time student under age 24 with investment income greater than \$2,200?...	<input type="checkbox"/>	<input type="checkbox"/>
12 Did you provide over half the support for any other person during 2020?	<input type="checkbox"/>	<input type="checkbox"/>
13 Did you incur adoption expenses during 2020 ?	<input type="checkbox"/>	<input type="checkbox"/>
14 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"/>
15 Did you receive any disability payments in 2020 ?	<input type="checkbox"/>	<input type="checkbox"/>
16 Did you receive tip income not reported to your employer?	<input type="checkbox"/>	<input type="checkbox"/>
17 Did you buy, sell, refinance, foreclose or abandon a principal residence or other real property in 2020 ? If yes, attach closing or escrow statements, 1099-C or 1099-A forms.....	<input type="checkbox"/>	<input type="checkbox"/>
18 If you sold a home, did you claim the First-Time Homebuyer Credit when you purchased it?.....	<input type="checkbox"/>	<input type="checkbox"/>
19 Did you incur any casualty or theft losses during 2020 ?.....	<input type="checkbox"/>	<input type="checkbox"/>
20 Did you incur any non-business bad debts?.....	<input type="checkbox"/>	<input type="checkbox"/>
21 Did you pay any individual for domestic services in 2020 ?.....	<input type="checkbox"/>	<input type="checkbox"/>
22 Did you take a retirement account distribution related to the corona virus or a natural disaster?.....	<input type="checkbox"/>	<input type="checkbox"/>
23 Did you buy or sell any stocks or bonds in 2020 ?	<input type="checkbox"/>	<input type="checkbox"/>
24 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"/>
25 Did you incur any moving expenses? If yes, attach details.....	<input type="checkbox"/>	<input type="checkbox"/>
26 Did you receive any income not included in this Tax Organizer?..... If yes, please attach information.	<input type="checkbox"/>	<input type="checkbox"/>
27 Do you expect your income and deductions in 2021 to be the same as 2020 ?	<input type="checkbox"/>	<input type="checkbox"/>
28 If no, attach explanation of changes expected.	<input type="checkbox"/>	<input type="checkbox"/>
29 Did you receive Form 1095-A (Health Insurance Marketplace Statement)? If so, please attach	<input type="checkbox"/>	<input type="checkbox"/>
30 At any time during 2020, did you sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?.....	<input type="checkbox"/>	<input type="checkbox"/>
31 a Did you obtain a Paycheck Protection Program (PPP) loan?	<input type="checkbox"/>	<input type="checkbox"/>
b If yes, has any portion of that loan been forgiven?.....	<input type="checkbox"/>	<input type="checkbox"/>
32 If you paid any alimony, enter recipient's SSN: _____ Alimony paid: _____	<input type="checkbox"/>	<input type="checkbox"/>
33 Enter your state of residence..... Taxpayer _____ Spouse _____	<input type="checkbox"/>	<input type="checkbox"/>

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) if your bank account information has changed. What type of account is this?..... Checking <input type="checkbox"/> Savings <input type="checkbox"/>	<input type="checkbox"/>	<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.)
